



CONSUMER NETWORK NEWS

THE QUARTERLY NEWSLETTER OF
ON OUR OWN OF MARYLAND, INC.

VOLUME TWENTY FIVE ♦ NUMBER TWO ♦ SUMMER 2018

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2018 ANNUAL CONFERENCE: AN OUT OF THIS WORLD SUCCESS "THE TRUTH IS OUT THERE: PEER SUPPORT AS THE X-FACTOR IN RECOVERY"

by Mike Finkle

On Our Own of Maryland held its 26th annual statewide conference on Thursday & Friday, June 7 & 8, 2018 at the beautiful Princess Royale Hotel. The Princess Royale is located on the white sandy beaches of Ocean City, MD. The title of this year's conference was: "The Truth is Out There": Peer Support as the X-Factor in Recovery." We explored the vital link between peer support and recovery, and how peer support is being woven into various systems and settings, including mobile crisis, homeless outreach, hospitals, opioid response and peer-run centers.

We had over 430 folks register for this year's conference making this one of our largest conferences to date. We had a wonderful opening reception for conference attendees at noon on Thursday in the hotel's large exhibit hall which was hosted by Beacon Health Options-Maryland and the Maryland Association of Behavioral Health Authorities.



Tonier Cain

The kick-off to our conference was keynote speaker Tonier Cain, Founder and CEO of Healing Neen, Inc. One may remember Tonier from her award-winning biographical documentary "Healing Neen." Tonier is the epitome of resilience, having overcome a traumatic childhood filled with abuse, rape and neglect, a 19-year addiction to crack cocaine, and years of homelessness, incarceration and prostitution. Tonier is now a nationally recognized inspirational speaker and trauma-informed care expert who has traveled to all fifty states to train mental health professionals

on how to better serve trauma survivors struggling with mental health and addiction issues. Tonier's keynote presentation was the highlight of the conference and had folks standing and applauding at the end. Please see the special article in the newsletter regarding Tonier's presentation for more information.

Along with our dynamic keynote speaker, we were delighted to have outstanding guest presenters including Dr. Barbara Bazron, Deputy Secretary for Behavioral

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Health with the Maryland Department of Health; Dr. Mark Fuller, Chief Executive Officer, Beacon Health Options-Pennsylvania; Phil Holmes, former Vice-President of Goodwill Industries of the Chesapeake; Beth Terrence, founder of Holistic Recovery Pathways; Brendan Welsh, Director of the Office of Consumer Affairs for the Maryland Behavioral Health Administration; and Kate Wyer, Director of the Maryland Consumer Quality Team, among several others.

The wide variety of informative workshop topics focused on issues including crisis intervention teams, board governance, Anne Arundel County's Safe Station programs, effective advocacy, Maryland's Certified Peer Recovery Specialist credential, trauma-Informed peer relationships, LGBTQIA communities, holistic healing, the impact of opioids and the brain, and several others.

Annual Awards Dinner

On Our Own of Maryland and our Anti-Stigma Project hosted our annual Awards Dinner on the first evening of the conference, June 7th.



Kirk Stroup

The evening began with the presentation of Gus Retalis Exemplary Service Award to Kirk Stroup, Peer Coordinator at Soul Haven Wellness & Recovery Center in Hagerstown, MD. Augustus "Gus" Retalis was the Fiscal Manager for On Our Own of Maryland for many years.

Gus passed away on November 1, 2012 and the On Our Own of Maryland Board of Directors created this award as a tribute to him. Gus's life exemplified service as a dedicated and thoughtful employee and advocate. This award is presented each year to a staff person, board member, or volunteer of an affiliated Wellness and Recovery Center in recognition of their service, dedication and commitment to the mission, goals and principles of their organization and to the peer movement. Kirk Stroup wholly embodies these qualities and we were delighted to honor him for his long standing commitment to Soul Haven. Kirk gets up early to make sure coffee is ready for members and

often sleeps overnight at the center when large snow storms are predicted in order to make sure someone is there to open the center. Kirk has never met a stranger! He can talk to anyone about almost anything. Soul Haven typically serves more than eighty folks daily and many come just to speak with Kirk. He is also a dedicated advocate. He annually attends On Our Own of Maryland's Action Annapolis Day and likes to engage Delegates and Senators about the importance of peer support and our network of wellness & recovery centers. Congratulations Kirk on a well-deserved award!



Cameron England

Our 2018 Michele Dear Advocacy Award was presented to Cameron England, Executive Director of On Our Own of Cecil County based in Elkton, MD. Michele Dear was one of the original Steering Committee Members of On Our Own of Maryland (OOOMD) when we began meet-

ing in 1986 with representatives from the different On Our Own groups. She attended almost every meeting and was especially active around clients' rights issues both in hospitals and in the community. Michele began her advocacy efforts on behalf of people with psychiatric disabilities when she sued the Baltimore County Board of Education for job discrimination in 1981 and won her case. She also sued a psychiatrist for illegally secluding her and settled that case out of court. Unfortunately, Michele was dealing with severe trauma issues and the psychiatric system in Maryland in the early 1990s was not trauma-informed and not able to competently deal with Michele's issues. She eventually took her own life because the system failed her. On Our Own of Maryland gives this award in the memory of Michele Dear's advocacy efforts.

Cameron England is described as a leader and advocate who focuses on building a team out of his staff and is not afraid to get his hands dirty. Denise Crowl, the peer staff who nominated him says, "Cameron does administrative work, he facilitates support groups, does one on one peer support, coordinates outreach and advocacy efforts and builds partnerships in the community

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right alongside his staff. Cameron approaches his work by focusing on ensuring that when peers come into their center, they feel that they belong and that they have a second chance to make their life the one they want to live. Cameron meets folks where they are and tries his very best to help them grow and live meaning full lives.” The gift that Cameron has been to our statewide peer network has not been lost on us, and we honored his advocacy efforts, his commitment to the work of peer support, to the broader community and for sharing his career and so much of himself with us by presenting him with the 2018 Michele Dear Advocacy Award.

