



# Infusion

Vancouver Women's Health Collective

## The Collective

The Vancouver Women's Health Collective is a volunteer-based, charitable, non-profit organization which has been in existence since 1972. We work to promote and support the idea of women helping women to help themselves, and to help women develop a pro-active approach to their own health care.

We carry out a range of services and activities for women in Greater Vancouver and across BC, including a health information centre and helpline, health and holistic practitioner and therapist files, educational workshops, support groups, publications, and advocacy.

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## Infusion

Infusion, the Vancouver Women's Health Collective's newsletter, is a forum to connect us with our members and the community at large around women's health issues and activities at the Collective.

Submissions relevant to women's health or well-being are always welcome and participation in this forum is much encouraged. Leave any messages at the collective, or drop a note in our newsletter box. Infusion is published three times a year.

All opinions expressed are those of the writers and not necessarily those of the VWHC.

## Newsletter Committee

Susan Boroevich  
A.J. Gray  
Anne Merrett-Hiley  
Silvia Musholt  
& the Wild Wimmen of the  
Vancouver Women's Health  
Collective.

## It's All In Your Head!

Silvia Musholt

Where are the mind-body specialists? There are, of course, specialists for physiological illnesses. There is psychotherapy. Admittedly, there are a few concerned with the grey area between those two fields. "Psychosomatic," at times seems to be the fashionable word on everybody's tongue. However, people who suffer from illnesses that affect both mind and body find their illness and their symptoms very often doubted.

Lack of determination and will, so some people suspect, keeps people diagnosed with illness like PMS, chronic fatigue syndrome, depression from getting ahead with their lives. Telling people about this article is a case in point. Just mentioning "chronic fatigue syndrome" triggered jokes like "that must be the name for not wanting to get up and go to work on Monday mornings."

Sufferers have to deal with that because their illnesses are just not clear cut: there is no known bacterion or gene that is the culprit. In fact, a characteristic shared by all these illnesses is that their cause(s) are partly if not altogether unclear. And the illnesses are very complex in that possible physiological causes are intertwined with social, cultural and environmental aspects. For the lay person, and unfortunately for too many medical professionals as well, this complexity seems to lead to the next best and simple explanation: the whole thing is not real, it's something weird in the personality of the patient that will hopefully heal by itself with time.

Additionally, "psychosomatic" means to a lot of people that these illnesses are not real, that affected people might even be hypochondriacs or at least just of weak character. It is, though, very important to understand that even if symptoms/ illnesses stem partly or just possibly from emotional problems, they are nevertheless absolutely real and even testable.

Furthermore, it is not the patient who is to blame because, chances are, her health problems were brought about by a combination of social, emotional and environmental conditions in her life that she cannot control or might not even be aware of. About some syndromes such as PMS a lot has been written, but in fact nobody knows for sure how it comes about and why it seems to affect even more women.

In a nutshell, the classic experts in medicine and psychology are still far from offering real explanations. It is a weakness hard to admit for professions that aim at explaining all bodily functions perfectly. That's where all the lack of respect towards the suffering women might originate from. Too many people

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deal with underlying helplessness and unease by dismissing the sufferer. There cannot be what is not supposed to be. It is this unease about complex illness which compounds the suffering already experienced in the body, mind and soul of the individual.

## Poet's Corner

*The real me is witty and wise  
But all that you see is my clever disguise  
Indeed I'm a housewife  
Watch soaps all day  
Gossip and coffee  
Idle the hours away  
Plop the kids in front of cartoons  
Sit around in my housecoat till noon  
But then something happens  
A shift deep inside  
The woman within lets out a war cry  
The person before you is not what you think  
I am not barefoot nor chained to a sink  
My mind is an ocean  
A thousand feet deep  
My real life begins when I'm asleep  
Freedom from duties, from social constraint  
I am a whole person despite what you think  
I am wise, I am witty, I am clever and fun  
I am wild, I am free,  
In the full moon I run  
To the sound of my heart beat a million years old  
To the stories of my sisters  
Courageous and bold  
In the morning I waken  
Step out of the dream  
Again I embody  
My domestic routine  
So when next you see me  
With my kids  
At the mall  
Remember things aren't as they seem  
At all*

