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## NPI Reflects Changes Hands

By Editor Amanda Lucas, LCSW

Two years ago the former Psychobits newsletter was relaunched as NPI Reflects, under the stewardship of Andrea Barrett and Chad Buck. The purpose of this newsletter is to give NPI members a forum for communicating their thoughts, opinions, etc. on a variety of topics of interest to the therapeutic community. It also allows for providers in the community to connect with clinicians through advertising their services in the newsletter.

I have been a regular contributor to NPI Reflects in the past. Now, as a member of the NPI Board, I am thrilled to be the new editor. I have very big shoes to fill, as Chad and Andrea did an amazing job. I am so impressed by the unique wisdom, expansive creativity, and passion for lifelong learning that our contributors bring to this newest edition. Many thanks to Jeffrey Nelson, Alphagraphics, and Lisa Smith for their assistance in the production of this newsletter.

NPI Reflects will be printed quarterly. We welcome your essays, letters to the editor, movie and book reviews, poetry, artwork, photographs or other forms of self-expression you would like to submit.

Please email submissions to: alucaslcsw@gmail.com.

## Advertise in NPI Reflects!!

- Full Page Ad: $200
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Direct inquiries to NPI Executive Administrator Lisa Smith at npinashville@bellsouth.net
Self-care is a topic that is near and dear to my heart. As a person who has always questioned what she was told, I embarked on a journey of self-discovery many years ago. My search included a desire to find a non-invasive, holistic means of maintaining health.

Toward the end of my college career, my father’s sister began sharing her own personal journey of self-discovery with me. She sent me multiple books, articles, and her own writings related to meditation, body-centered psychotherapy, and energy healing. The two books I remember most fondly are A Path with Heart by Jack Kornfield and Depression and the Body by Alexander Lowen. Through my aunt's sharing of resources, as well as many long phone conversations, I began to understand that the source of physical, mental, and emotional balance is one’s own body, mind, and spirit. It seemed that I already contained all the seeds of good health and happiness that I would ever need. I simply needed to clear away the clutter that was blocking my access to them.

My aunt explained to me that if I had an interest in learning a self-healing technique, a Japanese healing art called Jin Shin Jyutsu would be a good place to start. She told me that it was “the mother” of many other forms of energy healing. In 1997, I took my first Jin Shin Jyutsu 5-day training seminar in San Rafael, California, with Lynn Pfleuger. Lynn comes from a “medical family” and was skeptical about alternative approaches to healing. Jin Shin Jyutsu's success in treating multiple ailments (or “projects”) changed her mind. I related to Lynn's perspective and appreciated her down-to-earth, practical, yet inspiring presentations. By the end of the seminar, I knew that I wanted to continue studying Jin Shin Jyutsu and become a certified practitioner.

Fifteen years later, I am certified, but certification seems secondary to the daily miracles I experience with Jin Shin Jyutsu. Practicing daily Self-Help is second nature now. I use various holds and “flows” to restore balance when I feel worried, scared, angry, depressed, or exhausted. If I feel like I’m getting sick, I use it to restore my energy flow and speed healing. It helps me fall asleep at night and grounds me when I feel anxious. Until recently, Jin Shin Jyutsu had been my constant companion for so long that I had almost forgotten about the value of sharing it with others. It had become a private refuge, and many people with whom I shared it expressed skepticism. Thus, I kept it to myself, with the exception of treating close friends and family members from time to time.

It wasn’t until a friend in my NPI Community Circle took an interest in Jin Shin Jyutsu that I realized that in keeping a good thing to myself, I was missing out on opportunities to help others in very real and concrete ways and to share this life-saving healing modality. My friend applied a simple Jin Shin Jyutsu sequence on herself for several days, and her thyroid calcification disappeared. She began referring colleagues and clients to me, and several of them experienced important emotional breakthroughs. I taught a Self-Help class in May and am working toward bringing a member of the Jin Shin Jyutsu faculty to Nashville to offer a 5-day seminar. It is exciting to watch others learn about the art and begin to enjoy its benefits. It has been thrilling and rewarding to share my self-care journey in this way.