The 2018 Lou Ann Townsend Courage Award was presented to Coriless Jones. This award is given in the memory of Lou Ann Townsend, one of the early members of the Anti-Stigma Project who was a determined and passionate advocate. Each year it is given to someone who inspires us with their bravery, their efforts to reduce stigma, and their dedication to helping others. Coriless’ heart-wrenching but ultimately inspiring recovery story is documented in the last issue of Consumer Network News, and her video interview can be found on our website. She currently works at Dee’s Place in downtown Baltimore, giving back to the community and using her experiences to help others who are going through the same devastation that she experienced.



Coriless Jones

The President’s Award is given annually at the discretion of the On Our Own of Maryland Board President. It is given to someone who has demonstrated outstanding leadership, advocacy efforts, peer support, creative organizational skills, and community outreach efforts. This year’s President’s Award was presented to Bryan Johnson, Executive Director of On Our Own of Howard County, Inc. Bryan was selected



Bryan Johnson

for his stellar leadership of On Our Own of Howard County over these past several years. Bryan’s leadership has been instrumental in making On Our Own of Howard County one of the premier Wellness & Recovery Centers in our state.

On Our Own of Maryland’s 2018 Award of Special Recognition was presented to Holly Ireland. Holly currently works as the Co-Project Director for the Danya Institute’s Central East Addiction Technology Transfer Center (ATTC) and is responsible for the programmatic and administrative coordination



**Holly Ireland
& Diane Lane**

of all training, and technical assistance. Prior to this Holly was the Executive Director for several years of Mid-Shore Mental Health Systems, now called Mid-Shore Behavioral Health, Inc. which serves the five counties on the Eastern Shore. We recognized Holly for her many accomplishments over her career on behalf of people with psychiatric disabilities, and her special support for On Our Own of Maryland and our local Wellness & Recovery Centers. The award was presented by Diane Lane, Executive Director of Chesapeake Voyagers, Inc. (CVI). Holly was a mentor to Diane and gave her the inspiration to make CVI a stand-out program on the Eastern Shore.



Tom Merrick

Our 2018 Distinguished Service Award was presented to Tom Merrick, the Acting Director of the Office of Child, Adolescent and Young Adult Services at the Behavioral Health Administration (BHA). Tom has worked at BHA for most of his 30-year career, as well as working briefly at the Governor’s Office of Children and the Maryland Department of Disabilities. He has been an integral part of many of the major service innovations, policy reforms, and special demonstration projects for children, youth and families in Maryland.

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We celebrated Tom for his long career of service to the public behavioral health system, his ongoing support of the consumer movement, and for the development of young adult peer support and leadership programs in Maryland.

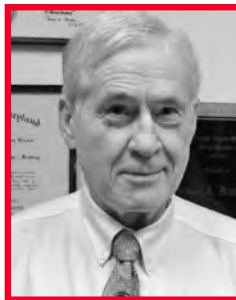
The Visionary Award is given every year by the Anti-Stigma Project to someone who has contributed in a significant way to reducing the stigma associated with behavioral health conditions. It celebrates the visionary work of someone who has contributed to making the system more competent and respectful, and helping us understand our own stigmatizing attitudes and behaviors.



Dr. Alicia Lucksted

The 2018 Visionary Award was presented to Dr. Alicia Lucksted. Dr. Lucksted is a clinical-community psychologist and an Associate Professor in the Department of Psychiatry at the University of Maryland School of Medicine. In addition, she is a research investigator at the Mental Illness Research, Education and Clinical Center (MIRECC) which supports veterans with serious mental illness. She has done extensive work to reduce and prevent the stigmatizing attitudes and behaviors that impede recovery, particularly internalized stigma. She has worked extensively to promote positive change within the community and enhance the recovery of all those with behavioral health challenges. Her valuable research on outcomes and change processes for psychosocial interventions, and the impact of public education programs and consumer and family led wellness and recovery support programs has been a beneficial addition to the Maryland behavioral health community. With this award, we celebrate her many significant contributions to reduce stigma through research, education, and advocacy.

On Our Own of Maryland's 2018 Lifetime Achievement Award was presented to Michael Millemann, Professor of Law at the University of Maryland (UMD) School of Law. Professor Millemann was previously the Chief of the Civil Division in the Maryland At-



Mike Millemann

torney General's Office. He has been a long-time advocate for the legal rights of mental health consumers, especially people being served in psychiatric hospitals. He was chief architect of a class-action lawsuit against the Department of Health and Mental Hygiene in 1983 which established rights advisors in all Maryland state psychiatric hospitals, an internal grievance system and funding for an external legal advocacy service. Professor Millemann is a true champion of patients' rights and we honored him for his long-time commitment to On Our Own of Maryland and our statewide peer network.

Evening Activities

Following dinner on Thursday evening, conference participants enjoyed activities including swimming in the indoor pool, a special screening of the documentary "Healing Neen," which details the life story of our keynote speaker Tonier Cain, and our annual Karaoke and dance with a "X-Files" themed costume contest.

Friday General Session



Dancing the Night Away

Our Friday morning General Session began with a presentation by Dr. Barbara Bazron, Deputy Secretary for Behavioral Health and Executive Director of the Behavioral Health Administration (BHA). Dr. Bazron is a nationally recognized behavioral health expert with over 26 years of executive leadership experience within the fields of addictions, mental health and special education.

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Dr. Barbara Bazron

tion's Office of Consumer Affairs.

Following Dr. Bazron, a panel of peers presented on the innovative ways they are providing peer support services in the Wellness & Recovery Centers and beyond. Panelist included Catherine Blessing, a Peer Support Specialist with the Howard County Health Department. Catherine described her experiences and working with both the Howard County Health Department and On Our Own of Howard County; Charisa Billigmeier, peer advocate at On Our Own of Frederick County; Curtis Terrell, a Peer Support Specialist working for the Washington D.C. Department of Veterans Affairs and

President of the Board of Directors at On Our Own of Montgomery County; and Rob Zellner, a peer advocate and Americorps volunteer working with the Office of Consumer Advocates in Hagerstown. Catherine described her work with those incarcerated and struggling with addiction. Charisa described her peer outreach work engaging patients on the behavioral health unit at Frederick Memorial Hospital. Curtis spoke about his work supporting veterans returning from war and coping with PTSD. Lastly, Rob described his work with the Conquering Opioid Addiction Together (COAT) program under which he organizes community awareness events and supports those struggling with addiction.

