



ON OUR OWN
OF MARYLAND

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Network News

On Our Own of Maryland, Inc.

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We are a network of people with lived experience of mental health and/or substance use challenges and recovery journeys.



Exploring the Eight Dimensions of Wellness

By R.J. Barna & Katie Rouse

Wellness. We use this word all the time in behavioral health, but practicing wellness can sometimes feel like steering a ship across an unknown sea. We have an idea where we want to go, but we may be pulled or pushed off course by rough weather, big waves, a lull in the wind, or an unexpected island stopover. If wellness is our voyage, how do we navigate?

One possible compass comes in the form of the Eight Dimensions of Wellness (8DOW) framework developed by Dr. Peggy Swarbrick and her colleague Jay Yudof in the early 1990s. This is a model for understanding, analyzing, and personally defining practical steps to improve individual wellness by actively considering its eight interconnected contributors. Using a strengths-focused approach, 8DOW can help improve existing habits that contribute to our wellness and identify areas where new habits might lead to a more satisfying lifestyle overall. As part of On Our Own of Maryland's mission to promote autonomy and choice about life decisions for individuals with mental health and substance use needs, 8DOW has proven an invaluable guide and tool for increased well-being.

Thinking in Dimensions

Each of the Eight Dimensions of Wellness impacts our overall quality of life. Physical, Intellectual, Emotional, Financial, Spiritual, Occupational, Social, and Environmental aspects of our lives can inform, enhance, and even hinder one another. Even a single activity can have a positive impact on multiple dimensions. For example, someone who takes a walk in the morning (physical) with a friend (social) to a beautiful park (environmental), is also engaging in a free form of exercise (financial). It's all related.

There are several important points to consider regarding wellness, defined by Swarbrick as, "a conscious, deliberate process that requires that a person become aware of and make choices for a more satisfying lifestyle." The first is that wellness is not the absence of something bad (disease, stress, etc.), but rather the presence of positive elements, such as a sense of

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Exploring the Eight Dimensions of Wellness

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purpose, engaging conversation, safe spaces, creative outlets, or a beloved confidant.

Personal Wellness

Wellness is self-defined and self-directed. Each and every person's list of positive elements is going to look different. Even the same things – like engaging conversation, for example – will require different levels of effort or attention, and will look different for the same person as their life, moods, energy, and situations fluctuate. Because of this, wellness is also adaptable and changing. We have to be prepared to adjust our approach from day to day in response to our ever-evolving and multifaceted needs. Being conscious of the Eight Dimensions of Wellness can inform that process by suggesting practices that are balanced, holistic, and multidimensional.

One of the ways folks can make 8DOW an active part of their wellness journey is to build an action or vision board: a physical or digital space for displaying informational and inspirational images, text, and ideas. The board can address short- or long-term goals, and encompass all eight dimensions or just one. It provides motivation and encouragement, and reviewing it on a regular basis can also improve the likelihood of putting our intentions into action.

Science backs up this practical tool. An action board provides a framework for us to identify opportunities that we may otherwise have missed. According to neuroscientist Tara Swart, “the brain has a process called ‘value-tagging,’ which imprints important things onto your subconscious and filters out unnecessary information. The brain assigns a higher ‘value’ to images than written words on a ‘to-do’ list” (Scipioni, 2019). The more we look at these images, the higher “value” the brain places on them. Swart says that repetition can relieve some of the stress and anxiety associated with trying something new.

Community & Organizational Wellness

While wellness is often thought of as an individual journey, many of us spend a large part of our lives in team environments: school, work, volunteering, or community. Collective wellness flourishes when group



principles, protocols, and practices are aligned to all eight dimensions.

Organizations might address wellness in different ways, depending on their mission, activities, and culture. An afterschool sports program will boost physical wellness automatically, but might add a mentoring program to support the social dimension. A housing program might offer an adult literacy class for intellectual growth and a savings match program to support financial wellness. In a hospital system, spiritual wellness might look like a grief support group led by a pastoral care department, and occupational development might be supported through in-service training days. In a warehouse setting, environmental wellness might take the form of protective gear and a comfortable break room.

