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A CURATED LIST OF STATEWIDE HAPPENINGS WORTH YOUR ATTENTION.

EXTROVERTED

There'll be Lobster Boat Races in three different places at the end of June: Boothbay Harbor June 18, Rockland June 19, and Bass Harbor June 26.



The first-ever **Resurgam** Music and Arts Festival takes place at Thompson's Point on June 12, and will, like its predecessor, the Old Port Festival, feature live

music and a puppet parade.

June 11 is the first Kennebec High Water of the season. Dam operators at Brookfield Renewable Power test turbines by releasing the maximum water possible, nearly doubling the river's normal volume.



Flies 5k race at the Pour Farm in Union on May 28 ends with a free pint of beer and a live reggae dance party.

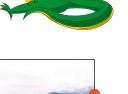
SEDENTARY

Covid-safe play group (and parent support group) in Bangor at Eastern Park, every Thursday 4-5:30.





Dragons Love Tacos: a live version of this silly children's book claims it will "make you laugh until spicy salsa comes out of your nose." Through May 15 at the Children's Museum & Theatre of Maine



Jazz in June: The Brubeck Brothers play the Camden

Opera House

on June 17.

The Sound of Music.

Everyone's favorite musical plays through June 25 at the Maine State Music Theatre.

Passamaquoddy Bay Symphony Orchestra's

spring program presented June 3-5 in Eastport, Machias, and Calais.



INTROVERTED

MAINE WOMEN MAY 2022 1

ACTIVE

welcome to the new maine women

i and welcome to the new Maine Women magazine. Each month we will strive to bring you content that will enrich your daily lives, brought to you by your fellow Mainers. We will deliver information on poetry, art, music, movement, reflection, as well as legal, financial, career, and mental health advice. This is just a start, and we would love for you to be a part of it. Please contact us at agoslin@mainewomenmagazine.com with your thoughts and ideas. We also welcome submissions of poetry, fiction, artwork, and photography at the same address.