All four panelists powerfully illustrated how peers are playing increasingly unique roles in their communities

Dr. Bazron presented an update on integration within the Behavioral Health Administration, the state's efforts to mitigate the opioid crisis in Maryland, an update on the implementation of peer support in diverse settings, and plans for the expansion of the Behavioral Health Administration's Office of Consumer Affairs.

supporting those in recovery and helping to build effective, compassionate service systems. Peer Support is definitely the X-Factor in Recovery!

Special Thanks!

On Our Own of

Maryland wishes to extend a big thank you to On Our Own of Maryland staff and volunteers for making the conference a huge success.

We also wish to express our gratitude to Beacon Health Options-Maryland and the Maryland Association of Behavioral Health Authorities for sponsoring our opening reception on Thursday.

We are delighted with this year's event. Many thanks to the Conference Planning Committee members: Nevett Steele, Patrice O'Toole, Bunky Sterling, Lydia Brown, Mike Finkle, Jennifer Brown, Denise Camp, Margaret McGill, Kristen Myers, Lauren Grimes, Casey Saylor, Rowan Powell and Ken Wireman for all their hard work in making the conference run smoothly. All in all, a fun and educational time was had by conference participants! So make plans to attend next year's conference which will again be at the wonderful Princess Royale Hotel in Ocean City, MD on June 6 and 7, 2019-- Hope to see you there!



Panel presenters Curtis Terrell & Catherine Blessing



Panel presenters Charisa Billigmeier & Rob Zellner



Sarah Burns, Gloria Bowen & Holly Ireland with their Sci-fi Friend

More Conference Pics on Page 8

KEYNOTE PRESENTATION - TONIER CAIN

by Margaret McGill



Tonier Cain

On Our Own of Maryland was honored to have Tonier Cain as the keynote speaker for our 2018 Annual Conference. Her keynote was powerful, poignant, and honest, leaving those who experienced it inspired and filled with hope. Tonier has overcome numerous obstacles in her life; a 19-year addiction to crack cocaine, more than 83 arrests and 66 convictions, years of homelessness, rape, abuse, and neglect. She now is an internationally recognized advocate, educator, and motivational speaker on the impact of trauma and childhood abuse. In this article we will attempt to highlight aspects of her keynote and share parts of her message which she delivered to a crowd of more than 400 attendees. Please note that her story may be triggering for some, as it explores in depth the effects of trauma.

Early Trauma

Tonier began her keynote address by describing her childhood. Her mother, who was physically and emotionally abusive and had severe issues with alcohol, was unable to support her children and yet was almost always pregnant or bringing home a new baby. Her mother often went to run an errand and didn't come back for days, leaving Tonier in charge of her siblings and forcing her to miss numerous consecutive days of school. When she did attend school, Tonier would often reek of urine and alcohol, unable to maintain her own personal hygiene. Despite the blatant sign of abuse, Tonier was never once asked by an adult during this time why she was absent from school so frequently or why her personal hygiene was so poor.

To cope with her mother's physical abuse and absence, Tonier began drinking, taking swigs of the unfinished alcoholic drinks which littered their house. There frequently were community parties held at her home so alcohol was always plentiful. Many of the people who attended these parties were older men and some of them took an interest in young Tonier. It was at one of these parties, at age 9, that Tonier was raped for the first time. Intoxicated men would sneak into her room

and assault and rape Tonier. The abuse occurred so often that Tonier began urinating on herself to deter the men from touching her, which is why she often smelled of urine when she went to school. The trauma of the sexual assaults compounded with her mother's physical abuse, caused Tonier to use alcohol more and more frequently. Alcohol distanced Tonier from the ongoing trauma and was her only coping mechanism.

Eventually, someone called Child Protective Services and a social worker came to the house and removed Tonier and her siblings, placing them in foster care. Tonier was sent to live with an aunt, while her siblings, who were often her only source of joy, were sent to live with other members of their extended family.

Mother and Wife

Around age 14, Tonier's mother begged her to come home, telling her that she loved her and wanted her back. Tonier, hoping that her mother had changed, arrived back at her mother's home, and found it filled with new children. She quickly realized that her mother didn't want a daughter, but a babysitter. Shortly after re-entering her mother's home, Tonier attempted suicide. While Tonier's stomach was being pumped, her mother convinced the doctors that it was an accidental overdose and Tonier was released back into her mother's care. By age 15 Tonier could not make it through a day without alcohol.

It was during this time that a 20-year old man took an interest in young Tonier, coming around the house and supplying her mother with liquor in order to get closer to Tonier. Tonier's mother was on the brink of losing her home and saw an opportunity in this man. So when he brought a marriage license to the home and requested to marry Tonier, her mother signed it, making Tonier a wife at age 15.

Tonier, her mother, and 3 of her siblings moved in with this man. He was unpredictable and abusive; Tonier never knew what mood he would be in when his headlights appeared in the driveway. He abused her and raped her. After four years of instability, trauma, and alcoholism Tonier sought something stronger to numb her pain: crack cocaine.

KEYNOTE PRESENTATION

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Addiction, Arrest, and Adulthood

She became addicted to crack cocaine as she used it to try to cope with the rapes and abuse she endured, leading to 83 arrests and 63 convictions over a 19-year period. She was in and out of prison so often that when the guards saw her they would often “welcome her home” and called her by her street name.

During this time, she was also in and out of mental health institutions where she would receive various diagnoses and then be released back onto the streets. Throughout these 19 years, she bounced between substance abuse clinics, prison, and the streets, often re-traumatized in all three settings. She was never taught by any of the institutions she encountered how to live a stable, healthy life and her trauma was never addressed by the numerous counselors she saw. She gave birth to 4 children while in prison and all four of them were immediately placed in foster care. No one had hope that Tonier would be able to overcome the years of trauma, addiction, and abuse.

Hope and Recovery

When Tonier was incarcerated and pregnant with her fifth child, she was determined to maintain custody. She convinced a judge to send her to a program called T.A.M.A.R.’s Children (Trauma, Addiction, Mental Health, and Recovery) where she would be able to work on recovery and keep her child. She began therapy with a woman who finally asked about Tonier’s childhood and the trauma and abuse she encountered. This therapist worked closely with Tonier, allowing her the space to grieve and heal, and helping Tonier realize that she did not have to carry her trauma by herself.