Especially in the helping professions, facing constant stress without strong wellness supports can lead to vicarious trauma, compassion fatigue, and burnout. These terms are ways of describing the different ways that repeated or prolonged exposure to extreme experiences (directly or indirectly) can hurt our wellness in multiple dimensions by degrees. Being overloaded by traumatic information for a long period of time can lead to deep physical, emotional, and spiritual distress, exhaustion, and crisis. But by being trauma-informed, recognizing

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the signs of compassion fatigue, and encouraging wellness practices on the individual and organizational levels, we can work to build resilience, prevent burnout, and work together to meet the needs of our communities.

Whether big or small, every organization can help foster all Eight Dimensions of Wellness by working to recognize and reduce stigmatizing attitudes about mental health and substance use challenges, and adopting the elements of a recovery-friendly and wellness-focused workplace. ■

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Looking for more ways to create supportive environments?

On Our Own of Maryland's internationally recognized Anti-Stigma Project workshops and our new *8DOW for Helping Professionals* training series offer a combination of information, interaction, and practical strategies for how to create more supportive environments in a variety of services and workplace settings.

Learn more and contact us for a consultation or scheduling at onourownmd.org



Towards Tranquility: Finding Environmental Agency

By Sebastian McNary

Throughout the last 10 years, I've lived in a lot of different places. As a kid, my parents' custody agreement mandated switching homes every other day. I carried my most important belongings in a single backpack. In college, that backpack traveled with me in and out of dorm buildings as I struggled to find trans-friendly roommates. After college, I moved to the city and started planting roots, insisting that I'd finally found the environment where I could settle down.

After a lifetime of struggling to belong, I set my sights on becoming a city person. The public transit and bustling sidewalks meant I could finally explore and connect with others in my local community. However, during my first year in the city, my relationship with alcohol spiraled out of control. I found myself relying on it to cope with the crowded spaces, constant traffic, and noise at all hours of the night. I wanted to believe it was resilience: when bad things happened, I shoved down the pain and resorted to numbing myself.

A week before my 23rd birthday, I quit drinking, which I'd been addicted to on and off for almost a third of my life. This began a slow process of thawing parts of me I'd kept frozen for years. As I regained feeling in parts of myself I'd forgotten, I realized that alcohol had been helping me stay numb to things I didn't think I could control. The discomfort was lessened, sure, but so was the awareness of it, and the impetus to change. I wasn't letting myself feel my environment at the time, so I'd never had the chance to explore how different it could become.

I began to remember how when I was younger, I'd escape my chaotic home and find solace wandering through the forest nearby. When my mind was buzzing with chaos or floating in dissociation, I'd find my way out to the woods. Walking around for hours, singing to myself and the trees, brought me peace. At some point in my life, I had intuitively known to seek out nature when things became too much. As a lifelong

agnostic with heaps of religious trauma in my community, this was my way of reconnecting with something bigger than myself.

When did I let go of that intuition? It seems that somewhere along the way to adulthood, I abandoned my natural grounding responses for the instant gratification and numbing comfort of alcohol. My partner, who never found numbness helpful (or possible), gently challenged my stubborn insistence on staying where we were. He was sharply aware of his own need for more greenery and space, and he helped me recognize my own patterns of pushing through discomfort. With his encouragement, and our shared insistence on making a better life for ourselves, we expanded the boundaries of our home search.

It wasn't an easy process to switch gears, though. We couldn't afford rent in a greener or more spacious area of the city, so we needed to relocate to the suburbs. I worried about losing touch with the local community, and feared that "fitting in" in the suburbs meant sacrificing my identity. We had to jump together, away from familiarity and towards the unknown. I was almost certain we could do it, but risks are scarier when you can't numb yourself away from them.

We felt that fear together – and we made the jump anyway. With incredible luck, we found a perfect little place right by some local shops and bus stops into the city, and down the street from one of my oldest friends. Our new home gives us space

to do all the things that make us feel most human and most connected. Our

street is lined with trees, and we share a garden with our neighbor, so my partner and I can wander through nature together and tend to it in our own backyard. I no longer feel more connected to a backpack than a home. Now, I get to define what home means: a place where people help me understand myself and grow, and where the environment won't push me to numbness, but will actually help me heal. ■



Standards of Affiliation Support Peer-Run WROs

By Katie Rouse

Organizations big and small depend on their staff teams to be focused, energized, and innovative when navigating a rapidly changing world. There's a well-known saying that "culture eats strategy for breakfast," meaning that even the best laid plans won't succeed if a team doesn't have support, unity, and a clear vision.