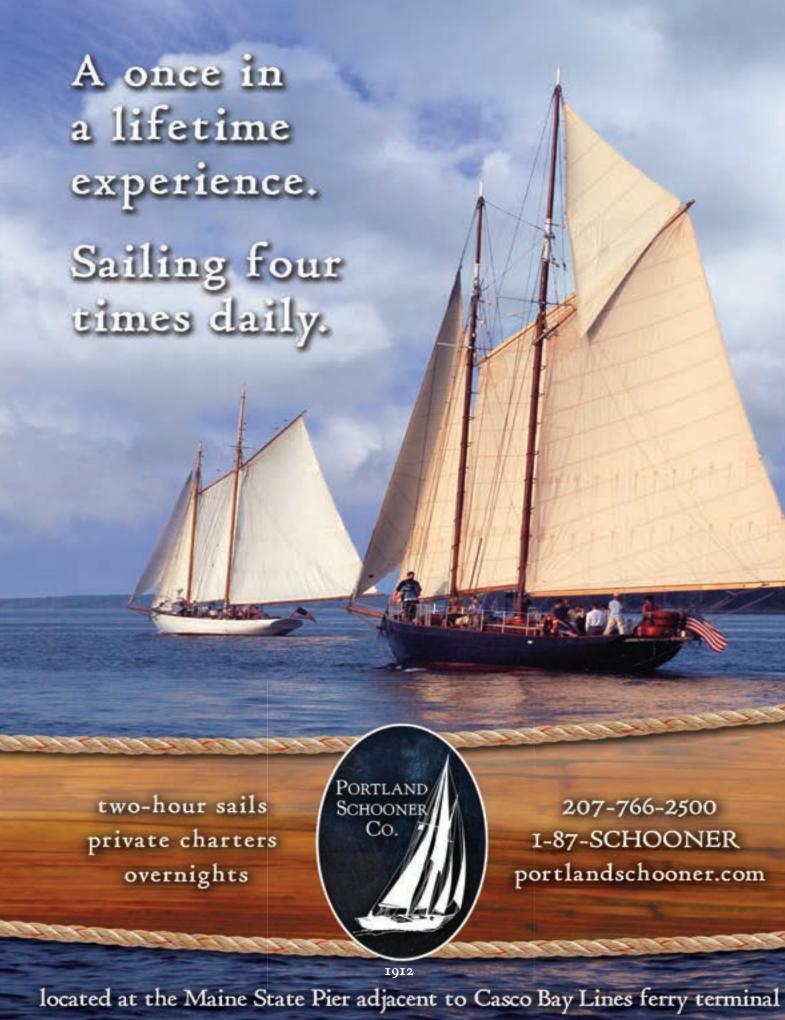
our mission

MAINE WOMEN SUPPORTS THE WOMEN OF
MAINE IN TANGIBLE WAYS THAT GO BEYOND
JUST INFORMATION AND ENTERTAINMENT. WITH A
SOLUTIONS JOURNALISM FOCUS ON THE ISSUES
THAT MATTER MOST, THIS PUBLICATION IS SIMPLY A
REFLECTION OF WHAT IS TRULY A COMMUNITY THAT
CONNECTS AND EMPOWERS WOMEN - AND PUSHES
THE SYSTEMS THAT SUPPORT THEM TO BE BETTER.

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If I had a million dollars

Acknowledgments

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your thoughts

ARE YOU INTERESTED IN SUBMITTING WORK TO THE NEW MAINE WOMEN? **HERE'S HOW!**

we welcome submissions of

YOUR ORIGINAL POETRY, VISUAL ART, OR FICTION (SEE PAGE 8 IN THIS ISSUE)

YOUR "BIG DREAM"

(500ISH WORDS ON THE THING YOU WOULD LOVE TO ACCOMPLISH IF NOTHING STOOD IN YOUR WAY)

A MAINE WOMAN WHOM YOU FEEL DESERVES AN "ODE" TO HER WORK AND DEDICATION

ISSUES YOU'D LIKE OUR
PRACTICAL LIFE COLUMNISTS TO TACKLE

(SEE PAGE 37-40 IN THIS ISSUE)

Email Submissions & Comments to agoslin@mainewomenmagazine.com

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To a Mainer Living 100 Years from Now

......

BY JULIA BOUWSMA

The other day I stood beneath an ash tree as old as the time between my writing this letter and you reading it.

Inside the green moment of the forest, I traced my finger across the ash's trunk, grooved bark staggered like vertebrae,

a deer bent back to listen, quiet flanks reddening the stillness before crouch became bolt and it leapt back into a lattice

of blackberry cane and brush. Tell me, unknown friend, what has dissipated from our home and what remains?

Does it still snow hard enough to swallow your footsteps in light? Do you drink sap each spring, boil your sorrow into new waft and gold?

We lived here at the edge of the old rituals, lived there until we could not discern our hope from our fear—

wildfire smoke smeared a long low bruise, a language written in billowing keloids and contrails, vanishing welts of vapor.

Are you still repeating our same old violences or have you learned new ones? Can you wring a chicken's neck with your hands—twist

and pull the throat in unison as my grandmother's grandmother did and I do now? Or have you colonized Mars, erected skyscrapers

of cosmic concrete? Scientists are at it now, discovering a building material of human tears, sweat, urine, blood. It hardens fast and cheap, stronger

they say, than anything we've ever known before. For you I wish nothing but birdsong. I wish you a pond of peepers screaming spring thaw.

And all those apple trees I planted—it's early autumn now, their striated skins spreading blush into white flesh as they ripen—

do they still stand on this hill? Pick one for me, please, if they do. Bite down among stippled wormholes and taste our blinding sweetness.

> JULIA BOUWSMA IS MAINE'S POET LAUREATE. SHE WROTE "TO A MAINER LIVING 100 YEARS FROM NOW" FOR THE MAINE ARTS COMMISSION'S BICENTENNIAL TIME CAPSULE.