At T.A.M.A.R.’s Children, Tonier took classes on mothering and how to build a secure attachment with her baby. She learned how to self-soothe and regulate her emotions when triggered. After graduating from the program, she bought her first home and began her journey into advocacy and recovery. Tonier’s daughter, who is now thirteen, is at the top of her class in school and is healthy and thriving.

“I am who I am supposed to be”

Today, Tonier is an internationally recognized inspira-

tional speaker and trauma-informed care expert who has spoken on five continents. Tonier believes that we have in us more than any book can teach and we are stronger because of it. She encourages us to honor each other’s experiences, be inspired by one another, and share our stories. At the end of her speech, Tonier displayed her mug shot and asked the audience “If you had a peer who looked like that, who hadn’t been to On Our Own, who had spent 19 years going back and forth with no direction, would you be able to really see them? If you see this woman, with 83 arrests, 66 convictions, 19 years of drug addiction, even longer alcoholism, a mental health consumer, years of homelessness, who lost all her kids-- would you be able to look at that person and see her on the red carpet in Hollywood?” She then displayed another photo of her in a gorgeous evening gown on a red carpet.

Tonier Cain’s speech asked us to consider and challenge our own perceptions of recovery and encouraged us to never lose hope in a person even if they may have lost hope in themselves. She is evidence that people *can and do recover*. Having overcome insurmountable odds to create the vibrant and inspiring life she lives today, Tonier Cain is a remarkable and resilient woman. On Our Own was honored and privileged to have her deliver this message of resilience and hope during our 2018 keynote.



*To get a copy of Tonier’s video “Healing Neen”
go to www.healingneen.com*

2018 Annual Conference Snapshots

**Keynote
Speaker**
~
**Tonier
Cain**



Phil Holmes



Earlene Frances



Bill Patton, Tony Wright, & Catherine Blessing



Eugene Smith



Kelley McCown-Snyder & Dan Snyder



Jim Raley



Diane Lane & Ken Wireman



Carolyn Cullison & Laurie Galloway



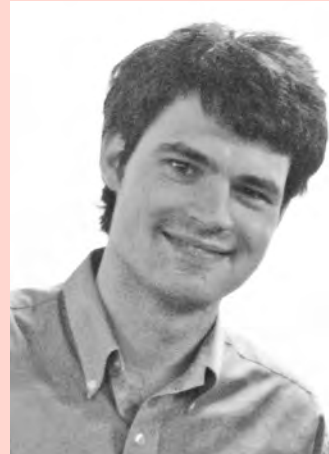
DJ Jones-Reiley, Kent Reiley, & Nomi Rivera



Tom Godwin, Margaret McGill, John Allen, Eric Roskes, & Jennifer Brown



Tom & Connie Merrick, Robin Poppone, Lisa Kugler, & Mark Fuller



Erik Wakefield, Joey Ziccardi, Vladimir Tolstiy, and Otis Thomas



"Dana Scully" at costume contest, Michelle Livshin, Bunky Sterling, Rosemary Dehn, and Sonny Sorenson

STIGMA BY ASSOCIATION: PARENTS AND FAMILIES OF INDIVIDUALS WITH BEHAVIORAL HEALTH CONDITIONS

by Casey Saylor

In response to National Parents Day on July 22nd, the Distorted Perceptions Campaign decided to focus July's Topic of the Month on behavioral health experiences through the lens of parents and families. We set out to explore the following questions: How does an individual's behavioral health experience affect their family? How does stigma impact family members specifically? Can the stigma that family members receive cause them to stigmatize others? And what can families do to minimize the effects of internal and external stigma?

In a 2016 survey of Massachusetts families raising children with mental health disorders, 74% of parents reported *"a direct, personal experience with stigma,"* with self-blame or finger pointing by extended family ranking higher than blaming from school systems (Lambert & Brandl Denson). *"We are trying to stay the course," one parent reports in the survey. "But I always worry about how others see him. And us."* (ibid).

Maryland parents of children experiencing substance use problems reported similar experiences, identifying stigma as one of the greatest obstacles to treatment (Maryland Coalition of Families, 2016). This stigma can be *"so pervasive that many family members resist seeking help for a loved one and for themselves out of fear of discrimination, shame from feeling like a failure or embarrassment from being judged by others."* (The Partnership for Drug-Free Kids, 2011). The stigmatizing experiences can take the form of losing friends, being blamed for the behavioral health disorder by family or neighbors, or having their needs and experiences discounted by professionals (Healthyplace, 2016). Stigma can also take its toll on siblings, causing them to feel *"like outcasts"* when they are shunned by their friends or ignored by preoccupied caretakers who have little time or energy left for them. Carol, a parent whose child struggles with addiction, wrote to The Partnership for Drug-Free Kids about her experience. *"It is a very lonely thing, [being the parent of someone who is addicted to drugs]."* she says. *"If my child had any other disease, the people in my life would be surrounding me with comfort and support. Because my son has the dis-*

ease of addiction I am left to deal with it on my own... I notice that even if I have a problem with my son that does NOT concern addiction, the others in my life still don't seem to want to help because of, I assume, the trouble he has caused in the past because of his addiction" (2011).

Susan Noonan, MD identifies these stigmatizing reactions as likely not intentional; instead, *"they usually arise because of differences in understanding what a mental illness is and how to best deal with it"* (Noonan, 2017). This can lead to family members encouraging their loved one to *"pull yourself together"* or *"get over it,"* but these distorted perceptions *"assume the individual has control over the illness, which is false."*

Simply educating families about what mental illness is and how it works, however, will not wholly fix the frustration, anger, stress, or resentment they may feel while coping with their loved one's condition and the stigma attached to it. According to Healthyplace, a U.S.-based online consumer mental health community that provides information, resources, and supports, *"These families are ignored at best and blamed at worst by a society that doesn't understand their needs."* They describe mental illness as a bully that not only bosses the primary sufferer but also their loved ones, making *"instability, separation, divorce and abandonment frequent family outcomes of mental illness"* (ibid).

