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LD 1425

Senator Ingerson, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services. My name is Monica Linder, and I live in Augusta, Maine. I am writing in strong support of LD 1425, An Act to Improve Access to Sustainable and Low-barrier Trauma Recovery Services.

I'm a social worker, and I come from a background of child welfare and community mental health. When 10/25 happened, I was personally shaken and knew something in my life was going to change. A few weeks later I was contacted by a consultant who was working on the project. She asked if I would consider doing some work with the Center on a part-time basis, and it quickly went from that to a full-time job offer from the director, which I accepted. So I joined the staff team at the Maine Resiliency Center as an advocate in January of 2024.

From day one, our director has pressed the point that our roles as staff are "line one: other duties as assigned." Meaning, our first priority is connection and everything else comes after.

Last summer, the Maine Resiliency Center hosted an event at Ricker Hill. A perfect example of a time when "line one" of our duties will come into play. Folks were mingling and activities were kicking off when a child, a guest of the center came running up to me, grabbed my hand, and said, "Come on, Monica, let's go!" We headed off to check out everything that an orchard in Maine has to offer. One of the points of interest was a slide in the form of a culvert tube stacked up against a massive pile of sand. This child assured me she was interested in trying this, but she needed to see me try it first. So of course, I crouched down on the ground to wiggle in and slide to the bottom, to find out that not only was I trapped by sand, but I would have to dig my way out because of the slant. I passed her stuffies that she had handed to me to carry out to her and got to work. When I finally made my way out, she was standing there, and she was beaming. The sparkle in her eyes and utter delight on her face were enough to tell me that this meant so much to her, even more than that I was willing to make a fool of myself for her. What she saw was that I would go there with her. Wherever she needed me to be, I would go there with her. I would get down on her level, and I would meet her where she was at. And she knew this, and this is why she did what she did.

Going there and being there showing up has meant something so different in this role than any I've ever had. It's walking with a guest who can't stomach a support group. It's listening to someone who doesn't speak. It's honoring someone who chooses not to share. It's not just attending to the loudest and most demanding needs, but often it's setting my ear to the ground for the ocean waves at a distance and tending to those needs, too. It's getting down on the ground with a six-year-old who has experienced horrific trauma to show her that I am here, and I am listening. It is heartbreaking work, and it is necessary.

Beyond therapy, beyond behavioral health, beyond victim services, the Maine Resiliency Center has been built on the concept of low-barrier. We meet people where they are at, and we show up. In whatever way is needed in that moment with the individual or group that's sitting in front of us. "Other duties as assigned" is a commitment to connection and to meeting people where they are at. If we don't have the resource, we become it.

It's not all rainbows and butterflies. If it were, maybe we would have already worked our way out of jobs by now. Maybe we would have waved a magic wand, and people wouldn't still have nightmares from time to time, or come in during open hours, because they were triggered by something and just need someone to talk to. The fact is, this need still exists. Not only does it exist, but it grows. Every time another incident happens in the community. There are more asks, not just from other community members or from guests for the center for themselves, but for the growing needs. The Center bridges an important gap in the community by bypassing waitlists and access issues that arise in traditional behavioral health models.

Victims of crime are underserved and frequently overlooked. So I strongly urge you to join me and support LD 1425. Thank you so much for your time and consideration. Please feel free to contact me with any questions you have.

Best,

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