THOMASTON PAINTER GRETA VAN CAMPEN HAS TWO DAUGHTERS: NOA (3) AND NELLIE (1 IN SEPTEMBER); AND ONE DOG: MILLIE (10). IN JUNE, SHE HAS A SHOW AT DOWLING WALSH GALLERY IN ROCKLAND. IT'S HER FIRST SINCE BECOMING A MOTHER OF TWO. SHE WROTE THIS ON INSTAGRAM IN EARLY APRIL:

Last week, after a lot of toddler whining and baby crying, I just had to get out of the house. I put both kids and the dog into my car, grabbed diapers and extra clothes and a sketchbook(!) and started driving north. When we hit Lincolnville I decided to try to get the ferry to Islesboro. Noa was excited to ride on the "fairy's boat". I parked the car, got the

stroller out of the trunk, took the kids out of their car seats, and walked over to buy tickets but the nice woman told me that the regular ferry was in Rockland being inspected and they were only running the very small boat. So I put everyone back in the car and we went to get lunch at Dots (everyone out, everyone back in again), then drove back over to eat at Lincolnville beach. Noa and I sat on a bench and I put Nellie in the stroller while I shoved some food in my face and tried to get Noa to eat more than just the chips and bread. Then I nursed Nellie and let Millie out for a quick poop. I took the kids down to the beach. Noa

happily filled a bucket with sand and water while I held Nellie and let her feel the sand on her feet for the first time. On the drive home I looked over at the fleeting ocean view from Rt 1. There wasn't anywhere good to pull over for a photo so I tried to take a snapshot in my head. This painting is the result of that. Completing a painting these days sometimes seems like a monumental achievement, because there is so much more effort behind every single part of it, from obtaining the image to prepping a panel to every color and brush stroke it's made of and all the chaos and interruptions happening in between. Gone are the days when I could hop in my car alone and drive wherever I wanted to go, take as many pictures as I wanted and sit by the water for as long as I wanted, then return

to a quiet studio where I could focus on painting without anyone bothering me. I'm not complaining - I just wanted to share my current daily experience and acknowledge all the moms and dads and caregivers who somehow manage to get everything done.

ANYWAY, that's the backstory for this painting, which is one of many that will be in my show at Dowling Walsh Gallery this June.

- Greta Van Campen



"THE DAY WE TRIED TO GO TO ISLEBORO"
BY GRETA VAN CAMPEN

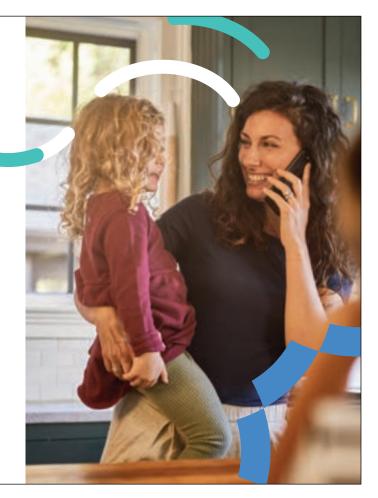
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MAINE WOMEN MAY 2022 11

PLAYLIST

THIS MONTH

ALL ROADS MUSIC FESTIVAL IN BELFAST IS BACK THIS YEAR ON MAY 20TH AND 21ST, BRINGING WITH IT SOME AWESOME WOMEN ARTISTS.

HERE'S A LIST OF SONGS BY THEM THAT WE JUST CAN'T STOP LISTENING TO.

1	WOLVES OF MY WANT BY LADY LAMB Makes us feel relaxed Pairs well with a glass of wine at the end of a long day	2	CONSTELLATIONS BY TIGER BOMB Makes us feel bubbly and badass Pairs well with cleaning the house	()	CARRY YOUR WEIGHT BY JUST MILK Makes us feel light and fluffy Pairs well with daydreaming on the front porch
4	AGE OF MAN BY SUNNY WAR Listen if you like funky coolness Pairs well with cooking dinner	5	GOOD AS GOLD BY SARAH SHOOK & THE DISARMERS Listen if you like twangy guitar Pairs well with driving in the rain	6	COLOURS BY LOVE BY NUMB3RS Listen if you like a strong female voice that you can feel in your soul Pairs well with a cup of afternoon coffee
7	PROBLEMS BY DRIVE BY TODD Listen if you like rocking out Pairs well with air guitar	8	HINDSIGHT BY CRYSTAL CANYON Makes us feel contemplative Pairs well with quiet inner reflection	9	SOLITAIRE BY ROSIE BORDEN Makes us feel quirky Pairs well with awkward conversations

BY ALISHA GOSLIN

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MAINE WOMEN MAGAZINE ALL ROADS PLAYLIST

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THIS KEEPS ME SANE

JENNIFER MILLIKEN OVERCAME SUBSTANCE ABUSE WITH YOGA AND FITNESS AND IS NOW HELPING OTHERS TO BE THEIR BEST SELVES

INTERVIEW BY ALISHA GOSLIN

How did you find this activity? About 10 years ago my sister bought me a yoga mat. For a few years it just sat around. Friends of mine raved about yoga and the Y offered so many different kinds so I would go to all the classes.