S. Michaels

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## Depression: What It Is & How To Cope

by Susan Boroevich

Depression is often dismissed as an ailment which is "all in one's head". This idea stems from the belief that depression is controllable, that a person should be able to "snap out of it" and pull herself together. However, those who have suffered from depression know that it is not so simple and that depression is a very real disorder often affecting one's ability to function. To dismiss it as "all in one's head" leaves the woman feeling as if it is something she's done, rather than addressing the real symptoms of the disorder. Depression can include feelings of sadness and inadequacy, sleep and eating disturbances, lack of energy and general feelings of hopelessness.

For a woman her chance of developing depression is double that of a man's. As many as one in five women suffer depression and the explanations as to why women are more likely to suffer depression are varied. One theory suggests women are more likely to develop depression as a response to problems, while men develop other behaviours, such as anger or hostility. Another idea is that women are more likely to suffer depression because of societal factors and stresses placed on them. A third explanation addresses depression as a chemical imbalance and hormonal differences between women and men therefore affect depression rates.

If you are suffering from depression it is important to realize that this is a very real disorder and not your personal inability to cope. Seeking support and help is important. You may find this support from: friends, family, a doctor, a counselor, a support group or crisis centre.

Just as ideas surrounding why one develops depression are varied, so are the treatments. Treatments for depression include counseling, drug therapy, holistic remedies and lifestyle changes. Some believe that depression can be treated with counseling where individuals work through life experiences which may have played a role in their depression. On the other hand, new classes of anti-depressants (selective serotonin re-uptake inhibitors) work on the premise that depression is due to an imbalance in the levels of neurotransmitters of the brain. Therefore, these drugs work to regulate brain chemistry.

Other remedies for depression include holistic and lifestyle approaches. St. John's Wort is a herbal remedy which can be used to treat depression. In addition, proper nutrition, exercise and relaxation techniques can be influential in minimizing depression.

Finally, it is important to recognize the signs of depression in yourself or someone you know. Women need to make a decision about what type of treatments they wish to seek, or which combinations will work best for them. With the understanding that depression is a disorder, not the inability of an individual to cope, we can better help women suffering from depression.

### Sources:

Natural Woman, Jan/Feb 1998

Shared Vision Magazine, July 1996

Women's Health Matters, September 1999

Copies of these and other articles are available at the VWHC.

## Facing the Memories in the Wake of Societal Denial

by A.J. Gray

It has been a challenge for me honouring the truth of what happened to me as a child. Self denial and minimizing has been a large part of how I coped with all the abuses that were forced upon me while growing up. Dealing with the sexual abuse that I experienced has been my greatest difficulty. The biggest test has been accepting and believing my truth in the face of my family who silenced me and lied about the existence of sexual abuse, past and present. Additionally, I had to deal with a legal system that treated me like the perpetrator and my family like the innocent victims.

I found, though, it isn't just family that does not wish to accept the truth that sexual abuse exists. It appears to me the denial of sexual abuse is a systemic problem that exists within society. Media accounts of sexual abuse can leave the viewer or reader questioning whether it exists. Throughout history we can find rejection of the existence of incest. In 1896 Sigmund Freud identified child sexual abuse as the cause of many mental and emotional illnesses in adulthood. After his colleagues rejected his theories, however, he proposed his patients had either fantasized the sex or had desired it. Furthermore, in 1962, Eugene Revitch and Rosalie Weiss suggested the majority of pedophiles were harmless individuals and their victims were known to be aggressive and seductive children. Additionally, mothers have been blamed for their husbands' sexually abusive behaviour. Researchers have suggested that by rejecting him sexually, the mothers caused their husbands to seek sex with their daughters and/or sons.<sup>1</sup>