For peer-operated Wellness & Recovery Organizations (WROs), having a great community culture is foundational for our values-driven work and can be felt by every person who walks in the door. But the behind-the-scenes work of running a small nonprofit can be really challenging, even for experienced leaders.

In the back office, there are legal and policy requirements to meet, bills to pay, and deadlines to manage. On the program side, there are activities to plan, partnerships to build, and all the unexpected things that can pop up on any given day. How do you balance all the dimensions of operating a small-but-mighty community resource center?

For the last decade, On Our Own of Maryland (OOOMD) has been working with leaders of Wellness & Recovery Organizations in our statewide affiliate network (listed on page 15) and subject matter experts to create our *Standards of Affiliation Handbook*. A combination of how-to manual and resource guide, the standards provide a detailed roadmap to help our grassroots partners manage, thrive, and grow.

One section of the standards explains the values and principles of peer support, and how these apply to the operations and management of a peer-run WRO. We explore how to facilitate a welcoming, affirming, trauma-informed and healing-centered environment, and the elements that go into offering high-quality peer-delivered services. WROs are powered by talented staff and volunteers, and the standards offer strategies and best practices for recruitment, training, supervision, professional development, and retention.

“How do you balance all the dimensions of operating a small-but-mighty community resource center?”

Another section covers the business basics for non-profits: legal requirements, board development, financial management, and important policies. Especially for new executive directors and board members, this becomes a helpful checklist to make sure the organization is keeping up with all of its administrative responsibilities.

Finally, the standards articulate the different ways OOOMD offers technical assistance, training, and coordination across our statewide network. From our monthly *WRO Executive Directors Roundtable* meetings to special network-only training events, we plan a variety of activities throughout the year that match up to the top needs of WROs as expressed through an annual survey. Additionally, affiliate WROs can access specialized consulting services to help with particular challenges or projects, like new program development or strategic planning.

Just like each of us may need support in different dimensions of wellness over time, the Standards of Affiliation can help WROs move from vision to goal to practice, strengthening our collective power to show the transformative impact of peer support. ■

For more information about our statewide affiliated network of peer-operated WROs, contact us at network@onourownmd.org

Development of OOOMD's *Standards of Affiliation* was made possible through funding under the Statewide Consumer Network grant program of the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Mental Health Services. We are truly grateful for this generous support!

Center Spotlight: Dimensions of Growth at OOOFC

By Reesheemah Partyka

Financial wellness within an organization can be described as the ability to have financial resources to meet practical needs, a sense of control and knowledge about finances, and a trust in the financial stability and responsible use of organizational resources.

At On Our Own of Frederick County (OOOFC), the last 18 months have been an example of growth in these elements. In July 2023, they were selected for a competitive grant through the Governor's Opioid Operational Command Center, and they received a boost of county funds. Two months later, in September, they received a strategic grant from the Community Foundation of Frederick County to establish a new CPRS Community Resource Navigator position. Then, in November, their inspiring presentation about the power of peer support won a generous prize through the Impact Club of Frederick storytelling competition.

While securing funding is an important piece of financial wellness, it is only one piece. A well-thought-out strategic plan, emphasizing multiple funding sources, creative use of organizational resources, and ambitious

long-term goals are also key. Some of the ways OOOFC has been able to grow thanks to these funds include new equipment, modernized salary rates, and extended hours of operation. They have also been able to provide peers, staff, and volunteers with 10 scholarships of \$500 per person to be used toward CPRS credential training.

Even with the additional funds, OOOFC Executive Director Neil Donnelly continues to responsibly develop beneficial partnerships. Examples include the Helping Hands and Caring Hearts organization, which recently donated new t-shirts, pajamas, socks, and makeup to OOOFC members, as well as the Ride United Program of the United Way of Frederick County, which offers free rides to members. This opens a world of opportunities, and aims to break barriers and empower individuals on their wellness and recovery journey by helping members receive services more frequently and with greater ease. By practicing organizational financial wellness, OOOFC is creating a space full of positive elements, where they continue their mission of promoting mental health and wellness in the community and making a difference. ■



Weight Stigma and Its Impact on Wellness

By Kris McElroy

More than 40% of U.S. adults, across a range of body sizes, have reported experiencing weight stigma at some point in their life (Abrams, 2022). Over 50% of individuals who have encountered weight stigma also disclose living with at least one mental health condition. Stigma, defined as preconceived attitudes or beliefs toward individuals or groups, pervades societies globally. Weight stigma (also referred to as sizeism), is characterized by prejudice or discrimination based on size or weight, profoundly affects mental and behavioral health (Abrams, 2022). It manifests in various forms, such as teasing, bullying, social exclusion, and prejudice.