It is difficult to define self-care. As Mary Burmeister, who brought Jin Shin Jyutsu to the U.S., would say, “I never butt into God’s plans, I just go along with what is. Life is not a struggle, life is enjoying the now. It’s simple.” (JSJ, Inc., 2012) Self-care may be just what Mary says: enjoying the now. This may seem difficult to do at times, but I maintain faith that what stands between me and my enjoyment of the now is simply old baggage from my past that I’m learning to release, piece by piece.

Socially constructed norms and stereotypes often stigmatize or prematurely dismiss complex maladies such as depression and posttraumatic stress disorder. Mentioning depression in some circles suggests a failing on behalf of the depressed individual who may be perceived as experiencing a lack of motivation or possessing the inability to obtain a “proper perspective” on life’s vicissitudes —otherwise known as blaming the victim. However, it is the colloquial terminology of depression (i.e., feeling down or having the blues) that should not be confused with clinical depression.

In February of 2010, The New York Times published an article, written by Jonah Lehrer, entitled Depression’s Upside. As the title would suggest, the author explores the idea of there being an evolutionary advantage to depression since it could allow the sufferer to use rumination or contemplative brooding to solve contextual problems. According to some speculative hypotheses promulgated by evolutionary psychologists, the genetic proclivity for an individual to succumb to depression seems to indicate a type of selective advantage for depression via adaptation —theoretically described as “the analytical rumination hypothesis (ARH).” Most of the reasoning for the ARH model is based on the prevalence of depression (Scientific American states that 30 to 50 percent of people have met current psychiatric diagnostic criteria for major depressive disorder at sometime during their lives).

My own “armchair deduction” would infer that depression can be seen as an ipso facto opportunity for the brain to adapt, but not in a way that benefits the species as an overall evolutionary adaptation. After all, depression is a lousy and costly defense mechanism for dealing with stress with the potential consequence of suicidal ideation. An important distinction would be this: I think depression itself is not an adaptation, but how one overcomes it may be. Again, this is still speculative but the empirical evidence for cognitive behavior therapy in treating depression is good, thus suggesting neurological plasticity plays a huge part in reversing the maladaptive effects of this disorder. In other words, the learned therapeutic skills one employs to battle depression may increase the likelihood of recognizing and/or not becoming victimized by it in the future while understanding how one uniquely processes negative life circumstances.

It should be noted that the causes of depression are as debated as the prescribed treatments; furthermore, a combination of biological and environmental factors are often equally involved in unquantifiable ratios. In fact, recent studies have shown that serotonin levels have less to do with depression’s actual effects as does a reduction in neurogenesis (the generation of new brain cells), changes in neuronal connections, stress, and psychological disillusionment over time.

The phenomenology of depression has been the topic of many poems, books, paintings, musical compositions, and artistic endeavors. Michael Foucault, Ernest Hemingway, Winston Churchill, and Sylvia Plath are just a few of the notable figures who have suffered from depression at the level of functional debilitation. William Styron’s Darkness Visible: A Memoir of Madness is filled with metaphorical allusions and attempts to describe the visceral experience of major depressive disorder. Similarly, the British biologist Lewis Wolpert vividly recounts his bout with depression in a partly autobiographical and scientifically informative journey entitled Malignant Sadness: The Anatomy of Depression.

Counteracting the effects of depression requires a multimodal therapeutic approach and the ability of the therapist to elicit all available resources for a client. A baseline criterion for treatment protocol can help establish progress with cognitive behavior therapy and individualized pharmacological interventions. The important thing to remember is that depression is a complicated phenomenon because the brain is a complicated organ and no two individuals will necessarily process or respond to treatment in a predictable way. The more we learn about depression, the more we learn about what it means to discover the “silver lining” of self-awareness and resilience in the wake of daily adversity.
My heart sinks to my toes…my head spins with worries: is it someone I didn’t call back? Is it someone I couldn’t get onto my calendar for four weeks? Oh, God – please don’t let the name be familiar, please…

The last month in our community has been devastating. The rumors of suicides of Soldiers at Fort Campbell have come from every angle – I don’t know an official number; one is too many. There have been two homicides allegedly committed by Soldiers. Our community hurts for our Soldiers and their loved ones.

I can’t be in my office enough to offer a calm space for these heroes to emotionally purge. I can’t tell them, “No, I don’t have any appointments open.” Did they tell me “no” when they were told they would be leaving their loved ones and going into a bleak spot where there are no clear battle lines? No, they packed and left – with full confidence they would be cared for upon return.