There have been countless articles trying to disprove the reality of sexual abuse and the repressed memories associated with it; memories that paralyze survivors and leave them questioning their sanity. In the face of this, I have begun to accept that the only way for me to combat this blatant lack of acceptance is to find the strength within me to allow my memories to surface and to believe what they are telling me. Allowing my repressed memories to surface has been an intricate mental game within myself of 'yes that happened to me' and 'how could that have possibly happened'? I have suffered through horrendous nightmares that tell me terrible things have happened to me but the ability to name those things has evaded me. Finding the sources to validate my truth has not been as challenging as finding people who really

understand that what I am saying isn't ludicrous. Like saying my brother raped me (which he did) but not having all the pieces, yet, to say when and where that happened. Repressed memories surface in such a variety of ways. I find myself remembering in several ways. Triggers can be smells, certain ways my son attempts to wrestle with me and particular seasons within the year. Smells trigger memories of feelings in me rather than mental pictures. The way my body feels tells me a lot about what has happened to me as a child. My subconscious informs me spontaneously both through night terrors or writing and painting. Pregnancy was a time when I experienced many memories. I found, it wasn't just the sexual abuse I was remembering but periods of time in my life that I had simply forgotten. I continue to find myself remembering the smell or the feel of the town I was raised in. Subsequently, I will start having the nightmares and I will begin to recall certain events. Recognizing how memories return to me has helped to manage them. I am aware that when I am experiencing a creative block, it is because something in my subconscious is trying to get out. I express a lot of the feelings associated with the memories through painting, dancing, singing and writing. Often I am not sure what I want to say. More and more I recognize that it isn't necessarily about what is expressed but that I express it, allowing myself to let go and heal.

A year ago, I went through a period of two weeks when I was having flashbacks so intense that it felt as if I was a child being abused again. It has taken a great deal of work on myself to differentiate past from present during a flashback; that what is happening to me in the present is not the abuse that occurred to me when I was a child.

Survivors heal repressed memories in many different ways. To heal what has happened to me I must allow these memories to surface. I understand that they won't surface unless I am ready for them to do so. I am accepting more and more that my healing isn't over and it may not be over for a long time. Rather than focussing on getting through all these memories next week, I direct my energy on healthy living. I have consciously decided not to worry about whether the doctors, lawyers and police officers believe what I remember and how I remember it. To maintain my sanity I have taken to believing what goes around comes around. I have found focussing on being whole is paying off. I now have the friends, the work and the lifestyle to reflect it.

<sup>1</sup> Bass, Ellen & Davis, Laura (1994) *The Courage to Heal*. New York: Harper Perennial.

## Wimmim's View

This is a forum for stories on women's personal journeys of healing. Your stories are welcome!

### Chronic Fatigue & Immune Dysfunction Syndrome: The enigma that is my illness. *by carol Merrett-hiley*

"You have Chronic Fatigue Syndrome," the specialist said. First came feelings of relief: I now had a context for all the various symptoms that had been plaguing me over the past year. I wasn't just a 'stressed-out type-A female patient' after all. Then came the feelings of fear: I don't want this thing for which there is no known treatment or cure, let alone any understanding of its cause. I want more than a medical label; I want my life back.

Chronic Fatigue: so much power in those few words and so much controversy. Even the naming of the illness isn't straightforward. While most physicians tend to call the illness "Chronic Fatigue Syndrome" (CFS), I prefer the lesser used but more descriptive "Chronic Fatigue & Immune Dysfunction Syndrome" (CFIDS). This enigmatic illness doesn't just leave me fatigued to the point of mental and physical exhaustion; it somehow has short-circuited my immune system and left me susceptible to endless viral infections. It's not AIDS, but it sure isn't just a "yuppie flu."