What is Weight Stigma?

I recently interviewed Miaya Robinson, who has experienced weight stigma since childhood. She describes weight stigma as “the act of making prejudgments and creating a negative environment (physical and emotional) based on my weight”. For Miaya, examples of this include being forced off a plane due to her weight when her required additional purchased seat that she had already purchased was needed for an additional passenger; being excluded from after work happy hour because of the inaccessible seating; experiencing 25+ years of being denied life insurance; and being teased by other children and parents while attending her daughter’s soccer games.

Miaya describes these experiences of weight stigma “made me feel worthless and like a burden because of how much I weighed.” Weight stigma is often perpetuated through societal norms, media representations, and interpersonal relationships, leading to the internalization of negative beliefs about one’s body and self-worth. Additionally, higher rates of internalized weight stigma also show increased mental health condition occurrences (Seruya, 2023).

Prevalence of Weight Stigma

Weight stigma is pervasive across age, gender, ethnicity, and socioeconomic status, with children as young as preschoolers vulnerable to weight-based teasing.

Biased attitudes are reported by 69% of doctors, 46% of nurses, and 37% of dietitians, which can lead to delays in treatment, misdiagnosis, and accessibility barriers (Brown et al., 2022). Patients may be seen as “less than,” be described as “lazy” or “non-compliant,” and experience additional barriers to accessibility such as access to the waiting room or exam tables.

Unlike many other forms of bias (such as racism, sexism, and ageism), discrimination based on body size is legal in every state except Michigan. This lack of legal protection perpetuates the stigma (Sabharwal et al., 2020).

Impact on Physical Health

Weight stigma in healthcare directly impacted Miaya’s access to care for pseudotumor cerebri (PTC), a rare medical condition that can cause swelling of the optic nerve and result in vision loss, if not caught and treated early. Miaya suffered for eight months with this condition as a single mom of a young child before receiving adequate care and treatment, and stigma was part of the reason why.

During those eight months, she experienced discriminatory remarks from doctors based on her weight, had her symptoms dismissed as anxiety, continued to endure excruciating pain while bracing for a future in which she might never be able to see her daughter with her own eyes, and had to take a leave of absence from work when she lost 50% of her vision. Weight stigma still serves as a reminder of the dangerous impact it had on her ability to access compassionate and competent health care.

Impact on Behavioral Health

The detrimental effects of weight stigma on behavioral health are profound and multifaceted, leading to depression, anxiety, low self-esteem, increased suicidal ideation, and body dysmorphia (i.e. a hyperfocus on a perceived flaw in appearance that can lead to Body Dysmorphic Disorder). Negative weight-related messages can trigger disordered eating behaviors like binge eating and restrictive eating.



Additionally, weight stigma hinders healthy lifestyle efforts and physical activity. Research shows those who feel stigmatized are less likely to exercise and more likely to be sedentary. They are also more likely to face bias in seeking wellness support. For instance, they may be denied access to classes, be required to complete more steps, or charged more for personal training. These biases are rooted in sizeism where larger bodies are deemed to have “less motivation” and “require more work.” This in turn exacerbates the risk of weight-related health conditions and increased behavioral health challenges.

Some individuals with a behavioral health condition take antipsychotic medication as a part of their treatment, which comes with increased risk of weight gain, prediabetes, and lethargy. These side effects often make patients feel they must choose between treatment and physical health. Traditionally, providers have prioritized treatment while sidelining patient concerns about side effects (Blum, 2023). Yet, weight gain and lethargy frequently lead individuals to discontinue effective

medications. Now, some providers prioritize open discussions with patients about psychotropic medication's impact on weight gain, fostering collaborative solutions for better treatment outcomes (Blum, 2023).

Intersectionality and Weight Stigma

It is essential to recognize that weight stigma intersects with other forms of discrimination, such as racism, sexism, ableism, and classism. Individuals who belong to marginalized groups may face compounded stigma and experience intersecting forms of oppression. For example, women, people of color, individuals with disabilities, and LGBTQ+ individuals who are overweight or obese may encounter unique challenges and barriers to accessing supportive resources and services, including diagnosis and support for eating disorders, and adequate health care, behavioral health support, and healthy relationships.