When did you first start? I began participating in yoga classes in 2015. After a couple of months, the instructor told me that I could be a great instructor. She said that if I took yoga training that she would put in a good word to get me a job. I was officially hired as a yoga instructor in December 2016.

What would you tell a beginner just starting out? I would tell a beginner to try out all the different classes you can find. Every instructor has their own style.

What is the single most important aspect of what you do that people don't seem to understand? People don't understand that I love my job. It's all I talk about. Being a fitness instructor isn't easy. When I am walking to work at 5:30am, I have the biggest smile on my face because I know I'm going to make a difference on how they move and feel that day. I'm very close with all my members. If someone misses a class, I'll shoot them a text or give them a call. If you want to be a part of my life, you will have to put up with me talking about the Y and the wonderful members.

How does this activity help keep you sane?

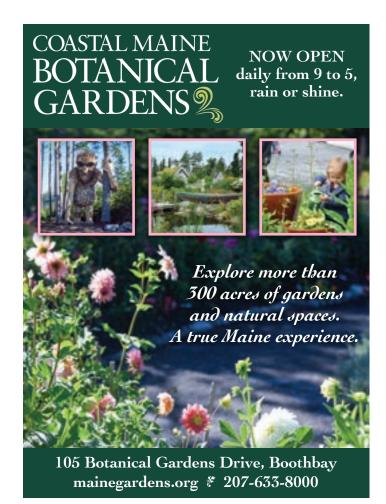
The flow of yoga really relaxes me. Yoga is a great outlet for me. I know that I'm doing something healthy and beneficial for my body and mind. It's rewarding to help others and see their improvements. Yoga and fitness keep me sane. I haven't needed anti-anxiety medication for 6 years.

Do you feel this was something your life needed? Yoga and fitness were needed in my life. I have struggled with being underweight or overweight my whole life due to autoimmune disorders related to my thyroid. I needed fitness so I could move better, feel better and think better.

How is your life different now that this is a part of it? I started a treatment program in 2015, and in order to start that program, I had to wean myself off Klonopin. In the past, this task was impossible. Every time I tried to quit benzodiazepines, I got sick and had seizures. Once I started yoga and fitness, I was able to wean myself off the benzos with absolutely no withdrawal. My life is different now because I have a schedule. Quitting drugs for me would have been impossible if I hadn't found something to do in my spare time. And working out gives me a high just as good as the drugs did.

JENNIFER MILLIKEN TEACHES YOGA,
WEIGHTLIFTING, CARDIO STEP, PILATES, WATER
FITNESS, AND A CORE CLASS AT THE BANGOR YMCA.
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Sikwani Dana

AN OFF-GRID INFLUENCER'S FAVORITE THINGS BY JESSE ELLISON

Sikwani Dana is a high school science teacher, a homesteader, and a TikTok influencer. She and her husband, Nathan, have been sharing videos about everything from compost toilets to moose canning as @thedanahomestead since 2020, when, on a whim, they recorded themselves goofing off on the frozen pond of their 8-acre off-grid homestead in Solon. Now they've got more than 80,000 followers, and some of their videos have been viewed hundreds of thousands of times.

We asked Dana, 28, if she'd tell us a little about her favorite things. "I could literally talk forever," she said. "I have a hard time letting things go. To be honest, I still have all my old Barbies." Herewith, Sikwani Dana's stuff (and no, the Barbies didn't make the final cut):

Woodstove Our wood s is awesome

Our wood stove-a giant Amish-built cookstoveis awesome. We use it almost every day, unless it's the middle of summer. In the winter, we cook on it and get our hot water from it.

My Medicine Basket

It's a birch bark basket that Nathan made many years ago. It has hawk feathers and eagle feathers, sweetgrass that my great grandmother Beatrice braided, a little baggy that held the ashes of someone very meaningful to us, and dried rose petals from a bouquet that Nathan gave me after my first marathon.