I have been fortunate to have a doctor and an internal medicine specialist who believe Chronic Fatigue to be a genuine illness. Even then it took months of visits to my doctor's office with a wide range of symptoms before the referral to the specialist and a diagnosis came. Time away from work did nothing to alleviate what at first glance seemed

stress-related symptoms: insomnia, debilitating fatigue, low-grade fevers, chronic cold sores, mental foginess, constant flu-like symptoms and gastro-intestinal problems. One more recommendation to increase my stress-management repertoire and I would have lost it in the doctor's office

Like so many others with CFIDS, I found myself initially being diagnosed in psychosomatic terms with an "adjustment disorder" and "secondary depression." While such diagnoses satisfied the requirements for disability benefit coverage, they also implied that this illness was all in my head. I felt like I was being labelled a head-case; one with chronically swollen lymph glands, yeast infections and herpes cold sores, but a head-case nonetheless. I told my doctor that I didn't have the energy to be depressed and continually challenged him to explain what was happening in my body! No blood or gastro-intestinal test could explain why I, a vegan who lived a rather healthy lifestyle, was experiencing all these increasingly debilitating symptoms.

Each morning I would wake up hoping that I would feel better, would finally get enough sleep, and feel refreshed. It did not happen. Even the shortest casual walk along the ocean left me mentally and physically exhausted and wearing a new cold sore for my efforts. My immune system was completely fried and my mind was literally slipping into a forgetful haze. Except for the dark circles under my eyes and the cold sores on my lip, I looked otherwise normal. While one day I could stroll about the park with minimal discomfort, over the next three

days I would barely be capable of getting out of bed or remembering what I was doing.

With the specialist's diagnosis of CFIDS came a package of information. There was little that traditional medicine had to offer except minor symptom relief in the way of anti-viral medications to suppress the herpes virus and tricyclic anti-depressants to alleviate the sleep disorder. I had already seen a naturopathic physician the year before and been diagnosed wheat and dairy intolerant—something quite common with CFIDS!

Refusing to wait for the CFIDS to run its projected 3 to 6-year course, I researched alternative and naturopathic treatments in books and on the Internet. I discovered that CFIDS really is a very individualized illness and began to experiment with dietary changes and herbal and nutritional supplements. Immune-building supplements like astragalus, CoQ10, garlic and lysine have become part of my daily routine. I have found my fragile immune system increasingly unable to tolerate chemical additives or genetically altered foodstuffs. I have done the anti-candida diet and loaded up my intestines with all that good bacteria to improve digestion and the body's energy cycles. Still, I am barely able to work 2 days a week and even then I don't have the mental or physical stamina to perform my previous duties. Friends have come to learn that planned activities with me are tentative at best.

I am at the point where it doesn't matter anymore whether antibiotic overuse or pesticides or some unidentified retrovirus has triggered CFIDS in me. This enigmatic illness has meant a loss of my health, my job

and my social life, but fortunately not my sense of self or humour. I do know that my wellness lies in my own hands and a holistic approach by all my health care providers is the key. I want my life back and I will eat as many organic rice cakes as it takes to get there!

Some helpful sources of information on CFIDS I have found are:  
*America Exhausted: Breakthrough Treatments of Fatigue and Chronic Fatigue*, Dr. Edward Conley.  
*The Canary and Chronic Fatigue*, Dr. Majid Ali.  
*Running on Empty: The Complete Guide to Chronic Fatigue Syndrome*, Katrina H. Berne.

## Words for the Way: Getting the Care You Need

Anne Merrett-hiley

For many of the conditions discussed in this edition of *Infusion*, feelings of shame and self-doubt frequently accompany the diagnosis. These feelings can be further exasperated by prevailing social attitudes and beliefs that stigmatize what is not understood. Social stigma and medical unawareness merely obstruct women's capacity to trust their bodies and get the care that they require.