Addressing Weight Stigma for Improved Wellness

Miaya's overall wellness was significantly affected by weight stigma. However, she considers herself fortunate to have found access to a good therapist when she was suicidal. The experience of therapy helped her begin to restore balance by giving her space to connect to herself, her trauma, and her binge eating disorder. It created a space for her to begin to identify sources of stigma as well as how she could challenge experiences of stigma and begin to advocate for herself. Most importantly she learned that, despite societal messages and cultural norms, weight does not determine her value in any way. Now, she continues to share her own experiences to raise awareness and challenge biases related to weight and the intersectionality of race, behavioral health conditions, sexuality, and disability.

Miaya sharing her story is one of many approaches working to combat the impact of weight stigma by raising awareness and reshaping perceptions. Other examples include:

- **Promoting Body Positivity:** Educating about diverse body shapes reduces societal norms' influence.
- **Health at Every Size (HAES):** Emphasizing health behaviors over weight loss fosters holistic well-being.

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Amplifying Voices: TAY's Young Adult Advisory Council

By Kris Locus

Young Adult Advisory Councils (YAACs) have become pivotal in shaping decision-making processes across various behavioral health organizations. As the Transitional Aged Youth (TAY) Coordinator at OOOMD, I have the absolute honor of highlighting and uplifting young adult voices ages 18 to 29 in Maryland to advocate for the care they deserve to receive across various systems. With that, I had the idea of creating a YAAC that would empower and amplify the voices of young adults by actively engaging them in the ongoing improvement and growth of the TAY Project. We are committed to fostering a collaborative and inclusive environment where the unique insights, experiences, and perspectives of young professionals are valued and harnessed.

Council Goals

When creating the goals of the TAY Project's YAAC, it was important to keep in mind my own experiences as a young adult involved with numerous committees and councils. I was mindful that I wanted the members to feel like the time spent in these meetings was useful, validating and inspiring. The council seeks genuine feedback from young adults, promoting collaboration and connection. It's a welcoming space where every voice is respected and celebrated. My hope is that this opportunity provides a dynamic platform for young professionals to hone their leadership skills and foster personal and professional growth.

Championing Inclusivity

There is a popular sentiment that many of us in the Peer community stand by: "Nothing about us, without us." It underscores the value of authentic representation, participation, and collaboration to ensure that policies and actions are fair, just, and well-informed. While creating, planning and researching for the YAAC, I garnered invaluable insights and feedback from numerous young adults along the way. This included conversations about experiences with other councils and committees, learning about what was important to their communities and brainstorming about our hopes and goals for the future.



Establishing a Cohesive Identity

Having young adults dedicate their time, energy and expertise is something that I do not take lightly – it is an honor. Therefore it was important for me to provide the members with that same dedication and time in creating an identity and brand around this council. I spent numerous months researching and utilizing YAAC toolkits, making sure that I was making informed decisions. I developed a letter of agreement that serves as a commitment document outlining the reciprocal responsibilities and expectations between the council and its members. I also designed the council logo, bringing in inspiration from our childhood – leaning into fun and youthfulness. Through the feedback that I gathered from the community, I also developed potential meeting topics not just for structure but as a reflection of our commitment to addressing pertinent issues and providing a platform for meaningful discussions. Through these deliberate efforts, my aim is to ignite a sense of ownership and pride among our members, fostering a collective dedication that goes beyond participation.

Valuing Young Adult Contributions

I am a fierce advocate for the recognition and compensation of young adults for their invaluable contributions. The dedication, time, and expertise that young adults invest in various initiatives, be it advisory councils, community projects, or collaborative efforts, constitute a substantial commitment that should be acknowledged

and reciprocated. Far beyond a token of appreciation, compensating individuals for their work becomes a testament to the value they bring to the table. It serves as a tangible recognition of their unique perspectives, lived experiences, and the transformative wisdom they hold. Compensation is a reflection of an inclusive and equitable approach, acknowledging that their input contributes to the overall success of any project or initiative. By fostering a culture that values and compensates young adults, we not only empower them financially but also send a powerful message about the importance of equitable participation and the tangible impact of their work. This paradigm shift not only cultivates a sense of agency and pride but also sets the stage for a more inclusive and just future where every individual's contributions are duly recognized and compensated.

