



The Vision of The Grapevine Center, Inc.

*Blending good people with better choices for the best recovery*

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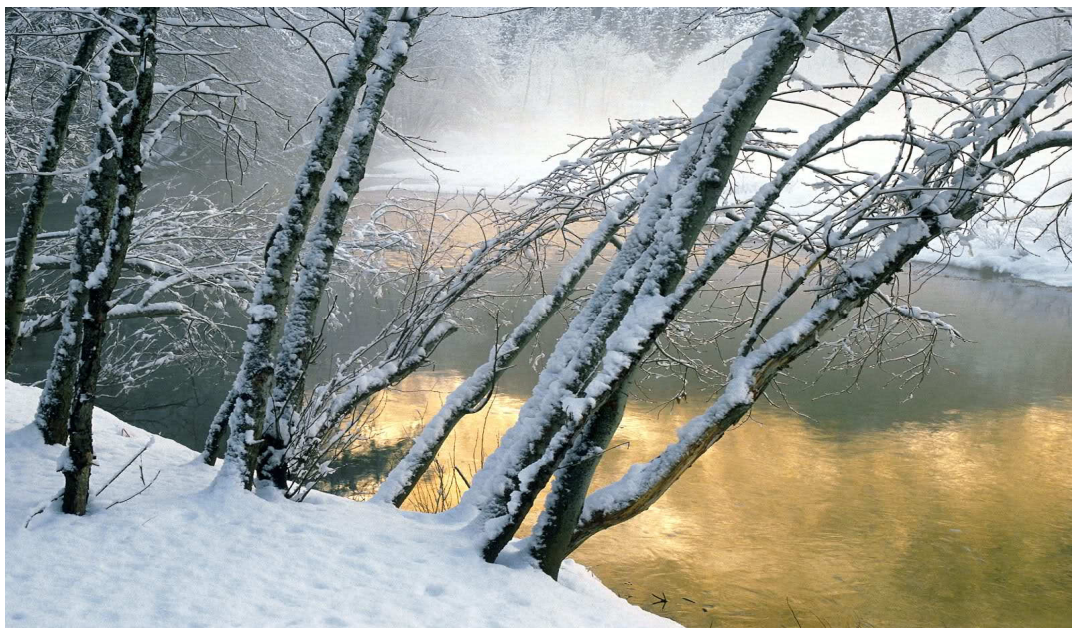
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# Heard It Through the Grapevine



## UPCOMING EVENTS

December 3, Kraynaks 9:30 AM  
 December 5, Pool Tournament 2 PM  
 December 6, Coalition Party  
 December 8, Wal Mart 11:30 AM  
 December 9, Community/Volunteer Meeting 2PM  
 December 12, MHA Tea 9:30 AM  
 December 12, Dice Tournament 2 PM  
 December 15, Pool Tournament 2PM  
 December 16, Western Region 9 AM  
 December 19, Community Meeting 2 PM  
 December 19, GV Board Meeting 5:30 PM  
 December 20, Butler CSP 12 Noon,  
 December 20, Grapevine Christmas Party  
 December 21, Pool Tournament 2PM  
 December 22, Craft 2 PM

December 24, Air Hockey Tourn. 2 PM  
 December 25, Christmas  
 December 27, Birthday/Bingo 2 PM  
 December 28, Dice tournament 2 PM  
 December 29, Pool Tournament 2 PM



Butler County United Way

## Poetry Corner

**Please untie the knots that are invading my mind, my heart and my life**

**Please remove the have knots, the can knots and the do knots that invade my mind.**

**Please erase the will knots, may knots and might knots that invade my heart.**

**Please release me from the could knots, would knots and should knots that invade my life.**

**Most of all, dear God, I ask that you remove from my mind, my heart, and my life all of the am knots that have allowed me to hold back.**

**Please erase from my mind the thought that I am not good enough.**

**Please remove from my heart that I am not loved enough.**

**Please untie from my life everything that I clutch that supports the belief that I am not enough.**

**Today, dear God, I come to you humbly and reverently asking that you untie, eliminate and erase all of the knots that have invaded every aspect of my life.**

