

May 7, 2025

Testimony in Support of LD 1425:
An Act to Improve Access to Sustainable and Low-Barrier Trauma Recovery Services

Senator Ingwersen, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services: My name is Danielle Parent. I'm a resident of Sabattus and serve as the Director of the Maine Resiliency Center. Thank you for the opportunity to speak today in support of LD 1425.

Most thought the events of October 25, 2023 couldn't happen here. But in less than 12 minutes, 18 individuals were killed, 13 others riddled with bullets, and more than 100 children, teens, and adults bore witness to a massacre. The trauma didn't end that night. It spread outward - to families, friends, coworkers, first responders, and entire communities.

In the 18 months since, the Maine Resiliency Center has supported more than 600 people from over 60 communities. We've met each person where they are - in pain, in confusion, in silence, in anger, and in grief. We've provided over 2,200 instances of individual support and advocacy and hosted more than 200 support groups. We've stood alongside people as they went back to the scene for the first time...and for the fifth. We've held people as they grieved the death of loved ones and the lives they once knew. We've held space for first responders confronting trauma openly for the first time, and for providers and community leaders navigating their own grief while trying to help others.

What we've built is more than a center - it's a trauma-informed community hub for connection. LD 1425 wouldn't just sustain what we've built, it would expand it. It would allow us to take what we've learned and built to bring trauma-informed services to more Maine communities. Violent crimes and sudden traumatic deaths—all leave deep and lasting wounds. The Maine Resiliency Center can be a statewide resource to help people and communities recover from those traumas.

When we answered the call to take on this work, we did so without a roadmap and without assured funding in hand. We weren't ready—but we showed up anyway. We continue to see new people seeking services each month and still sit with people in their grief, their fear, and their resilience.

Maine now knows the worst can happen here because it did. We've built a strong foundation in response - one that has been designed with care, guided by national best practices, shaped by lived experience, and capable of meeting the evolving needs of communities. Maine cannot afford to lose it. This bill ensures that healing continues—for those impacted by 10/25 and anyone in Maine who experiences profound trauma.

Since opening—and when this bill was drafted—we've operated on limited cash advances with the assurance we would have federal funds by now. Thanks to advances from the Maine Attorney General's Office and the City of Lewiston, and private donations, we've stayed afloat. But those funds are nearly exhausted. With the federal grant still uncertain, state funding becomes critical to avoid the imminent loss of these essential services. Thank you for your time and your commitment to helping Maine heal.

Danielle Parent LD, LCSW
Director – Maine Resiliency Center

The Maine Resiliency Center A Community Resilience Center

Serving those impacted by the immediate and cumulative effects of trauma through connection, information, and support.

About the MRC:

The Maine Resiliency Center (MRC) was established in the wake of Maine's deadliest mass violence event that occurred in Lewiston on October 25, 2023. This event is the 10th deadliest mass shooting in US history. The MRC serves October 25th victims and survivors, witnesses, first responders, and professionals supporting those impacted. It also serves the family, friends, and loved ones of those impacted, as well as members of the broader community affected by the mass shooting.

Since the MRC opened on November 13, 2023, it has served more than 500 people and continues to serve new individuals seeking support over a year later.

Current Funding:

The MRC is a program of Community Concepts, Inc., a nonprofit agency that provides resources and services for children, families, and businesses in Androscoggin, Franklin, and Oxford Counties. The MRC is primarily funded through a federal grant from the Antiterrorism and Emergency Assistance Program through the US Department of Justice Office of Victims of Crime. This grant supports the core staffing and operations of a community resiliency center for up to 27 months following a mass shooting. The MRC's federal funding will last through January 2026. Current federal funding is limited to individuals impacted by the October 25th mass shooting. To date, private philanthropy has allowed the MRC to provide support beyond federal funding limitations. However, reliance solely on private philanthropy is insufficient to sustain the current and future needs of those served by the MRC.

MRC Services:

- **Support:** One-to-one, family, and group services designed to provide people with the support they need to process trauma and grief. Services also include screening for mental and physical health impacts and assistance navigating and accessing available community services.
- **Information:** Training for impacted people, providers, peer support leaders, and first responders to build a deeper understanding of the impacts of trauma, ensure awareness of community resources, and develop skills for managing the effects of direct and vicarious trauma. The MRC also serves as an information hub for community resources.
- **Connection:** Facilitated opportunities for people to connect with others with shared experiences, which creates networks of support and lessens the economic and social impacts of trauma.

MRC's Future

Overview:

Every day, Maine people's lives are forever altered by significant traumatic events. While some victim advocacy services are available for certain victims of crime, many people affected by significant trauma do not have dedicated services available to them.

Vehicle crash data,¹ suicide rates,² and reported crime numbers³ only begin to scratch the surface of traumatic experiences and their impacts on our communities. Each number represents many people: those experiencing the event, their loved ones, people they work with, witnesses, first responders, and entire communities. The ripples are vast. Unaddressed trauma has costly impacts on the health, productivity, and resiliency of communities. Those impacts range from subtle to dangerous and destructive.⁴ The economic impact of trauma in the United States is astronomical: in 2018, the economic burden of post-traumatic stress disorder alone was estimated at \$232.2 billion, \$189.5 billion (81.6%) of which was due to civilian (non-military) PTSD.⁵

People who experience trauma need support, information, and connection with as few barriers as possible. There is no playbook for healing from trauma and traumatic grief, which is often lonely and isolating. The social connections people experience with services like those provided at the MRC are critical to building resilience and lessening the impacts of trauma in our community.