So what exactly is going on that can lead to these outcomes? Healthyplace identifies five common reactions that family members can have to their loved one's mental illness: *stress, trauma, loss, grief and exhaustion.* It's important to keep in mind that every family's recovery journey is different, and while these reactions are common, they are not the only reactions that families can experience. Below you will see a brief description of each; check out the Resources section for the Healthyplace link if you're interested in learning more.

- Stress results when a family member experiences consistent *"tension, dread and worry"* due to the unpredictable nature of their loved one's symptoms. Stress accumulates over time and can

STIGMA BY ASSOCIATION

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lead to conditions such as high blood pressure or ulcers.

- Living environments characterized by harsh words, stigma, and watching helplessly as loved ones are bullied by their symptoms (known as witness trauma) can cause family members to experience “*traumatic symptoms like invasive thoughts, distancing and physical disorders.*” If left untreated, these symptoms could develop into traumatic stress or post-traumatic stress disorder (PTSD). When family members attempt (and surely fail) to control their loved one’s symptoms, their “*beliefs about control, safety, meaning and their own value*” can begin to erode.
- During this time, family members can experience personal, social, spiritual, and economic losses, and may feel the loss of the ‘the way things were’ or the family relationships that they had before.
- As with any major change in life, the onset of a behavioral health condition can lead both the diagnosed individual and their family members to experience the stages of grief. Persons going through this process are often stigmatized, however, by a culture that fails to “*sufficiently acknowledge and legitimize the grief of those under the influence of mental illness.*” This stigma can cause their grief to compound, potentially preventing them from moving forward.
- After living in a family atmosphere characterized by stress, trauma, loss, and grief, exhaustion naturally sets in.

As you can imagine, family members experiencing these reactions may have a negative perception of themselves, their loved one, or toward behavioral health disorders in general. Challenging stigma starts with challenging our own perceptions, and family members may not even realize that they have developed these perceptions. Can the stigma that family members receive cause them to stigmatize others? Yes, just as any

stigmatized individual can, in turn, stigmatize others. Stigma can beget stigma. But family members CAN choose to refocus and look again in order “*to move beyond their loved one’s illness—not away from their loved one.*” (Healthyplace, 2016) Here are some ideas that we’ve compiled for challenging unhealthy perceptions:

- Educate yourself and others, including your support system and anyone who may be relevantly involved with your family or your loved one. Education not only includes learning about your loved one’s condition and symptoms, but also about the reality of recovery, its non-linear nature, and the healthy coping and problem-solving skills that you’ll need as a supporter (Herron, 2018). While there are classes and resources available for adults (i.e. NAMI Basics), it’s important to include children and young people in this process as well: they may not understand what’s happening, making them susceptible to self-blame and self-stigma. Adults can help children to “*understand the condition and hold compassion towards the person who has it*” while monitoring that they continue to feel comfortable and secure (rtor.org, 2018). Check out the Children of Parents with Mental Illness webpage in the Resources section for access to their library of educational videos on different types of behavioral health disorders, recovering from these diagnoses, and tips for self care, created specifically for young people.
- Find Support from other people who also support loved ones with behavioral health conditions. This could take the form of support groups, peer mentorship, or online resources and forums. In 2016, parents of children experiencing substance use problems pointed out the need for more supports in the context of addiction. “*Maryland has a history of providing peer-to-peer support to adults with mental health disorders and family-to-family peer support to families caring for a child with mental health problems. Families of youth with substance use disorders need and want similar supports*” (Maryland Coalition of

Families). Beyond emotional and social support, however, families are increasingly requesting help in navigating systems of care and support. “If you are applying for a benefit, seeking respite, or trying to obtain medical care, sadly there’s no ‘User Guide’ or clear pathway through the system,” says one carer (SANE Australia, 2018). Although she resides in Australia, this carer’s “four golden rules” are not country-specific; instead, they’re tools and attitudes that can be adapted anywhere in the world to keep your motivation and persistence high in the pursuit of services and supports. Follow the *Navigating the System* link in the Resources section for more information.

- **Practice Self-Care.** Taking time to tend to your own wellbeing is an important tool for combating stress and keeping yourself mentally and physically healthy. This goes for every member of the family, adults and children alike.
- **Allow Healthy Grief and Acceptance** of the situation, just like you would with any other major life transition. As mentioned earlier, individuals and families are often stigmatized for grieving the losses that can result from mental illness or addiction, stunting the grief process and limiting their ability to mourn and find acceptance. Ron, a parent whose child struggles with addiction, wrote to The Partnership for Drug-Free Kids about his experience. “We spent years hiding from our son’s addiction. We denied it, we were ashamed of it, we tried protecting him from it, if we could have disappeared we would have. That strategy served no one well. When we were able to overcome our shame we were finally able to take the first steps forward in helping ourselves and being in a place to help him when the time comes.”
- **Know When to Step Back.** A main tenant of recovery includes self-direction, meaning that family members will likely need to change how they support their loved one in different stages of recovery. This isn’t always easy to do though, as Fred tells SANE Australia. “When Cathy got

to that recovery stage, I got really angry for about two or three weeks and couldn’t figure it out. Then a lightbulb went off and I realised I was struggling with letting go. It’s a common thing with carers that I work with, particularly for older people who have cared for adult siblings for a long time,” he says. “They can actually subconsciously sabotage that person’s recovery. Not intentionally, but unconsciously. They feel that without the carer role, what will they do?” (SANE Australia, 2018). Stepping back isn’t always easy, but it can be necessary to help a loved one heal and recover.

- **Maintain Hope.** Yes, there are likely going to be many challenges that families will have to endure and overcome when a loved one is experiencing behavioral health challenges. But **in order to overcome these challenges, it is critical that families refrain from assuming what the future holds.** Assumptions like “My loved one will never get better,” “I’m going to be caregiving for the rest of my life,” and “My loved one is too impaired to be successful” are not facts that accompany a diagnosis. **Recovery from behavioral health conditions is possible, and the love and support that comes from families can be valuable tools in the healing process.** As activist and author Tonier Cain says in her film, *Healing Neen*, “Where there is breath, there is hope” (2010). We need both in order to recover.