**For your mercy and your grace I am so grateful.**

**Let these words take on the presence of the Holy Spirit to become living conditions in my life.**

**And so it is!**

**From Every Day I Pray: Prayers for Awakening to the Grace of Inner Communion—lyanla Vanzant**

## Poetry Corner, Continued

### How to stay well (or get better, if you're not so well to begin with)

1. Do things that bring you a sense of fulfillment, joy, and purpose, that validate your worth. See your life as your own creation, and strive to make it a positive one.
2. Pay close and loving attention to yourself, tuning into your needs on all levels, taking care of yourself, nourishing, supporting, and encouraging yourself.
3. Release all negative emotions-resentments, envy, fear, sadness, anger. Express your feelings appropriately; don't hold on to them. Forgive yourself.
4. Hold positive images and goals in your mind, pictures of what you truly want in your life. When fearful images arise, re-focus on images that evoke feelings of peace and joy.
5. Love yourself, and love everyone else. Make loving the purpose and primary expression in your life.
6. Create fun, loving, honest relationships, allowing for the expression and fulfillment of needs for intimacy and security. Try to heal any wounds in past relationships, as with old lovers, and mother and father.
7. Make a positive contribution to your community, through some kind of work or service that you value and enjoy.
8. Make a commitment to health and well-being, and develop a belief in the possibility of total health. Develop your own healing program, drawing on the support and advice of experts without becoming enslaved to them.
9. Accept yourself and everything in your life as an opportunity for growth and learning. Be grateful. When you screw up, forgive yourself, learn what you can from the experience, and then move on.
10. Keep a sense of humor.

From [In Surviving and Thriving with Aids.](#)

Book Review of ON OUR OWN By Judi Chamberlin  
Book Review by Jack Ferguson

“On Our Own” is the first person account of Judi Chamberlin’s journey through the mental health system. This account tells of her deep suffering that she experienced with mental health services, and of her eventual triumph.

Judi was one of the pioneers in the Peer Support Movement. She worked tirelessly for the creation of patient controlled services throughout the country. Perhaps more than any other individual, she is responsible for the creation of Drop-In Centers on a national level. It was her vision and her efforts that led to the results we see today. All of us here at the Grapevine are indebted to her.

During the 1960’s Judi spent time in six different institutions, and she came to be very disillusioned in the mental health system. I will summarize some of her personal philosophy.

Power and control, not illness or treatment, is what the mental health system is all about. People who want real help with their problems are badly served by a system of coercion that masquerades as treatment. Once inside an institution all patients, voluntary or involuntary, are treated similarly. Patients who expect to find advice and counseling get psychotropic medication instead.

Mental illness is less a medical scientific term than it is a judgment that the person so labeled has behaved improperly. People who are labeled mentally ill become part of a system that deprives them of control over their own lives, as part of their treatment. A natural consequence of being subjected to this “treatment” is a feeling of depersonalization. The whole experience of mental hospitalization promotes weakness and dependence, and is antitherapeutic in nature.

Mental hospitals are similar to prisons——they exist to contain various kinds of unwanted people. The reality is that mental hospitals are cold, dehumanizing places.

Situations that often end in mental hospitalizations involve emotional conflict, and it is the weakest participant in these conflicts who risks ending up as a mental patient. A diagnosis of mental illness lets family members and mental health professional off the hook——the “illness” of the weakest participant is responsible for whatever difficulties have been occurring.

The casual disregard for individuals that is commonly displayed by mental health professionals communicates this unspoken message; good patients are patients who know their place. The process of psychiatric diagnosis and hospitalization continues to be about control and power.

Judi was a great admirer of radical psychiatrist Thomas Szasz. Szasz contended that institutional psychiatrists are the agents not of patients, but of the people who would lock them away. What most psychiatrists would term “mental illness”, Szasz referred to as “problems in living”. Szasz was harshly critical of conventional psychiatric hospitalizations.

Judi Chamberlin was highly in favor of mental patient consciousness——raising groups. She believed that there was an important first step in former mental patients growing awareness. This step is the realization that a person has suffered at the hands of a mental health system that was supposed to have helped him/her. These persons would discover that the dissatisfactions in their lives were not necessarily the “symptoms of mental illness”. These persons struggling to define themselves and their lives faced a very hostile environment in mental hospitals.

Judi advocated that troubled individuals, looking to get their lives in order, are best served by alternative facilities rather than the traditional mental health system. People who are motivated to make changes in their lives do not need the mindless routine of a mental hospital. In alternative facilities, people come willingly because they are seeking help. Here there is no deadening institutional routine or abuse of power.