Many Maine people face significant trauma without the benefit of a resiliency center. Based on their unique experience serving people impacted by October 25th, the MRC seeks to expand its model to provide and facilitate services for people across Maine. This new model will build sustainable systems for trauma support that go beyond immediate, costly interventions, fostering resilience and long-term community healing.

MRC's Expanded Service Model

The MRC's expanded service model would serve a range of Maine people, including:

- Those noted above impacted by October 25.
- People who have been directly traumatized by an event, crime, or sudden death of a loved one. *Examples include people who have been assaulted/robbed and their assailants are unknown/don't face prosecution and those who face the sudden death of a family member.*
- Witnesses of traumatic events. *Examples include people who witness a horrific car crash, see someone assaulted, and those who live in a neighborhood where gunshots are regularly fired.*
- Family, friends, and loved ones of victims of trauma, including those who lost loved ones or whose loved ones witnessed significant trauma. *Examples include the spouse of someone who experienced*

¹ mdotapps.maine.gov/MaineCrashPublic/PublicQueryStats

² [Data and Statistics | MeCDC | Maine DHHS](#)

³ [2023 Crime In Maine Final 2.pdf](#)

⁴ Center for Substance Abuse Treatment (US). Trauma-Informed Care in Behavioral Health Services. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2014. (Treatment Improvement Protocol (TIP) Series, No. 57.) Chapter 3, Understanding the Impact of Trauma. Retrieved: ncbi.nlm.nih.gov/books/NBK207191/

⁵ Davis LL, Schein J, Cloutier M, et al. The economic burden of post-traumatic stress disorder in the United States from a societal perspective. *J Clin Psychiatry*. 2022;83(3):21m14116. doi.org/10.4088/JCP.21m14116

an active shooter situation, children whose teacher was killed in a murder/suicide, and the brother of a person who died by suicide.

- First responders and professionals who witness trauma directly or experience vicarious trauma through their work. *Examples include emergency medical personnel, law enforcement, dispatch, clinicians, advocates, and interpreters.*
- Communities who may experience mass violence in the future.

MRC's Low Barrier Support Model

The MRC's current model was created to ensure access to support for people by reducing barriers to seeking help and connection. Its approach allows for many people to be served with a small team of staff, volunteers, and a network of contracted providers.

The MRC's expanded model will include a continuation of their well-established services in Lewiston. They will leverage a network of contracted providers and dedicated volunteers, as well as collaborations with existing organizations throughout the state, to deliver trauma-informed support directly to individuals in need across Maine. This approach eliminates the need for traditional brick and mortar satellite offices, ensuring scarce resources are focused on delivering services efficiently and where they are most needed.

The MRC's model lends itself to expanding services ***without the substantial costs of setting up brick and mortar satellite locations:***

- **Low Barrier:** Accessibility without the requirement of formal diagnosis or intensive intake.
- **Peer Support Based:** Emphasizes and builds skills to ensure trauma-informed peer-to-peer support networks among victims and survivors, victims'/survivors' loved ones, first responders, and allied providers.
- **Community-Focused Connection:** Providing meaningful opportunities for community connection, engagement, and education through recreation, art, and group activities.
- **Sustainable:** Developing and training robust volunteer networks and providing professional development for service providers to increase and enhance the care of those impacted by trauma.
- **Supplemental (Not Duplicative) Support:** MRC staff and contracted providers provide direct support for people, as appropriate, and connect people to existing community resources. MRC provides therapeutic "bridge services," where people can access a licensed therapist while they're waiting through traditional behavioral health intake and therapy waitlists.

How is this model different from other services?

- **Traditional behavioral health treatment services require diagnoses and a formal intake process.** People are often met with extensive waitlists and insurance requirements – none of which are required by the MRC model. If people seeking help through the MRC need those traditional services, the MRC provides interim clinical services while assisting individuals in identifying and engaging with providers, including assistance with navigating insurance and other associated requirements.
- **The services the MRC provides can help to prevent the need for more costly treatment.** Trauma impacts everyone differently, and not all people who experience trauma will meet the criteria of a mental health disorder that requires traditional therapy or treatment. However, they still benefit from support, which may reduce the need for other behavioral health interventions later in life.
- Many people, including some first responders, distrust existing options like Employee Assistance Programs or traditional therapy. The MRC serves as a low-barrier alternative.
- Existing services are limited in scope and eligibility related to the populations MRC seeks to serve.

Fiscal Note

The MRC seeks \$1,093,795* in funding for FY26 and \$2,270,199 in FY27 to support the continuation and expansion of services for Mainers impacted by the immediate and cumulative effects of trauma through connection, information, and support.

**Note: The MRC anticipates federal funding through January 2026, resulting in a reduced request for FY26.*