Remaining Flexible

Considering I was going to be the one leading and facilitating the council, I recognized that there would be an innate hierarchical structure; therefore it was important for me during our orientation session to lessen those gaps as much as I could. I reiterated consistently that

this was a council of collaboration and although I may have developed ideas for the meetings, I would always defer and remain flexible to what was important and relevant to them. During this orientation meeting, I also made sure to establish that neither I, nor the TAY Project, were to be excluded from critique. Together, we laid the groundwork by establishing council guidelines, engaging in discussions about important issues, and collaboratively shaping the monthly meeting schedule.

In this dynamic and rewarding landscape, the YAAC stands as a beacon of positive change, a testament to the transformative power of recognizing and valuing the efforts of young adults in shaping the trajectory of their communities and beyond. As we navigate this multifaceted journey, I hope that the YAAC remains a symbol of empowerment, collaboration, and the unwavering belief that true change begins when the voices of young adults are not only heard but actively embraced and celebrated. ■

If you or someone you know may have interest in participating in the next member cycle for the TAY Project's YAAC, please contact tay@onourownmd.org.

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Finding Creativity on the Journey to Healing CPTSD

By Kaely Whittington

When many people think of post-traumatic stress disorder (PTSD), they associate it with a traumatic event that can be pinpointed, such as going to war or losing a loved one. I have a form of this disorder that is called CPTSD. The “c” in this abbreviation stands for complex, which means that the trauma I’ve experienced has taken place over the span of many years. The symptoms I experience include anxiety, problems with emotional regulation, difficulty trusting, and hypervigilance. Because these symptoms can make it difficult for me to sustain long-term close relationships, I value the friends I have in my life tremendously.

At one point, my therapist mentioned a form of therapy called “EMDR” to address these symptoms. Eye movement desensitization and reprocessing (EMDR) therapy was developed in 1987 to treat PTSD. EMDR involves visualizing a traumatic memory while engaging in bilateral stimulation such as tapping or eye movements. I didn’t feel ready when we first discussed the pros and cons, but decided to reconsider when I experienced an episode that severely impaired my ability to function. After years of avoiding a part of me that needed healing and ignoring trauma that I wasn’t ready to face, I told my therapist that I was ready.

Getting Started

The first sessions of EMDR were spent talking about my history and adding coping skills to my wellness toolbox. My therapist guided me through visualization activities, such as identifying a safe space where I could go in my mind. I selected a quiet beach on Tampa Bay, and would engage all of my senses to fully immerse myself. In my mind, I could feel warm sand under my toes, hear gentle waves, smell my favorite sunscreen, and taste the salt on my lips after I’d surfaced from the water. My secluded spot on the beach became even more detailed over time. A stone bridge stretched across the bay, and as I explored, I found a cool cave underneath it with artwork etched on its walls.

Talking about my history was a lot less pleasant than visiting my safe space, to say the least. When we began to dive more into my background, I started having extreme

nightmares. I would wake up disoriented, sweaty, and panicking. Throughout the day, I would vividly recall the details and experience the same terror I felt while I was asleep. My doctor prescribed medication that helped ease the symptoms but the nightmares persisted. My therapist told me that they were a sign that my brain was feeling safe enough to revisit these memories and process them. It turns out that a lot of the heavy lifting in EMDR happens while I’m asleep.

I came into a lot of sessions telling my therapist that I didn’t think I could stick with EMDR because of the nightmares. She listened to my concerns and helped me weigh my options. Those conversations made me realize that I was in the driver’s seat of my own recovery, and gave me a sense of control over a disorder that’s made me feel out of control for so much of my life. I made the decision to move forward at a slower pace.



Moving Forward

In the next phase of EMDR, I began to process negative core beliefs I had formed as a result of trauma. My therapist would tell me to allow my thoughts to flow freely without judgment, and hand me two devices to hold. I'd visualize a traumatic event, and the devices would begin to vibrate, alternating between each hand. Words, images, and emotions would zoom through my mind, which seemed to have almost no connection to my trauma. My therapist would periodically check in with me to ask what was coming up, and I would describe whatever emotion or thought I was having at that moment. I cried tears fueled by self-love and compassion, which flowed the most after I pictured myself as a child who told me, "I'm proud of you." I left most sessions feeling like a burden had been taken off of my chest and replaced with relief. I would also feel an extreme level of emotional and physical exhaustion, so I made sure not to commit myself to any plans on days that I had sessions.