**Continued On Page -8-**

# Poetry Corner Continued

## Ten Spiritual Practices for 2008 By Lynne Bundesen [Dr.Well.com News]

Spirit is infinite. It is not bound by any age, location, not even by gravity. Spirit lifts up, releases, frees and comforts us collectively and individually. It is often our only refuge and friend. It is a great paradox that the infinite is found in small steps that can be taken at home, the office, and on the road.

Not all of the following are “actions” in the traditional sense; some are subtle shifts of perspective that can ultimately be more powerful than any action we might take:

1. Resolving to bring Spirit nearer and dearer to us is the first step. Motives lead to action.
2. Don't be afraid of good. Good is natural, and though it may not seem as interesting as the convoluted by-ways of dramatic horror, good is enriching and normal.
3. Make a spiritual text your own. Pick one that speaks to you: The Psalms of the Bible; The Bhagavad-Gita; a poem by the Persian mystic Rumi, or for those who would like an easier start, perhaps the works of Khalil Gibran. Commit to reading ten minutes each and every day. The effect is both immediate and cumulative, and is unique to you alone.
4. Watch your thoughts. Listen and discern. We hear so much of our own thought that often the Voice of Spirit is distant and muffled. Listen to good ideas, ideas that benefit you and others, and elevate and nature those above thoughts that urge revenge and fear. Look for the profitable and hopeful.
5. Give up an opinion. Heavily weighted opinions wear us down. Simply surrender one, let it go. You alone know which of your opinions, your prejudices, is a burden to you and the world. Let that one go. And then, another.
6. Take a day off. Once a week, take a day for not shopping, not watching television, and not participating in business. A Sabbath day is not a useless, outdated, boring concept, but a day for refreshment, for walking, writing letters, arranging flowers, reading, cooking a meal that is better than usual, loving yourself and all life around you. The world will survive without you and you will be the richer for the day.
7. Breathe deeply. Practice breathing. It's free. Dr. Andrew Weil has three simple breathing exercises that clear the mind and help to calm stress and create wholeness.
8. Adopt a pet. Yes, they can be a nuisance, but they can also add years to your life, provide solace, and give focus outside the self. Even fish in a tank bring serenity and comfort. If a pet is not possible, bring plants into your home and take an interest in them, how they grow, what they need to thrive.
9. Walk. The view from the sidewalk, the park trail, the nature path is not the view from behind the wheel of a car. Look up and out and see what is around you with a 30-minute daily walk, no matter the weather. Remember the aphorism: there is no bad weather, only bad clothes.
10. Do something for someone else each day of your life. Count it a poor day when you have not volunteered, gone to a community, or church, or faith meeting, or taken cookies to a neighbor. We find our own spirituality in our connection to others' good. There is always something we can do for another and our motives lead us to action, a spiritual life, and a connection.

## Grapevine Personal Stories

**Nancy Reeder** has been a regular at the Grapevine Center since it opened in its' former location. Nancy works on the Warmline, and has done so since 2002. Nancy says she loves her work on the Warmline, and plans to continue indefinitely. Nancy has one child who is now eighteen years old. In her spare time Nancy enjoys eating out, shopping, bowling, crocheting, doing plastic canvas, writing poetry and hanging out with her friends at the Grapevine Center.

**Bret Kemper** has been employed at the Grapevine Center for 7 years. He works for C.F.S.T. and I.M.4.Q. and says he greatly enjoys his work. Bret has two brothers and is the middle child. In his spare time Bret likes to workout with a heavy bag and a punching bag. Bret also plays in a pool league and considers this his primary recreational interest. Bret also plays the drums, and enjoys video games quite a lot. Bret was trained as a dog groomer and later became an instructor at the school.

**Paul Jones** is an Americorp employee and works as a peer support worker. He also drives the van, picking up people and driving consumers home in the evening. Additionally, he coordinates much of the moving program. In his spare time Paul is in college to become a social worker. Paul plays the guitar, alto sax, acoustic guitar and the piano/keyboard. Paul also has a membership in the YMCA and likes to play basketball for relaxation. Paul's birthday is on December 3rd.