What is of utmost importance, however, is to be provided the correct diagnosis. Without the appropriate diagnosis, one can not access adequate treatment, especially treatment that is holistic by nature and incorporates an awareness of the interconnection between the mind and the body. Based on the book *Women's Bodies, Women's Wisdom* by Christiane Northrup here are some suggestions as to how to get the health care you deserve.

1. Trust your body and the messages you believe it is giving you.
2. Both develop a partnership with your health care team and be an active participant in your healthcare. This means both gathering information on your condition and treatment options available. Check out the library, the internet and both the **Health Files and the Resource Library at the VWHC** which contain up to date information on a diverse variety of women's health issues.
3. Get the right referrals for both traditional and alternative health care.
4. Other women can be a great source of information. **The VWHC's Health and Holistic Practitioner and Therapist Directory** contains information and feedback on healthcare practitioners based on evaluation forms that women have anonymously completed. Practitioners are categorized by gender, type, location and specialty.
5. Other health care providers can also be a good source of information..
6. Ensure that the health care provider is the right one for you. Check out his or her credentials. Are they licensed and/or registered with a professional governing body? Do you feel comfortable with them and their approach?
7. If your health care provider is suggesting any invasive or radical interventions, remember that you have a right to obtain a second opinion.
8. Getting support for yourself is crucial be it family, friends or organizations. There are many support groups out in the community for a variety of physical and mental health issues. Information Services Vancouver (604-875-6381) provides information on support services and societies throughout the province.
9. Finally, while we acknowledge that the majority of alternative health care providers are not covered under the Provincial Health Care Plan, there are options available. Naturopath Physicians are covered by BC Health if they are licensed. Teaching facilities often provide free or reduced prices for services provided by students in training. Check with local colleges and in community newspapers for listings.

## Helpful Bookmarks

The Internet can be a great place to begin searching for information. It is also a place where you can both 'chat' with and obtain support from like-minded individuals.

These are some homepages that I found to be most informative and helpful with respect to conditions that are often labeled 'it's all in your head'.

### Chronic Fatigue and Immune Dysfunction Syndrome:

<http://www.cais.com/cfs-news/faq.htm>

This site contains information on medical & life problems created by CIFIDS.

### ADHD/ADD, anxiety and depression:

<http://mentalhelp.net/>

This is an incredible site that contains a wealth of information on a multitude of mental health issues and concerns. There is information on symptoms, treatment, recent research, as well as listings for resource and support organizations. The 'clinical yellow pages' enables you to both provide information on and receive information about therapists in your area (including British Columbia!)

### PMS:

<http://tor-pwl.netcom.ca/~vizprint/small.html>

This site is Canadian-based. It contains helpful hints, resources, and comprehensive information on PMS. You also have the option of participating in an on-line research survey about women's experience with PMS.

### Migraines:

<http://www.migraine.ca>

This is the homepage of the Migraine Association of Canada. It has a lot of useful information on coping with migraines. There is also a great section just for kids!

### Postpartum Depression:

<http://www.psycom.net/depression.central.post-partum.html>

Here you will find information on postpartum depression, treatment options, and resources including support groups. While the focus is a bit 'medical' there is some valuable and helpful information.

If you know of any helpful Internet sites we would love to hear from you. Drop us a line at [vwhc@axionet.com](mailto:vwhc@axionet.com)



# Vancouver Women's Health Collective Membership Form

## Categories of VWHC Memberships:

**Volunteer Member**  
(Sliding Scale — pay what you can up to \$25/year)

**Associate Member**  
(\$10-25/year)

**Health Practitioner/Therapist/  
Business Member** (\$50/year)

### All VWHC Members:

- \*Receive the VWHC's Newsletter *Infusion*
- \*Receive Invitations to Special Events
- \*May Participate at VWHC Committees & the Annual General Meeting

### Volunteer Members:

- \*Responsible for attending one Bingo shift per year
- \*Expected to become involved with at least one VWHC Committee or Project