Reconnecting With My Inner Artist

In the days following these appointments I would start to see the results of the work I was doing. I experienced what felt like months of emotional growth and maturity. I could feel parts of my brain unlocking as I began to get in touch with my inner child. I embraced her creativity that had been compartmentalized at the height of my trauma. My inner artist, which had been locked away since I was a teenager, was finally free, and she had a lot to say. I began to journal and write poems again for the first time since being hospitalized in middle

school. I revisited a sketchbook I hadn't opened since high school and saw skillfully crafted drawings. It contradicted everything my inner critic had told me when my pencil touched those pages.

I started finding new ways to connect with my inner artist. I bought cheap jars of washable paint and used my fingers to paint on my shower walls. I would step into the shower with no idea of what I wanted to create. I just allowed my thoughts to flow without judgment, the same way I would in an EMDR session. Once my fingertips dipped into those colors, I'd enter a meditative state. When I'd step back to see what I created, I saw a glimpse into my subconscious, which allowed me to validate my feelings. Next, I would use my hands to smear the painting and return my canvas back into a white tiled wall. The colors would swirl down the drain with the painful emotions that they represented. It served as a reminder that nothing, including pain, is permanent.

My experience in EMDR came full circle when I went to Florida to meet my biological father and grandfather for the first time. We met up at Peach's, my grandfather's favorite diner, for breakfast, and shared stories over French toast. Being able to hug them both was a healing moment for me. The next day, I went to visit Cypress Point Park, the beach that my imaginary safe space was based on. I was surprised to see that the bridge in my imagination had been inspired by a small man-made structure I had forgotten about. I sat underneath a familiar palm tree to reflect on where I came from and who I am today because of it. I closed my eyes for a moment, dug my toes into soft sand, and took a deep breath of salty bay air. I pictured a younger version of myself in my mind and told her, "I'm proud of you too." ■



- **Culturally Competent Care:** This involves training healthcare providers to address diverse patient needs and combat weight stigma.
- **Advocacy:** This includes supporting policies that promote equity and challenge weight-based stereotypes.
- **Community Support:** Establishing resources like peer groups and counseling to empower individuals affected by weight stigma. These efforts aim to reshape perceptions and create inclusive environments for all body types.

Weight stigma is a pervasive social issue that has significant implications for behavioral health. Its detrimental effects on mental well-being, self-esteem, and health behaviors highlight the need for proactive interventions to challenge weight bias and promote body acceptance. By fostering a culture of inclusivity, empathy, and respect, we can work towards reducing stigma and creating a society where all individuals are valued and supported, regardless of their weight or size. ■

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WHAT ARE YOUR TRAINING SCHEDULING NEEDS?



ON OUR OWN OF MARYLAND



SCAN ABOVE TO TELL US ABOUT:

- WORKPLACE SUPPORT FOR CEUS
- BARRIERS TO ATTENDING
- PREFERRED DAYS AND TIMES
- PREFERRED LENGTH OF CLASSES

Wellness & Recovery Organizations

STATEWIDE

On Our Own of Maryland, Inc.
7310 Esquire Ct, Mailbox 14
Elkridge, MD 21075
410-540-9020
onourownmd.org

Main Street Housing, Inc.
7310 Esquire Ct, Mailbox 14
Elkridge, MD 21075
410-540-9067
mainstreethousing.org

ALLEGANY COUNTY

HOPE Station (OCA, Inc.)
632 N Centre St
Cumberland, MD 21502
240-362-7168
ocamd.org

ANNE ARUNDEL COUNTY

On Our Own of Anne Arundel County, Inc.
132 Holiday Ct, #210
Annapolis, MD 21401
410-224-0116
onourownannapolis@gmail.com

BALTIMORE CITY

Hearts & Ears, Inc. ‡
611 Park Ave, Suite A
Baltimore, MD 21201
410-523-1694
heartsandears.org

Helping Other People Through Empowerment, Inc.
2828 Loch Raven Rd
Baltimore, MD 21218
410-327-5830
hopebaltimore.com

On Our Own Charles Village Center
2225 N Charles St, 3rd Floor
Baltimore, MD 21218
443-610-5956
onourownbaltimore.org