Personal Stories Continued on Page -17-

# Cooking Corner

## ICE CREAM PUMPKIN PIE



By: [CindyAnn](#)

### Ingredients

**1 1/2 pints vanilla ice cream, softened**

- **3 eggs**
  - **1 3/4 cups pumpkin puree**
  - **3/4 cup white sugar**
  - **1/2 teaspoon salt**
  - **1 teaspoon ground cinnamon**
  - **1/4 teaspoon ground ginger**
  - **1/4 teaspoon ground nutmeg**
- 2 (9 inch) unbaked pie shells**

### Directions

- 1. Preheat oven to 425 degrees F (220 degrees C.) Place ice cream near the warm oven to soften.**
- 2. In a large bowl, whisk together the eggs. Stir in the pumpkin puree, sugar, salt, cinnamon, ginger, and nutmeg. Mix in soft ice cream until smooth. Pour filling into two 9 inch pie shells.**

**Bake for 15 minutes in the preheated oven. Reduce temperature to 350 degrees F (175 degrees C), and bake an additional 30 to 40 minutes, or until filling is set.**

Continued from page -4-

There were two alternative services that the author visited, and believed merited special noteworthy attention. These were the two alternative facilities during the 1970's that gave her the inspiration to see what the future of peer support services might become. The Mental Patients Liberation Project in New York City and the Mental Patients Association in Vancouver, were these inspiration.

The author considered there to be three alternative service models. In the partnership model, professionals and nonprofessionals work together to provide services. There is a clear distinction between those who give help and those who receive help. At the time of the writing of this book, most of the alternative services followed the partnership model. The author considered this model to be an alternative in name only, and not a legitimate option.

In the supportive model, mental health professionals are excluded. Membership is open to nonpatients and expatients, who are considered as equals. In the separatist model, professionals and nonpatients are excluded. Expatients plan the service and are actively involved in running it.

The author believed that the separatist model promoted the greatest degree of expatients confidence and competence. A service run by expatients illustrates that expatients can be successful without supervision or control. She believed that an alternative service should always follow the lines of the separatist model. The presence of nonpatients could make it difficult for expatients to talk frankly about their experiences in a mental hospital. Expatients might hesitate to express their beliefs around nonpatients, who might be influenced by mental illness stigma and stereotypes.

Judi thought that alternative services following the separatist model should always provide certain specific elements for its consumers. First the service must provide help with needs as defined by the consumers. Second, participation in the service must be voluntary. Third, consumers must be able to choose to participate in some aspects of the service without being required to participate in other aspects. Fourth, help is provided by consumers to one another, and may also be provided by others selected by the consumers. Fifth, overall direction of the service is in the hands of consumers, including policy decisions. Sixth, the responsibility of the service is to consumers, and not to relatives or treatment institutions. Information about consumers must not be transmitted to other parties, without the consent of the individual consumers.

It can be seen in hindsight that the author was laying down principles that would become the fundamental basis of Drop-In Center philosophies.

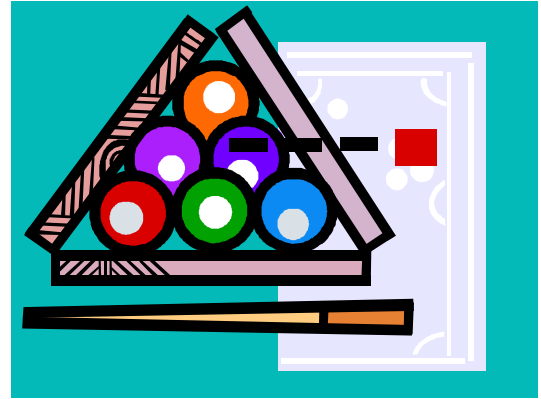
Judi believed that real change is impossible in a system that continued to transform people into mental patients. Alternatives needed to be provided in which people could help one another and reach out to one another. As Judi stated, "By replacing so-called professional expertise with human concern, and by replacing psychiatric labeling with the recognition of our shared humanity, we create the opportunity for all of us to change and develop."