They work non-stop during deployments – they keep going when they don’t think they can. They sacrifice the amenities of our entitled American lives to fight – to protect these very things.

My deployment cycle is opposite of our Soldiers – when they are deployed, I rest. When they come home, I deploy into hour after hour of being present for these heroes. I breathe between the sessions – I pray for guidance – I plea to be as stoic as each of them has become.

My life continues to be easy, even with 12 to 14-hour days. I sit in an office without concerns of insurgent attacks. I go home every night to my family. This life is easy. Their lives are not. The “sacrifices” I make are minimal compared to theirs and their loved ones.

Please don’t tell me to slow down – please don’t tell me to remember to take care of myself…what I want you to tell is that you, too, are making some type of sacrifice to help carry this heaviness our Warriors and their loved ones have endured for almost 11 years.

I am humbled to walk amongst our nation’s heroes every day. I am honored to give a little back to them. I am proud of each and every one of our Service Members and I want them to feel connected, important and appreciated. This is what every human needs and although they complete superhuman missions, our Soldiers are still human.
When I read the NPI Reflects request to write a “few words” about Care for the Self, I had mixed thoughts regarding what the meaning of Caring for Self was. So before I submitted a contribution to be published, it was important that I evaluate the various meanings ruminating in my mind.

My first thought went to the poster I recently acquired. It pictures a cartoon character of a woman sitting on the floor in a meditative Yoga position. In the thought bubble above her head, it says, “Today, I will live in the moment.” Underneath the picture, the caption says, “Unless the moment is unpleasant. In which case I will eat a cookie.” While I relate well to this intrapersonal conversation, I felt it would be inappropriate to suggest impulsive eating as a valid means to caring for self, especially in a publication for mental health providers.

My second thought went to lyrics by Billy Joel, Oh, she takes care of herself, from the song, She's Always a Woman.

Oh, she takes care of herself
She can wait if she wants
She's ahead of her time
Oh, and she never gives out
And she never gives in
She just changes her mind

However, this woman, one for whom my facebook friend Billy Joel croons; apparently has a low distress tolerance, demonstrated in her inability to be patient. And although she exhibits an apparent giftedness with a bent for trendsetting, she sounds a bit snobbish and aloof. As well, the whimsical changing of her mind seems to indicate a short attention span. In my opinion, these qualities seem to embody a sense of entitlement, again, not a sustainable attribute to encourage for those of us trying desiring to teach healthy interpersonal skills.

Finally, I decided to offer what I have learned means the most to me in caring for myself. As a chronic introvert, I value quiet introspection, reflection and worship in an environment of beauty.Experiencing that best, for me, happens to be – just a walk in the park, outside, with nature. It is the connection I experience in nature feeling the presence of God, who loves me most, resonating with what one of my favorite poets, Rumi speaks about, What was said to the rose that made it open was said to me… here in my chest.

I recently wrote about such in a poem, and in light of the request for this quarter’s Reflects issue, I thought it appropriate to share with you. I hope you find it meaningful to encourage or inspire you toward finding your own meaningful way in which to care for yourself.
My One Degree of Separation from Anna Freud (well, sort of)

By Paige Holliman, M.Ed., M.T.S., LPC/MHSP

In the summer of 2005, I moved to New York City with my partner while she did her doctoral internship at a local university. Knowing this was going to be a fun but significant adjustment for me, I decided to find a therapist. My therapist in Nashville was able to get a recommendation for me from Nancy McWilliams, so I knew that I was in good hands. After I had scheduled my first appointment with Elisabeth Young-Bruehl, I decided to look her up on the Internet to see if I could learn anything about the woman with whom I was about to entrust my life story. And that’s when I saw it—a Wikipedia entry on her.

Now I don’t know about you, but it doesn’t take much for me to get a little bit star struck. I had an awkward moment several years ago when I unexpectedly found myself face to face with Amy Ray, one half of the Indigo Girls duo (who incidentally also have a Wikipedia page). Having been a huge fan all my life, I wished to express to her how life changing their music had been for me. When I opened my mouth, all that I could manage to get out was, “You’re a badass!” Nice.