On Our Own, Inc.
1900 E Northern Pwky, Ste 309
Baltimore, MD 21239
410-444-4500
onourownbaltimore.org

BALTIMORE COUNTY

On Our Own Catonsville Center
7 Bloomsbury Ave
Catonsville, MD 21228
410-747-4492, x1203

On Our Own Dundalk & One Voice
1107 North Point Blvd, Suite 223
Dundalk, MD 21224
410-282-1706
onourownbaltimore.org

On Our Own Towson Center
Sheppard Pratt
Gibson Building
6501 N Charles St
Towson, MD 21285
410-494-4163
towsonooo@outlook.com

Marty Log Wellness & Recovery Center (Prologue, Inc.) *
3 Milford Mill Road
Pikesville, MD 21208
410-653-6190
briankorzec@prologueinc.org

CALVERT COUNTY

On Our Own of Calvert, Inc.
5445 Cherry Hill Rd
Huntingtown, MD 20639
410-535-7576
onourownofcalvert@comcast.net

CARROLL COUNTY

On Our Own of Carroll County, Inc.
265 E Main St, Suite C
P.O. Box 1174
Westminster, MD 21158
410-751-6600
onourownofcarrollcounty.org

CECIL COUNTY

On Our Own of Cecil County, Inc.
223 E Main St
Elkton, MD 21921
410-392-4228
cpounds.onourown@gmail.com

CHARLES COUNTY

Wellness and Recovery Community Center (Charles County Freedom Landing) *
400 Potomac St
P.O. Box 939
La Plata, MD 20646
301-932-2737

EASTERN SHORE

Caroline, Dorchester, Kent, Queen Anne's, & Talbot Counties:

Chesapeake Voyagers, Inc.
607 Dutchmans Ln
Easton, MD 21601
410-822-1601
chesapeakevoyagers.org

Somerset, Worcester, & Wicomico Counties:

Lower Shore Friends, Inc.
207 Maryland Ave, Ste 4 & 5
P.O. Box 3508
Salisbury, MD 21802
410-334-2173
wlmrstrl@aol.com

FREDERICK COUNTY

On Our Own of Frederick County, Inc.
22 S Market St, Suite 110
Frederick, MD 21701
240-629-8015
onourownfrederick.org

GARRETT COUNTY

Mountain Haven (OCA, Inc.)
206 E Alder St
Oakland, MD 21550
301-334-1314
ocamd.org

HARFORD COUNTY

New Day Wellness & Recovery Center
126 N Philadelphia Blvd
Aberdeen, MD 21001
410-273-0400
newdaywellness.org

HOWARD COUNTY

On Our Own of Howard County, Inc.
6440 Dobbin Rd, Suite B
Columbia, MD 21045
410-772-7905
oohhci.org

MONTGOMERY COUNTY

Peer Wellness and Recovery Services, Inc.
240-292-9727
yarmeaux@gmail.com

Silver Spring Wellness & Recovery Center (Affiliated Santé Group) *
1400 Spring St, Suite 100
Silver Spring, MD 20910
301-589-2303, x108

PRINCE GEORGE'S COUNTY

On Our Own of Prince George's County, Inc.
5109 Baltimore Ave
Hyattsville, MD 20781
240-553-7308

ST. MARY'S COUNTY

On Our Own of St. Mary's County, Inc.
41665 Fenwick St #13
P.O. Box 1245
Leonardtown, MD 20650
301-997-1066
oooinsmc@verizon.net

WASHINGTON COUNTY

Office of Consumer Advocates, Inc. (OCA, Inc.)
121 E Antietam St
Hagerstown, MD 21740
301-790-5054
ocamd.org

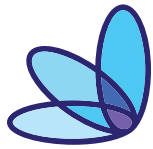
Soul Haven (OCA, Inc.)
119 E Antietam St
Hagerstown, MD 21740
301-733-6676
ocamd.org

ABOUT OUR NETWORK

Unless noted, listed organizations are affiliates of On Our Own of Maryland, Inc. Affiliates are independent peer-run nonprofits.

* Not an affiliate

‡ LGBTQ-operated, with LGBTQ focus



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**ON OUR OWN
OF MARYLAND**

On Our Own of Maryland, Inc. (OOOMD) is a statewide peer-operated behavioral health advocacy and education organization, which promotes equality, justice, autonomy, and choice about life decisions for individuals with mental health and substance use needs.

onourownmd.org

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