# POOL TOURNAMENTS

November 1, 2011

1. Greg Smith
2. Tammy Gibson
3. Audrey
4. Bret Kemper
5. Bob Niedzielski
6. Jerry McWilliams
7. Susan Tkacs
8. John Baron
9. Larry Gerstner
10. John Vaughn
11. Jim Rump
12. Shirley Jackson



Winner: Bret Kemper

November 23, 2011

1. Jim Rump
2. Tammy Gibson
3. Ken Freehling
4. Bob Rearick
5. Nancy Reeder
6. Jerry McWilliams
7. Sean Kramer
8. Sue Steffy
9. Dalton Best
10. David Walowen
11. Shane Whipkey
12. Shirley Jackson

Winner: Nancy Reeder



# POOL TOURNAMENTS

October 19, 2011

1. Jim Rump
2. Tammy Gibson
3. Tim Strong
4. Bob Rearick
5. Thomas Purcell
6. Jerry McWilliams
7. Bob Rearick, Jr.
8. John Salvatori
9. Kevin Willacy
10. Ray Cox
11. Kayla McDade
12. Joe Miller

**Winner: Bob Rearick**

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October 20, 2011

1. Jim Rump
2. Sean Kramer
3. Koolie Anderson
4. Ray Cox
5. Shirley Jackson
6. Joe Miller
7. Kayla McDade

**Winner: Sean Kramer**



## POETRY CORNER

# IF

by  
*Rudyard Kipling*

If you can keep your head when all about you  
Are losing theirs and blaming it on you,  
If you can trust yourself when all men doubt you  
But make allowance for their doubting too,

If you can wait and not be tired by waiting,  
Or being lied about, don't deal in lies,  
Or being hated, don't give way to hating,  
And yet don't look too good, nor talk too wise:

If you can dream—and not make dreams your master,  
If you can think—and not make thoughts your aim;  
If you can meet with Triumph and Disaster  
And treat those two impostors just the same;

If you can bear to hear the truth you've spoken  
Twisted by knaves to make a trap for fools,  
Or watch the things you gave your life to, broken,  
And stoop and build 'em up with worn-out tools:

If you can make one heap of all your winnings  
And risk it all on one turn of pitch-and-toss,  
And lose, and start again at your beginnings  
And never breath a word about your loss;

If you can force your heart and nerve and sinew  
To serve your turn long after they are gone,  
And so hold on when there is nothing in you  
Except the Will which says to them: "Hold on!"

If you can talk with crowds and keep your virtue,  
Or walk with kings—nor lose the common touch,  
If neither foes nor loving friends can hurt you;  
If all men count with you, but none too much,

If you can fill the unforgiving minute  
With sixty seconds' worth of distance run,  
Yours is the Earth and everything that's in it,  
And—which is more—you'll be a Man, my son!

## EARTH PRAYER

By  
Mark Nepo

○ Endless Creator, Force of Life, Seat of the Unconscious,  
Dharma, Atman, RA, Qalb, Dear Center of our Love,  
Christlight, Yahweh, Allah, Mawu, Mother of the Uni-  
verse...

Let us when swimming with the stream, become the  
stream...

Let us, when moving with the music, become the music...

Let us, when rocking the wounded, become the suffer-  
ing...

Let us live deep enough till there is only one direction...  
And slow enough till there is only the beginning of time...

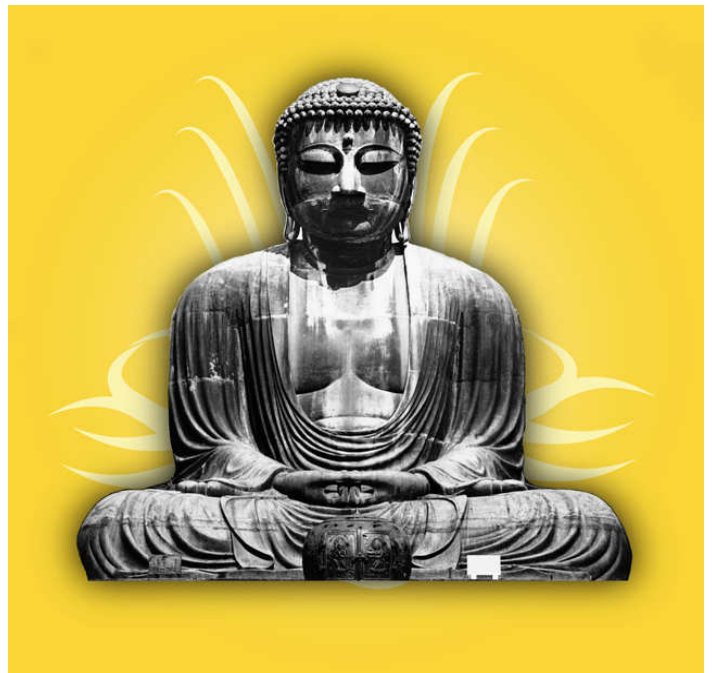
And loud enough in our hearts till there is no need to  
speak...