Resources

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~ Recovery Story Series ~



Charisa Billigmeier

“Growing up, I lived in a family environment that was stressful and abusive. Trauma built itself into a breakdown at 17. I was introduced to psychiatrists, therapists, and rehabilitative services, but no one said anything to me about peer support for ten years. Through a random flyer, I was introduced to On Our Own of Frederick. In a way, it felt like coming home, and a place I truly belonged. ***My diagnosis didn’t define me, and I didn’t just ‘receive services’, I was allowed to give back, and my relationships were ‘two way streets.’*** It has made the difference between life and death to have my peers rowing the boat with me (not for me). Never underestimate the power of a ‘peer support oar’... We may not always know where we’re going, but we’ll always get there together.”



Catherine Blessing

“I want to serve as a vessel for change by sharing my lived experiences, providing hope to those who feel unworthy of it. I’ve learned that my past does not have to predict my future, and I want others to know the same is true for them. ***Helping others helps me remain grateful, feeling appreciative that every day I have a life worth living.***”



Curtis Terrell

“I wore a mask for many years because I didn’t want people see who I really was. I was empty, lost. It was a retired colonel who recognized the PTSD and encouraged me to go to the VA. When I met with a peer support specialist, I finally felt like I was home. ***Peer support literally changed the dynamics of my life.***”



Rob Zellner

“If you use or used drugs its ok. I was a gang member, drug dealer, felon. I had tremendous guilt and shame, knowing that I put stuff into the community that killed people. Every time I thought there was a bottom, there was a trap door. We all make mistakes and can rise above. Be the hope and the person you needed when you were younger. Don’t allow society to deem you a failure or let your past behavior define you. ***Our stories are others key to change. Keep fighting for yourself.***”

CENTER PROFILE: ON OUR OWN OF FREDERICK COUNTY

by Casey Saylor



“Hello! Welcome! Are you new?”

A kind voice greeted me as I crested the top of the stairs. Cathy then introduced herself and invited me in. I had come to On Our Own of Frederick County (OOOFC) to immerse myself in the workings of this Wellness & Recovery Center in order to profile it for the OOOMD summer newsletter. More and more chairs were pulled over as folks came in, and before I knew it I’d happily spent 30 minutes in that chair, engaged in conversation about the impact that this place has had on their lives and their recovery journeys.

When asked what makes On Our Own of Frederick County unique, every person I spoke to mentioned “culture.” There were different words used to describe it, ranging from “strengths-based,” “safe,” and “true democracy,” to “a place to express ourselves without being looked down on.” But everyone expressed the same sentiment: they felt part of creating it.

Executive Director Eric Wakefield echoed this, describing the center as “a peer-run environment” that “runs organically.” He is very intentional about his influence on the culture, and spoke expansively about how having the buy-in and support of members is more important than maintaining hierarchy or structure. “Governance, ownership, and how we protect and serve each other are fundamental to the group process of being human,” he says. “This culture enables space for people to find a place in our tribe.” Members welcome newcomers, who then take on roles that help the Center run smoothly on a day-to-day basis. Eric describes this as a sensible cycle. “Folks who have newly become a part of the fabric of this place know how to

work with folks coming in the door better than I do” he says, “since they just came in themselves not so long ago.” In a small office on the second floor, two paid staff people cover administration and provide one-on-one peer support.

There is no hierarchy in the structural roles of the center - everyone is on an equal playing field, with unpaid peers providing just as much input as employees. “The group has the wisdom to tease apart issues,” he says, stating that this keeps power in the hands of OOOFC’s members and enables them to handle crisis and other challenges without guilt or prescribed solutions from authority.

To illustrate this philosophy in action, Eric invited me to a weekly Member Meeting. The meeting starts with a group check-in, where each member is given the opportunity to speak and provide personal updates. Next comes a discussion of center activities, such as event planning and scheduling. And, as with any organization, there is discussion regarding concerns. Today’s had to do with disappearing dishes. “The health of our membership is gauged by the complaints brought up in member meeting,” Center member Charisa explains. “I’d say we’re doing pretty great since we’re only talking about dirty dishes and missing mugs.”

It wasn’t always smooth sailing, though; the culture was considerably different when Eric first transitioned into the Executive Director role in 2015. “It took 1.5 years to change the vibe at OOOFC from a volatile one to what it is today, says staff member Cindy D’Aquino. The main priority in the beginning was stabilizing the center’s existing community. From 2016-2017 the center shifted gears to provide outreach and connections to the larger community. Hospital diversion and peer

CENTER PROFILE: ON OUR OWN OF FREDERICK COUNTY

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respite efforts for walk-ins and members were both efforts begun at this time.

Several roadblocks popped up in achieving these goals, pushing them to change course once again at the end of 2017. Today, the center focuses primarily on internal relationships and peer training and education. OOOFC aims to provide space and time for anyone who comes in the door to connect them with a safe peer environment. Eric describes a philosophy of “space and time,” where both needs and interventions are allowed fluidity. “What people need one day is different than what they may need another,” he says, so the center environment needs to be flexible enough to change with these needs.

OOOFC’s secondary goals include working on community partnerships by better informing the Frederick community about what they do and how they can collaborate to benefit the community. According to Cindy D’Aquino, “As we connect and know what’s going on, we can recommend our members to appropriate services, and we receive that from the community and providers too.”

Toward this end, they have created two educational videos titled We Come from Trauma and Our Journeys (available at <http://www.onourownfrederick.com/>!) and have also applied for grants to create another that will highlight how OOOFC and providers can build on the collaborations they already have. One of the most exciting efforts has been an ongoing partnership between OOOFC, Maryland Ensemble Theatre, and the Student Homelessness Initiative Project (SHIP) to produce the play Life without the Ruby Slippers.

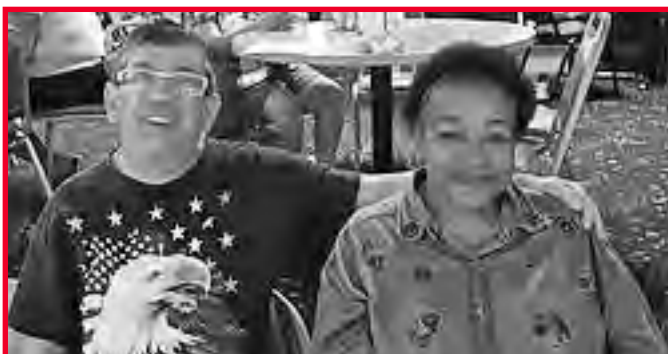
The play highlights individual stories of homelessness, told in part by those whose lives have been directly impacted by it, including several OOOFC members. It premiered in 2016 and was successfully re-mounted again this past March.