2

Garden

That is my happy place. Especially in the beginning of the pandemic, when I started experiencing a lot more anxiety. I'd run out there after remote teaching, and it just made me so happy to have my hands in the soil. It didn't matter what I was doingplanting, harvesting, weeding-it just helped. Also, I get delicious food out of it.

My First Gay Pride Pin

I have this tiny little gay pride flag pin that I got back in middle school and managed not to lose. I grew up with a gay aunt and an accepting family, but growing up in rural Maine, I didn't know anyone else who was out. Now, as a teacher, kids don't come out anymore-it's just part of who they are, and Llove that



A Cardboard 'Dessert Crown'

Last fall we spent Thanksgiving with our best friends and their family. They call it 'Harvest Feast,' and every year after the meal, anyone who wants to participate competes for who can eat the most desserts. I won. I at eight pieces of pie. I don't know how I'll be able to top it.



Rocks

I love rocks. Whenever I go anywhere, I get gifted rocks. I have two that go in my bag that I take everywhere. They're from the beach on Bailey Island and they're really nice to fidget with in your hands. They're like fidget toys, but they're rocks.

Ologies Merch

Ologies is a science podcast hosted by Ali Ward. Every episode she interviews some '-ologist' and they basically just talk about how much they love what they do. Every episode, you're like, 'Oh my god, I want to go study flatworms!' I have a coffee mug, a tote bag, a t-shirt, and a couple of tank tops with the Ologies logo.



Skyr

This is my favorite video game of all time. Basically, you wake up and you're a prisoner about to be executed, then a dragon appears, then you have to save the world. It's a high fantasy video game and I love it. Anytime I need to get out some aggression or just feel magical I go play that game.

Dice and Dice Bag

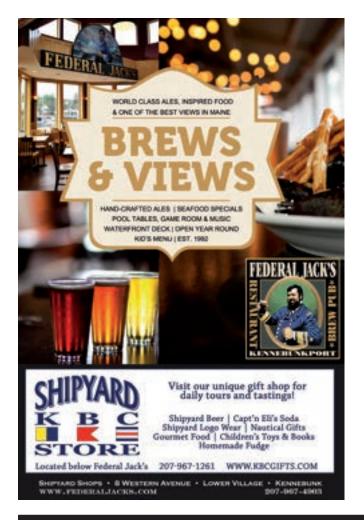
Because I'm a huge nerd, I play the game Dungeons and Dragons, and over the years you tend to collect dice. My friend Jesse, actually the guy who was part of our inspiration for living this type of life-gave me all his dice and his dice bag. It's this tiny little crocheted pouch that's the perfect size.



10

Refrigerate

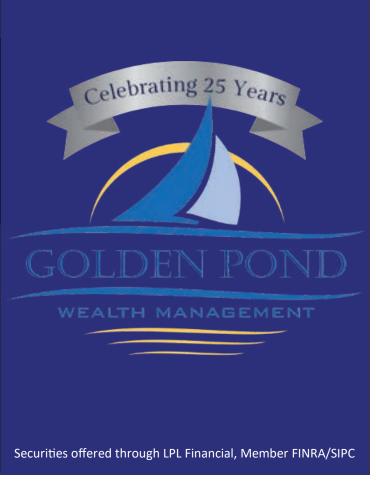
It's a small chest refrigerator and it keeps my food cold. But I love covering it in stickers, just like I cover my backpack. I do that because I want people to know that they're safe with me.







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Invest in What Matters to You

By Katie Brann, CFP®

We recently were hired as investment adviser by a couple with passionate ideas about what they wanted their money to do for their family and the world around them. They want to travel more often and give to their community. They have concerns about climate change and equal rights for women in the workplace. They'd like to invest in companies that operate sustainably.

While you may be picturing some newly married Millennials, this couple is of the Baby Boomer generation and have been investing in a traditional way for 50 years. With more time in retirement to ponder their life goals and build their bucket lists, investing in a way which reflects their values is important to them. Today, this type of investing is known as Environmental, Social and Governance investing, or "ESG," and it's exploded in popularity among investors of all ages.



Katie Brann

GOLDEN POND

If you were early on the ESG scene, you may recall that it was once called "Socially Responsible Investing" (SRI). It emerged in the 1960s as the practice of excluding certain products and industries from portfolios; think tobacco, gambling, and weapons stocks. SRI investors used negative screens to prevent investing in companies that conflicted with their values.