Let us live for the grace beneath all we want, let us see it  
in everything and everyone, till we admit to the mystery  
that when I look deep enough into you, I find me, and  
when you dare to hear my fear in the recess of your  
heart, you recognize it as your secret which you thought  
no one else knew...

○ let us embrace that unexpected moment of unity as the  
atom of God...

Let us have the courage to hold each other when we  
break and worship what unfolds...

○ nameless spirit that is not done with us, let us love  
without a net beyond the fear of death until the speck of  
peace we guard so well becomes the world...



October 31, 2010

1. Jerry McWilliams
2. Tammy Gibson
3. Shirley Bell
4. Ray Cox
5. Kayla McDade
6. Anthony Caloeron
7. John Salvatori
8. Shirley Jackson
9. Nancy Reeder
10. Eric Butia
11. Sean Kramer



**Winner:**  
**Eric Butia**



## Poetry Corner Continued

### Prayer For Healing

**We who need help pray for the healing of our physical, emotional, and spiritual pains and difficulties. Source of all blessings and power, heal us, empower us, and bless us. We realize that we can't do it alone and we ask for blessings from all those who have the power to help, elevate and heal.**

**We ask for blessings from the sacred that is above us.**

**We ask for the support of those around us, our friends, families, and communities.**

**We pray for wisdom to find ways to help ourselves.**

**We ask for guidance to ease our way and heal our hearts.**

**May we open ourselves to the mystery that is beyond us, the source from which we are never apart.**

**May energy pour through us for the benefit of one and all.**

**May we dance and lift up our hands and our hearts in praise and rejoicing.**

——**Lama Surya Das**

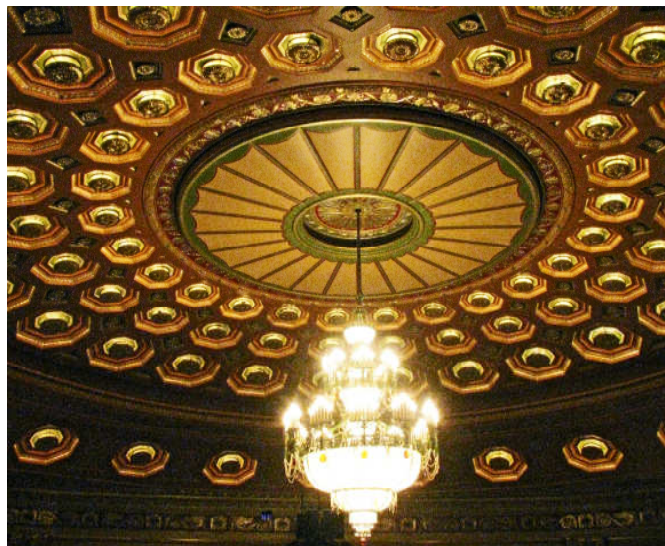
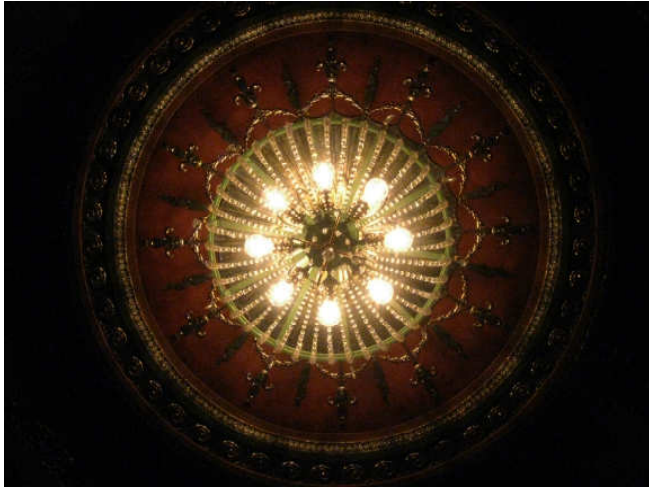
**P.268, Awakening to the Sacred**

### Salutation to the Dawn

**Look to this day!**  
**For it is life, the very life of life,**  
**In its brief course**  
**Lie all the verities and realities**  
**Of your existence:**  
**The bliss of growth**  
**The glory of action**  
**The splendor of beauty,**  
**For yesterday is but a dream**  
**And tomorrow only a vision,**  
**But today well lived makes**  
**every yesterday**  
**a dream of happiness**  
**And every tomorrow a vision of**  
**Hope.**

**Look well, therefore, to this day!**  
**Such is the salutation of the**  
**Dawn.**

**By Kalidasa, Indian Dramatist**



Photos are by Brian Monahan. You can purchase copies from Brian.