Frederick’s awareness and interest in peer-run culture has increased over the past two years. Cindy identifies this result as a change in perception: people were frightened, confused by, or unsure of the peer-run culture initially because they didn’t understand it. OOOFC’s efforts to share their paradigm of recovery and their personal stories has resonated with the community and relationships have begun to change.

There is much promise; however, as with all ongoing community relationships, there remains room for improvement. One of the challenges that remains to be addressed is the ongoing difficulty in finding employment for peers who receive their CPRS through OOOFC. The center hopes to work with the health department to expand the pool of applicants for CPRS jobs beyond those trained specifically through health department programs.

Both within the center doors and in the Frederick locale, the entire OOOFC community is working hard to share and build credibility for their peer-run traditions. According to Eric, “Peer support runs on a cycle. One where people often come in looking for support and end up supporting others and contributing to a place they love.” He adds with a smile, “When that cycle is working, leadership ends up working themselves out of a job.”

Something tells me he wouldn’t have it any other way.



LOCAL FOUNDATIONS BRING IMPROVEMENTS ON MAIN STREET

by Katie Rouse, MSH Operations Director

It might have been a long, cold, wet Spring this year, but that didn't stop Main Street Housing (MSH) from forging ahead with several exciting property improvement projects generously funded by local foundations!

Eastern Region

Thanks to two grants from the **Reynolds/Cristiano Fund of the Mid-Shore Community Foundation**, and funding from the **PNC Foundation**, MSH was able to complete improvement projects at four of our properties in the Mid-Shore region.

Caroline Co: Our Thrive House in Denton, MD offers two 2-bedroom units of quality, affordable, supportive housing for four young adults (18-25) with psychiatric disabilities who are aging out of the foster care systems of the 5 Mid-Shore counties. Thanks to these grant funds, we were able to have a contractor trim back the overhanging branches of a large tree and remove several very overgrown bushes, both of which were interfering with our ability to maintain the roof and gutters. MSH staff installed new, colorful and low-maintenance shrubbery that enhances the property's fit in the neighborhood and increases tenants' pride in their home.



Overgrown



Ready to Thrive

Dorchester Co: Our 3-unit apartment building in Cambridge, MD serves a total of four (4) tenants living with psychiatric disabilities and Extremely Low Income. Grant funds were used to complete three important projects. An electrician installed emergency lighting and new 10-year lithium battery smoke detectors in the building's common hallway. MSH staff added a gravel parking pad in the rear of the building, which is often subject to muddy conditions. Finally, we installed new bushes and mulch along the front of the house. This property is located in an attentive and engaged community, and our efforts to improve the exterior are much appreciated by the tenants and their neighbors.



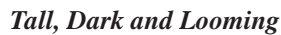
Gravel Parking Pad



Improved Curb Appeal

Queen Anne's Co: Grant funding from the **PNC Foundation** made it possible for MSH to have two overgrown trees removed from our two properties in Queen Anne's County. One tree had been knocked over after numerous storms battered the Eastern Shore this spring, and the other had grown far beyond our capacity to keep safely trimmed. Both properties now benefit from more sunlight and a better view!

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50-year architectural shingles – plus a full set of new gutters! - thanks to very generous funding from the **Caroline Fredricka Holdship Charitable Trust**, administered by PNC Charitable Trusts, and a grant from **The Herbert Bearman Foundation**.



A total of 27 tenants directly benefitted from these improvement projects at the properties they call home. And thanks to the generous support of these four foundations toward critical maintenance and repairs costs, all 100+ tenants living ‘on Main Street’ are able to continue experiencing truly affordable housing. We hope your home improvement projects have gone as well as ours!

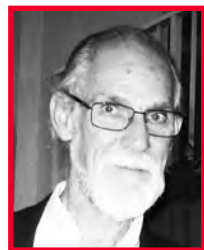
IN THE NEWS...

Congratulations to Lower Shore Friends, Inc. based in Salisbury, MD, which serves the three lower shore counties of Wicomico, Worcester and Somerset, for receiving recognition for their commitment to workplace wellness with the “On The Path Award” from Healthiest Maryland Businesses for the third year in a row. Hats off to Lower Shore Friends Executive Director Wilmore “Bunky” Sterling and all his staff, volunteers and members on a job well-done!

Congratulations to On Our Own of Maryland’s Director of Network and Peer Services Lauren Grimes on winning the University of Baltimore’s 2018 Excellence in Public Administration Award. Lauren is working on a Master’s Degree in Public Administration and Nonprofit Management. Way to go Lauren!



Lauren Grimes



Tom Merrick

Congratulations to Tom Merrick, Acting Director of Child, Adolescent and Young Adult Services at the Maryland Behavioral Health Administration on his retirement! Tom has been a strong support of the peer movement here in Maryland and encouraged us to develop our Transitional Age Youth Outreach Project. We wish Tom a very happy retirement and best of luck in all his future endeavors.

On Our Own of Maryland wishes to thank Ellen Weston for her service on the On Our Own of Maryland Board of Directors, as Ellen recently resigned from our board. We also send her congratulations on her retirement. Best wishes to Ellen!



Ellen Weston

We are sad to say good-bye to Maggie Scheie-Lurie who is retiring at the end of June to pursue other interests. Maggie was our Peer Employment Counselor working with peers at Cornerstone in Montgomery County, MD, encouraging folks to pursue opportunities for employment. This position was part of



Maggie Scheie-Lurie

a special project with the Maryland Employment Network. We wish Maggie and her husband all the best as they pursue other interests in their retirement.