Point being, to see my future therapist’s name in a Wikipedia entry was enough to ignite my star-struck tendencies. So to circumvent another, “You’re a badass” moment, I decided to curb my enthusiasm—after all, I had work to do in therapy and I didn’t need any built in distractions. So I ended my Internet search there, but not before I quickly skimmed the Wikipedia entry. And that was the day I learned that Elisabeth Young-Bruehl had been the biographer for none other than Anna Freud. But I’ll come back to that in a minute, and I promise I’ll bring it home.

There is a reason why I am telling you about Elisabeth. It’s because she died this past December. After an evening at a concert, Elisabeth and her partner, Christine, were walking home when Elisabeth fell to the ground having suffered a pulmonary embolism. She was dead at only 65. Amidst a myriad of emotions in the days that followed, I struggled to locate myself among the bereaved. First of all, I lacked community to grieve with. I left New York in 2006 and I don't know anyone, past or present, who had been a patient or colleague of hers. I struggled with a sense of loneliness in my grief. Secondly, I had only worked with her for one year and that had been several years ago, so I struggled to feel justified in my grief. Yet as we all know as practitioners who are also patients in this field, I was caught in that strange dynamic that is created in good psychotherapies—Elisabeth knew some of the most intimate details of my life, and I felt very cared for by her, but I had not seen her in years and didn’t “really” know her.

It was out of this confusing set of feelings and experiences that I turned once again to the Internet, both in search of community to grieve with, as well as to learn more about this woman who had been my therapist—this person I both knew and didn’t know.

I came across a blog entry that a dear friend of Elisabeth’s had written two days after her death, which assuaged my need for community. As I read about this person who knew Elisabeth, I began to recall and re-experience certain aspects of her: her piercing blue eyes, her sense of humor, the sound of her voice, her often windblown looking (but not in the sexy way) grey hair, and her extraordinary unpretentiousness.

Elisabeth completely blew every pre-conceived notion I had of a New York psychoanalyst out of the water. She never had on make-up, she routinely wore something akin to jogging pants and a shirt no more impressive, and I once had to call her out for being too chatty at the beginning of our sessions. That is one of the main reasons for my adulation of her—I
was a green therapist at the time, aspiring to be an aficionado of the psychodynamic psychotherapy tradition, yet finding parts of it to be too stifling for me. Elisabeth gave me tremendous permission to just be me. It was very freeing.

As I continued my Internet search, I read the Wikipedia entry I'd come across years ago. Wikipedia is bizarre; it had only been 48 hours and her death date had already been added to the entry. Reading that synopsis of her life brought into clear view what a brilliant mind Elisabeth had. I had come across a few of her writings in the years since our work together, but had never quite put together the depth and breadth of her scholarship.

Of most interest for me as a therapist was Elisabeth's writing about Hannah Arendt, a twentieth century German-born Jewish political theorist. Elisabeth studied under and was mentored by Arendt at The New School for Social Research where Elisabeth earned her Ph.D. in philosophy in 1974. After Arendt died in 1975, Elisabeth was asked to write her biography. The book, Hannah Arendt: For Love of the World, remains the standard work on Arendt's life. It was in this role of Arendt's biographer that Elisabeth's interest in psychoanalysis peaked and led her to become a trained analyst. It was also in her role as biographer that she nuanced her understanding of empathy—a nuance that became the foundation for how she would practice psychotherapy and locate herself within the therapeutic dyad.

In her book, Subject to Biography: Psychoanalysis, Feminism, and Writing Women's Lives, Elisabeth offers a collection of essays, one of which is entitled, “The Biographer's Empathy with Her Subject”. In this essay she writes:

Any empathy depends, it seems to me, on a certain form and degree of self-consciousness. You have to know—and this is a matter of insight—the role that the subject plays in your wish structure and your ego ideal; you have to make this role conscious to the degree that you can. The reason that this insight is the necessary precondition for empathy is that empathy is feeling the other person's desires, in the mode of comparison, and for a mode of comparison you must be able to tell the difference between the subject and yourself.

The usual—indeed, the clichéd way of describing empathy as, "putting yourself in another's place" seems to me quite wrong. Empathizing involves, rather, putting another in yourself, becoming another person's habitat, as it were, but without dissolving the person, without digesting the person. You are mentally pregnant, not with a potential life, but with a person, indeed, a whole life—a person with her history. So the subject lives on in you and you can, as it were, hear her in this intimacy. But this, as I said, depends upon your ability to tell the difference between the subject and yourself, which means to appreciate the role that she plays in your psychic life.