# Post-Traumatic Stress Disorder

Post-traumatic Stress disorder (PTSD), once called shell shock or battle fatigue syndrome, is a serious condition that can develop after a person has experienced or witnessed a traumatic or terrifying event in which serious physical harm occurred or was threatened. PTSD is a lasting consequence of traumatic ordeals that cause intense fear, helplessness, or horror, such as a sexual or physical assault, the unexpected death of a loved one, an accident, war or natural disaster. Families of victims can also develop post-traumatic stress disorder, as can emergency personnel and rescue workers.

Most people who experience a traumatic event will have reactions that may include shock, anger, nervousness, fear, and even guilt. These reactions are common; and for most people, they go away over time. For a person with PTSD, however, these feelings continue and even increase, becoming so strong that they keep the person from living a normal life. People with PTSD have symptoms for longer than one month and cannot function as well as before the event occurred.

## What are the symptoms of PTSD?

Symptoms of PTSD most often begin within three months of the event. In some cases, however, they do not begin until years later. The severity and duration of the illness vary. Some people recover within six months, while others suffer much longer.

Symptoms of PTSD often are grouped into three main categories, including:

**Re-living:** People with PTSD repeatedly re-live the ordeal through thoughts and memories of the trauma. These may include flashbacks, hallucinations and nightmares. They also may feel great distress when certain things remind them of the trauma, such as the anniversary date of the event.

**Avoiding:** The person may avoid people, places, thoughts, or situations that may remind him or her of the trauma. This can lead to feelings of detachment and isolation from family and friends, as well as a loss of interest in activities that the person once enjoyed.

**Increased arousal:** These include excessive emotions; problems relating to others, including feeling or showing affection; difficulty falling or staying asleep; irritability; outbursts of anger; difficulty concentrating; and being “Jumpy” or easily startled. The person may also suffer

physical symptoms, such as increased blood pressure and heart rate, rapid breathing, muscle tension, nausea, and diarrhea.

Young children with PTSD may suffer from delayed development in areas such as toilet training, motor skills and language.

## Who gets PTSD?

Everyone reacts to traumatic events differently. Each person is unique in his or her ability to manage fear and stress, and to cope with the threat posed by a traumatic event or situation. For that reason, not everyone who experiences or witnesses a trauma will develop PTSD. Further, the type of help and support a person receives from friends, family members and professionals following the trauma may influence the development of PTSD or the severity of symptoms.

PTSD was first brought to the attention of the medical community by war veterans, hence the names shell shock and battle fatigue syndrome. However, PTSD can occur in anyone who has experienced a traumatic event. People who have been abused as children or who have been repeatedly exposed to life-threatening situations are a greater risk for developing PTSD. Victims of trauma related to physical and sexual assault face the greatest risk for PTSD.

## How Common Is PTSD?

About 3.6% of adult Americans—about 5.2 million people suffer from PTSD during the course of a year, and an estimated 7.8 million Americans will experience PTSD at some point in their lives. PTSD can develop at any age, including childhood. Women are more likely to develop PTSD than are men. This may be due to the fact that women are more likely to be victims of domestic violence, abuse, and rape.

## How IS PTSD Diagnosed?

If symptoms of PTSD are present, the doctor will begin an evaluation by performing a complete medical history and physical exam. Although there are no laboratory tests to specifically diagnose PTSD, the doctor may use various tests to rule out physical illness as the cause of the symptoms.

If no physical illness is found, you may be referred to a psychiatrist or psychologist, mental health professionals who are specially trained to diagnose and treat mental

Continued on Page -16-

illnesses. Psychiatrists and psychologists use specially designed interview and assessment tools to evaluate a person for an anxiety disorder. The doctor bases his or her diagnosis of PTSD on reported symptoms, including any problems functioning by the symptoms. The doctor then determines if the symptoms and degree of dysfunction indicate PTSD. PTSD is diagnosed if the Person has symptoms of PTSD that last for more than one month.