ESG Continues to Grow

- An estimated \$20.6 billion flowed into ESG investments in 2019 – four times the amount from 2018 (Momingstar)
- Nearly half of Gen Xers and Baby Boomers are interested in ESG investing (Allianz)
- The world's largest money manager, BlackRock, recently announced it will incorporate sustainable investment principles firmwide.

Fast forward to 2006, when the United Nations released the Principles for Responsible Investment. The overarching theme was that environmental, social, and corporate governance factors should be considered when evaluating investments. The mentality in the financial industry shifted from excluding bad actors to including companies that do good.

Although past performance does not guarantee future results, a growing body of research suggests that ESG portfolios can perform as well as, if not better than their traditional counterparts. Companies that focus on ESG factors tend to have leaders that think creatively and plan for the long term. Organizations that treat employees well are likely to attract and retain talent. And consumers are more likely than ever before to reward a company that focuses on more than its bottom line.

Embracing ESG investing doesn't mean you'll be stuck investing in just technology start-ups and solar energy. In fact, it's now possible to build a complete, diversified ESG portfolio of small and large companies, stocks and bonds, active and passive investments.



ESG does have a reputation for being expensive. Evaluating a company's ESG metrics will always be an added cost on top of evaluating its financial statements. That said, more companies than ever are offering ESG investments, and the competition among them has driven costs down in recent years

New ESG investments come out every month, and not all are created equal. Investors should work with their financial advisor to ensure that funds with "social" or "impact" in their name really are screening for ESG factors. Be aware that ESG criteria can also be subjective and hard to measure

As an investor you should regularly ask yourself, what's important about my money? If aligning your portfolio with your values is a priority, ESG investing can be an opportunity to do just that.

EXAMPLE: Does McDonald's belong in an ESG portfolio?

One advisor says NO...

- Unhealthy products
- Non-recyclable packaging
- Greenhouse gas emissions caused by animal agriculture & large supply chain

While another says YES ...

- Committed to sourcing food sustainably
- Robust employee education & management training programs
- Supports families fighting illness through the Ronald McDonald House Charities

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lot of my early memories are of strangers touching my hair. I had tight, pretty curls that adult women were always praising, telling me how lucky I was and how jealous they were. I didn't really understand what they were talking about. It was just my regular hair; there was nothing awe-inspiring about it. Besides, I couldn't use a hairbrush or take morning showers and it was always growing out, not down.

I never hated my hair. I experimented with straightening it during the awkward middle school years, but I liked that my curls made me unique. Still, two decades is a long time to keep up with the maintenance my natural hair requires.

I could chalk up my decision to shave my head as an act of collegiate rebellion, or an early-quarantine impulse. I went to a salon to have it cut short, and when I asked the stylist to go even shorter she told me she wouldn't because I'd look like a boy. I went home and cut it with scissors. It was still a while later before I truly shaved it, on a hot summer day in my partner's bathroom.

When all the hair was finally gone, I felt new. I remember saying that it felt like medicine. And in the stillness of the early pandemic days, I had the time to think about why.

I graduated college in May 2020 and started my first real job as a reporter

two weeks later. I moved into a little apartment in Damariscotta while the world was still mostly shut down. I worked a lot, but being a writer is often a pretty solitary job and my only roommate was my cat, Atlas, so I spent a lot of time just sitting by the water and contemplating. I liked that my buzzcut made me look obviously queer for the first time. I liked that people were a little confused by my presentation. I really liked the little thrill that ran through me when someone called me "sir," in the brief moment before they corrected themselves. In my solitude, I started to experiment with a nonbinary identity, just inside my own head at first. It was terrifying, and exciting, and so incredibly freeing.

I work in an elementary school now, and a lot of kids aren't sure what to think of me. "Why are you bald?" they ask me, almost daily. I tell them I just like it better this way, and I typically get one of two responses: "I thought girls had long hair!" or "Cool, my dad/uncle/brother is bald." The former results in a quick explanation that people can wear their hair any way they want, regardless of gender.

I'm not ready to dive into the nuances of gender identity with six year olds. But I like to be a person they can look at and think "oh, maybe it doesn't matter whether you're a boy or a girl. Maybe I can be whatever I want to be."