The National Coalition for Mental Health Recovery (NCMHR) is proud to host Alternatives 2018, which will be held July 29 through August 3, 2018 at The Catholic University of America in Washington, D.C. The Alternatives Conferences are designed to further peer-operated efforts and to support recovery across the nation. The conferences offer in-depth technical assistance on peer-delivered services and self-help/recovery methods. This is an event that is unique in its history and its importance. The conference theme is “On Our Own, Transforming the Future Together”—as both an homage to the seminal work by the late movement leader Judi Chamberlin and in recognition of the fact that this will be a “People’s Alternatives,” funded entirely through registration fees and donations. College dorm rooms (with one or two single beds and private bathrooms) will be available for an affordable price, and three buffet-style meals a day will be available in the college dining hall. For more information, go to their website at: www.alternatives-conference.org.

Other Consumer Organizations

Silver Spring Wellness & Recovery Center
1400 Spring Street, Suite 100
Silver Spring, MD 20910

301-589-2303 x108 / Fax: 301-585-2965
Website: www.silverspringdropincenter.blogspot.com

Marty Log Wellness & Recovery Center
3 Milford Mill Road, Pikesville, MD 21208
410-653-6190

Contact Person: Annette Burnette
E-mail: annetteburnette@prologueinc.org

Our Place Wellness & Recovery Center
400 Potomac Street, La Plata, MD 20646
301-932-2737

Contact Person: Stephanie Burch
E-mail: ccfl_ourplace@verizon.net

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Website: www.ooocc.org

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Website: www.onourownofcarrollcounty.org

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E-mail: daphne@oomc.org
Website: www.oomc.org

On Our Own of Prince George's County, Inc.
10007 Rhode Island Avenue
College Park, MD 20740
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www.onourownpg.org

On Our Own of St. Mary's County, Inc.
P.O. Box 1245; 41665 Fenwick Street;
Leonardtown, MD 20650
Phone: 301-997-1066 / Fax: 301-997-1065
Contact Person: Carolyn Cullison
E-Mail: oooinsmc@verizon.net

On Our Own, Inc. (Baltimore City) & Transitional Age Youth Center Mobile Peer Support Unit
6301 Harford Road; Baltimore, MD 21214
Phone: 410-444-4500 / Fax: 410-444-0239
Contact Person: Tony Wright
E-Mail: tonyw21214@aol.com
www.onourownbaltimore.org

On Our Own Charles Street Center
2225 N. Charles St., Baltimore, MD 21218
Phone: 443-610-5956
Contact Person: Robert Williams
E-Mail: tonyw21214@aol.com

On Our Own Dundalk (Baltimore County) & One Voice
6718 Hollabird Avenue
Baltimore, MD 21222
Phone: 410-282-1701/410-282-1706
Hours: call for hours
Contact Person: Kathy Franks and Kit Bloom

On Our Own Catonsville Center
7 Bloomsbury Drive
Catonsville, MD 21228
Phone: 410-747-4492 Ext. 1203
Contact Person: Elizabeth Bowers

On Our Own - Towson Center
Sheppard Pratt - Building D, Room D020
6501 N. Charles Street, Baltimore, MD 21204
Phone: 410-494-4163
Contact Person: Caroline Warfield

Helping Other People Through Empowerment
2828 Loch Raven Road
Baltimore, MD 21218
Phone: 410-327-5830 / Fax: 410-327-5834
Contact Person: Thomas Hicks
E-mail: thickshope@verizon.net
www.hopebaltimore.com

Hearts & Ears, Inc.
611 Park Avenue, Suite A
Baltimore, MD 21201
Phone/Fax: 410-523-1694
Contact Person: Mary Chirico
E-Mail: info@heartsandears.org
www.heartsandears.org

New Day Wellness & Recovery Center
16 North Philadelphia Boulevard
Aberdeen, MD 21001
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Contact Person: Bill Patten
E-mail: newdayspininc@gmail.com

Chesapeake Voyagers
342-C North Aurora Street
Easton, MD 21601
Phone: 410-822-1601 / Fax: 410-822-1621
Contact Person: Diane Lane
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Website: www.chesapeakevoyagers.org

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E-mail: yarmeaux@gmail.com
Website: www.pwrsinc.org

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121 East Antietam Street
Hagerstown, MD 21740
Phone: 301-790-5054 / Fax: 301-791-3097
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jmraley2@gmail.com

Soul Haven
119 East Antietam Street
Hagerstown, MD 21740
Phone: 301-733-6676
Contact Person: Kirk Stroup

HOPE Station
(part of OCA, Inc. - Allegany County)
632 N. Centre Street
Cumberland, MD 21502
Phone: 240-362-7168 / Fax: 240-362-7170
Contact Person: Dan Snyder
E-mail: HOPEStation@atlanticbnn.net

Mountain Haven
(part of OCA, Inc. - Garrett County)
315 Dawson Avenue
Oakland, MD 21550
Phone/Fax: 301-334-1314
Contact Person: Kathy Schrock
E-mail: kathy59@methavenwrc.com

ON OUR OWN OF MARYLAND MEMBERSHIP APPLICATION

By becoming a member of On Our Own of Maryland, you will be supporting our efforts to promote equality in all facets of society for people who receive mental health services and to develop alternative, recovery-based mental health initiatives. To become a member, complete this form, make your check or money order payable to On Our Own of Maryland, Inc. and mail to 7310 Esquire Court, Mail Box 14 • Elkridge, MD 21075.

Name: _____ Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: (____) _____ E-mail Address: _____

Amount enclosed for annual dues:

Voting Members (consumers/survivors)

Nonvoting Members (non-consumer friends/family)

☐ \$10

☐ \$2 (those on disability/entitlement income)

☐ \$25 (individual)

☐ \$50 (organization)



CONSUMER NETWORK NEWS

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On Our Own of Maryland, Inc., a statewide behavioral health consumer education and advocacy network, promotes equality in all facets of society for people who receive behavioral health services and develops alternative, recovery-based behavioral health initiatives.

ABOUT CONSUMER NETWORK NEWS

Consumer Network News is published quarterly by On Our Own of Maryland, Inc. and is sent to all members. Views expressed herein are those of the authors, not necessarily of the board members, or funding sources of OOOMD. Newsletter materials may be reproduced without further permission, if credited, except for copyrighted items. If you have articles, letters, poems, or other information you would like us to consider publishing in the next issue, contact:

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