### **How Is PTSD Treated?**

The goal of treatment is to reduce the emotional and physical symptoms associated with PTSD, to improve daily functioning and to help the person better cope with the event that triggered the disorder. Treatment for PTSD may involve psychotherapy (a type of counseling), medication, or both.

### **Medication**

Doctors use antidepressant medications to treat PTSD and to control the feelings of anxiety, and its associated symptoms, including selective serotonin uptake inhibitors (SSRI's), such as Paxil, Celexa, Luvox, Prozac, and Zoloft, and Tricyclic antidepressants such as Elavil, and Doxepin. Tranquilizers such as Atavan and Klonopin; mood stabilizers such as Depakote, Lamictal; and neuroleptics such as Seroquel, and Abilify, are sometimes used.

### **Psychotherapy**

Psychotherapy for PTSD involves helping the person learn skills to manage symptoms and develop ways of coping. Therapy also aims to teach the person and his/her family about the disorder, and help the person work through the fears associated with the traumatic event. A variety of psychotherapy approaches are used to treat people with PTSD, including :

Cognitive Behavior Therapy, which involves learning to recognize and change thought patterns that lead to troublesome emotions, feelings, and behavior.

Exposure Therapy, a type of cognitive behavior therapy that involves having the person relive the traumatic experience, or exposing the person to objects or situations that cause anxiety. This is done in a well-controlled and safe environment. Exposure therapy helps the person confront the fear and gradually become more comfortable with situations that are frightening and cause anxiety. This has been very successful at treating PTSD.

Psychodynamic Therapy focuses on helping a person examine personal values and the emotional conflicts

### **What is the outlook with people with PTSD?**

Recovery from PTSD is a gradual and ongoing process. Symptoms of PTSD seldom disappear completely, but treatment can help sufferers cope more effectively. Treatment can lead to fewer and less intense symptoms as well as a greater ability to cope by managing feelings related to the trauma.

Research is going into factors that lead to PTSD and to finding new treatments.

### **Can PTSD be Prevented?**

Some studies suggest that early intervention with people who have suffered a trauma, may reduce some of the symptoms of PTSD or prevent it all together.

(Reprinted from WebMD [www.webmd.com/anxiety-panic/guide/post-traumatic-stress-disorder](http://www.webmd.com/anxiety-panic/guide/post-traumatic-stress-disorder) suffered a trauma, may reduce some of the symptoms of PTSD or prevent it all together.

(Reprinted from WebMD [www.webmd.com/anxiety-panic/guide/post-traumatic-stress-disorder](http://www.webmd.com/anxiety-panic/guide/post-traumatic-stress-disorder)



# GRAPEVINE PERSONAL STORIES CONTINUED

**Barb Cress**, affectionately known as Grandma to most Grapevine Regulars, is the Coordinator of social activities here at the Grapevine Center. She organizes all the activities on the calendar and makes up the calendar for each month. Barb frequently goes on the Grapevine outings, such as Kraynaks, Wal Mart, bowling outings, and miniature golf, to name just a few. Barb also plans and supervises, the popular Sunday meals here at the center. She is married and has five children, 10 grandchildren, and five great-grandchildren, and has been an employee at Grapevine for 4 years. In her spare time Barb likes to bowl, crochet, and spend time with her family.

## **Phil Herbert**

Phil is an Americorp employee. Among his duties are tasks such as manning the front desk, doing special projects for Bette, driving the van doing pickups and taking people home at night, and making coffee. In his spare time Phil likes to spend time with his three year old son, Gabriel. He likes to exercise at the YMCA. Phil likes to take extended vacations at islands throughout the world, such as, the Philippines, the Canary Islands, in Vietnam, Thailand, China, Russia, and the Madeira Islands, to name just a few. Phil says he likes to go on his own and backpack it so that he can get the experience of really living there.

## **James Russell**

James is a peer support/outreach worker and has been with the Grapevine Center for eight years. He works with people who are homeless, and people with drug and alcohol issues. In his spare time James is a football coach. He coaches the Butler County Bears, a semi-pro team, and the Butler little Tornados, eleven and twelve year olds. James is also heavily involved in Narcotics Anonymous; attending meetings and chairing meetings. James has five children, two of whom are college graduates.



graduates. Around Grapevine James is always available with a sympathetic ear.