This idea of “putting another, in yourself; becoming another person's habitat,” was something that stayed with me after I had read the essay. It wasn't until one of my therapy sessions (myself as patient) a few weeks ago that it hit me just how much Elisabeth embodied this practice. It was the first therapy session I'd had since hearing of Elisabeth's death and I was talking about this loss. I knew that sometime in the last few years my therapist here in Nashville had been at a writing conference with Elisabeth (it truly is a small world, isn't it?). Prior to the conference she had asked if it would be okay if she shared with Elisabeth the fact that I was their mutual patient. I, of course, said yes; and it was their conversation that my therapist and I were reflecting on in my recent session.

It was the detail with which Elisabeth remembered my story some five odd years later that made an impression on my therapist. “You were very special to her,” my therapist said. Those are the kinds of words, I believe, that we as patients all hope for in the deepest parts of ourselves. I can allow myself to believe it about Elisabeth because I understand something about her, as therapist, now that I didn't know then—that I lived in her. She offered her mind as a place of residence for mine. No wonder she could recount so much of my experience. It was the harmonious union of Elisabeth as biographer and Elisabeth as therapist that afforded her this gift: “the subject lives on in you and you can, as it were, hear her in this intimacy.”

In other words, Elisabeth wasn't just my biographer; she was my autobiographer. As she was to all of her patients. As she was to Hannah Arendt. And yes, as she was to Anna Freud. I lived in her, as did they. And that, my friend, is my one degree of separation from Anna Freud (well, sort of).

Rest in peace sweet Elisabeth. And thank you.

Celebrating Diversity and Creating Unity in NPI

by Barbara Sanders, LCSW

Once upon a time, between 1983 and 1985, the founders of NPI wanted to create a new and different kind of group, one that values unity and diversity. These founders developed a community of connection, dialogue, training and support for its members even though it includes therapists from a variety of mental health professions, theoretical bases and treatment styles. NPI includes psychologists, social workers, licensed professional counselors, marriage and couples therapists, psychiatric nurse practitioners, psychiatrists, other mental health providers, all of whom are licensed by the state of TN or are in training as students. With this myriad of differences it is difficult to easily define what NPI believes as a whole about psychotherapy which hopes to foster the growth and development of healthy well-being for all people.

How do NPI members operate similarly and differently? There may be NPI consensus around some basic truths, like beliefs about the necessity for boundaries in the professional therapeutic relationship, or about the fact that we charge for our services, or that we need to take good care of ourselves personally and professionally in order to provide the best, most effective services possible. Most of us in NPI believe that the therapeutic relationship is key to prompting change and progress toward health and well-being. We all agree that we should do no harm to our clients.

NPI is also rich with a diversity of styles of practice and services based on a variety of beliefs about what helps people get better. We have professional members who are committed to an abundance of theories like psychodynamic psychotherapy, object relations, CBT, psychoanalysis, DBT, EMDR, holistic therapy, bodywork, family systems, integrative health, hypnosis, breathwork, Reiki, and more. We vary in our techniques, our frameworks and our theoretical bases, and we operate within the ethical and professional guidelines of our separate professions and licensing organizations.

We are also a diverse group of therapists in other ways: some Caucasian, some therapists of color (I believe that most of us want to reach out to and include more therapists of color), some who identify as heterosexual, gay, lesbian, bisexual and other gender identities. Some of us are married, some are divorced or widowed, some are single, some have children, some don't, and some are liberals and some are conservatives. Some are religious people, or not: some are atheists, Christians, Muslims, Jews, agnostics, Quakers, Unitarians, Buddhists, and more. Some are highly educated and some are not as well-trained, or at least not yet. So, given all this diversity, is it any wonder that sometimes we may not all agree on the direction, goals, and/or processes of NPI?