### Health Practitioner/Therapist/Business Members:

- \*Entitled to One Free Newsletter Listing

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## What is Tibetan Medicine?

by Karmen Burrage

*We are very excited and honoured to be presenting a lecture by Lady Dr. Dawa Dolma on Tibetan Medicine in October (please see page 8). Karmen Burrage, who has been instrumental in organizing both the upcoming visit and a documentary film on Tibetan Healing which explores the work of Lady Dr. Dolma and Dr. Choedrak, personal physician of the Dalai Lama.*

Tibetan Medicine is an intrinsic science. It's a highly developed academic study dating back to the time before Buddha some 3000 years ago, making it one of the oldest surviving medical traditions. Its power lies in an explicate, scientific understanding of our interconnection with the universe and deeply intertwines this knowledge with the wisdom and power of spiritual practice.

Tibetan Medicine's great appeal lies in its holistic approach encompassing body and mind. Herbs and other naturally occurring ingredients work on a deep level activating the body's own capacity to heal, and simultaneously addresses a large scale of symptoms. This provides long-term healing. It's profound understanding of how mind can create sickness, in turn provides psychological/spiritual treatments as well as herbal remedies to such conditions as stress and mental illness.

The power of a trained Tibetan physician to diagnose multiple disorders, including those that are psychological, through the reading of the pulse and urinalysis points to:

- Its immediacy — little lab technology necessary
- Its being extremely cost effective
- A method of reading into whether or not a patient is experiencing psychosomatic problems
- A highly developed understanding of the mind/body relationship as practiced for many centuries
- A method of reading not only past sicknesses
- But the conditions for future problems arising

Tibetan medicine is slowly making its way into the Western Medical mainstream. There are signs through research that this ancient art of healing is treating with success forms of diabetes, Cancer, Arthritis, Nervous Disorders, Depression, Asthma, Allergies, and so forth. As the Tibetan people rebuild their culture as refugees, the Tibetan Medical & Astrological Institute in Dharamsala, India, has been training and sending doctors to many European countries, Australia, New Zealand, and USA to share the knowledge of their medical science.

# VWHC Education Committee Workshop Sessions

Sunday October 17th: *The Concepts of Healthy and Diseased in Tibetan Medicine*

with Lady Dr. Dawa Dolma of the Men-Tsee-Khang (The Tibetan Medical & Astrological Institute of H H. the Dalai Lama)

Thursday November 4th: *Acupressure and Chinese Medicine*

with Bonnie Robinson, Dr. of Traditional Chinese Medicine focussing on women's conditions

All workshops are from 6:30pm-8:30pm at the Collective.  
If possible please call the Info Centre at 736-5262 to register.

**Upcoming workshops for the year 2000 will explore body-focused alternative therapies including: Rolwing, Hatha Yoga, Massage Therapy and Reflexology!**

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## **Visit the VWHC Information Centre**

#219-1675 West 8th Avenue, Vancouver Info Line: 736-5262

The Info Centre has a wide variety of health information and volunteers available to help you research your own health issues.

Check out our Resource Centre! \*Women's Health Library \*Health/Holistic Practitioner or Therapist Files

\* Health Information Files \*Videos on Women's Health \*Helpful volunteers

\* VWHC Publications (including the new Menopause Kit!) \*'The Keeper' Menstrual Cup \*Reusable Cloth Menstrual Pads

## **Note the New Hours!**

Staffed exclusively by Volunteers, the Information Centre is open:

Monday 10:00am - 1:00pm Tuesday 3:00pm - 6:00pm Wednesday 10:00am - 1:00pm & 6:30pm - 8:30pm

Thursday 10:00am - 1:00pm Saturday 1:00pm - 4:00pm

\*Please call for additional hours\*

**Thank you to all Volunteers, past and present  
for all your hard work and commitment!**

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