There is then the opportunity for growth, learning and healing within our own organization. Like a family that grows through many developmental changes, NPI has grown larger and its systems more complex and complicated, graced with new technologies and a paid Executive Coordinator, the nanny we all need. Our founders are the wise grandparent elders, then comes a generation of adults, and our newest members may feel child-like for a short while. We may now even have some great grandchildren stirring around in our midst. We have authority figures and acting out children at times. Some of us stoic while others are still rebellious teens at heart. Some of us are adulterous (having affairs with other types of healing practices and the like) while some are loyal to some specific version of exactly what psychotherapy should be, its rules and procedures. Within this family constellation we have great opportunity for not only growth but for conflict. We sometimes might want to yell at someone who we think is saying something completely absurd about how they work with their clients. But, what do we teach our clients about yelling and about how effective dialogue can be used to create resolution?

We NPI members excel in helping others deal with their dysfunctional families. Let us try to increase our strengths and effective behaviors toward one another while we also try to decrease our triangulating, splitting and holier-than-thou attitudes to promote more harmony and unity within our organization. And, lest you feel like I am preaching to you, know that I am also preaching to myself. I am just as likely to act out as the next person and I know it takes much energy to work together in a healthy manner.

I believe that NPI is worth our attention, our time, our energy and our commitment to helping our organization be one in which we can explore our thoughts, beliefs, feelings and understandings with each other in a somewhat safe space. And when there is conflict, perhaps we can speak about the conflict individually and collectively in order to deal effectively with the difficulties we are bound to experience at times. NPI members have a wealth of knowledge and enormous support of and compassion for our clients. Let us turn toward each other with a similar commitment to nurture ourselves individually and communally for the good of all. In this way we can find the unity within our diversity and promote better health and well-being for us all and for NPI.
The Dying Time

By Maria Gaskill, LPC, MHSP

Truths have collided in my world
Chaos reigns in the fibers of my being
There is no shelter from the fire
It is the dying time

Open and raw
The immense beauty that is God’s love
Sears at every instant

That you would lend comfort if you could
There is no doubt
Yet there is nothing but to submit
To the storm of Divine cleansing

First skin, then flesh, then bone
Peeled away
Down to the very core of soul

Nothing
Nothing in human experience
Prepares one for this purification
Fall
Fall willingly into the fire

The crackling of the skin as it is charred
Opens the mind-heart-body wide
Though intense and disorienting
The exhilaration belies the alarm

As the eating away continues to the flesh
A terrifying awareness arises
This inferno will burn until
There is nothing left but pure love
Who can contemplate being pure love?

The overwhelm is cosmic
And so one watches as the corpse continues its daily rounds
How little we truly know one another
That such a transmogrification can be occurring while no one notices
Boggles

Still, how would one share the experience?
Surely the judgment would be insanity!

Abandon all ideas
One knows nothing
Remain starkly open
Surrender will
Receive all
In spite of a depressed economy, the field of organics is a healthy and flourishing market! Currently, the demand for natural, organic, sustainable, socially responsible products and services has grown to a $290 billion dollar market. Who is the devoted population responsible for the consistent increase in demand for natural foods? It is parents. And their reason for choosing organics they say is a health issue. Many families have done their homework on the harmful effects of pesticides, chemicals and processing and decided they can either pay the farmer or pay the hospital – and they are choosing to pay the farmer.

When a family decides to “go organic” they are, in essence, responding to a message of wisdom taught by family heritage, that paying attention to the food which nutritionally sustains life not only plays a big role in the functioning of the body, biologically, psychologically and emotionally, but also reflects the values we have regarding how we maintain life holistically. And parents choosing to “go organic” are seeing the difference in their own lives as well as the lives of their children.

In her recently released book, The Organic Nanny’s Guide to Raising Healthy Kids, author Barbara Rodriguez, offers an informative, practical and family friendly holistic resource for parents wanting to create a healthy context for living life. The twelve chapters contain a wealth of wisdom, gleaned from her own grandmother, on how to raise healthy children. Beginning with “going organic” we learn, that understanding the developmental needs of the child and meeting them nutritionally offers a life-long benefit.

Children are our greatest legacy and with the knowledge provided in The Organic Nanny’s Guide to Raising Healthy Kids we can learn how to nourish them well – for life.
Want to Get More Involved in NPI?

The NPI Board has several committees that you can join!

If you are interested in becoming a more active member of NPI, please email the 2012-2013 Co-Chairs, Chad Buck and/or Maria Gaskill

Chad Buck: chadbuck@comcast.net
Maria Gaskill: mariagaskill@comcast.net

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