HAILEY BRYANT IS A TEACHER AND WRITER LIVING IN PORTLAND. ME.



the MOTORINATION TO THE LOAD

Women make up more than 75 percent of those working in healthcare. A lot of those women are also mothers. We reached out to moms across the state — moms who also work in public and tribal health clinics, in hospital emergency rooms, and in training the next generation of nurses — and asked them what life was like on the double front lines of a global pandemic.

BY BY SARAH HOLMAN AND JESSE ELLISON



DORY FORGIT

Speech Pathologist at Maine Medical Center and mother of three.

I work at Maine Medical Center as a speech pathologist, working with medically complex and critically ill patients. And so that always involves the patient being unmasked. The very first patient in Maine with COVID was a patient that I had worked with, so I was immediately put into quarantine.

It was wild. That very first week of lockdown, I was actually home, which was so huge because it gave me a minute to kind of wrap my head around what we were going to do with the kids. They were 3, 7, and 9 at the time. My husband is a tugboat captain, so there was no option of anybody working at home, and we were both considered essential workers.

There's a reason I'm not a teacher; there's a reason my husband's not a teacher. And that became very apparent during that period. Normally we would send them to grandparents, but we couldn't do that, or even to neighbors. I'm literally working with COVID patients, so we were like the most dangerous family on the block. I think we went six months without us having a day off together. Somebody was always working.

We tried to find somebody who could babysit, and that was really challenging. We didn't have the financial resources for a full-time nanny, so we had to find somebody that would only need part-time work, but also wouldn't need to go work with another family, because that didn't feel safe. So we ended up hiring a dog walker. We have a dog now, but at the time we did not have a dog.

This woman was wonderful: resilient and very, very energetic, but she'd never worked with kids. My kids are.... Well, we are the family that you're like, 'Holy shit. Keep it together.' It's just like chaos. So she would come and she would bring the dogs she was dog-sitting, or she would take the dogs and my kids to the dog park. I mean, it was ridiculous. But that's the level.

There were just no childcare options. The daycare was closed, and my kids are too young to stay home. And this didn't even include the schoolwork. We would do the schoolwork at night and on the weekends or whenever, and then we just ended up abandoning it before the school year was over because it was just causing so much stress for the family. I was like, 'There's no learning; there's just fighting.'

We were happy that we both had jobs still, and it was nice to be able to leave the house and use my brain that way, to be able to step outside and problem-solve at work and have those cognitive challenges that kind of distract you, but everybody was terrified. I mean, it seems funny looking back on it now, but like we just didn't know anything. Everything felt dangerous. I didn't touch an elevator button without a glove on. We wiped down everything. We were much more afraid of the virus, because we didn't know. And then just the idea of working with COVID patients, plus the fact that all the patients I work with have to take their masks down... you just felt constantly exposed. I'd go home, strip down in the entryway and go take a shower and still be like, is this even alright? I felt like I could spread the disease at any time. It seems like a movie now; it's hard to even remember.

I'm a very optimistic person, and I am not a grudge holder, so I kind of look at it almost—this is going to sound weird—but with a little bit of nostalgia. It seemed so surreal at the time, like I think about that first week and just like walking around our neighborhood. We live right in Deering Center, Portland. It's a very busy, vibrant neighborhood. There was, like, nothing. Nobody out.

We were a very busy family— over-scheduled; everybody had things every day. I was involved in a lot of things. It all just stopped and it was really hard. But I think it was good for us to just step away from how life was. It gave us a chance to be like, well, what do we want life to be like? If we're restructuring, let's think more about it.

We've started doing a lot of afterschool activities again, but we're just being more mindful about our time. And I think we've learned to appreciate just downtime being at home, which we never really did before. So just even structuring that into our schedules and making sure we have days where there is nothing.

I think the kids definitely value school more now. Like, they truly appreciate being there and being with their friends. They appreciate those things that they probably took for granted before. But I think there's a lot of women out there who are just like, holy shit, what just happened?

HIBO OMER

Interim Executive Director of the New Mainers Public Health Initiative and mother of four.

I call myself an "Ethiosomaine," for Ethiopia, Somalia, Maine. I was born in Ethiopia, I'm culturally Somali, and I've lived most of my life in Maine. I'm the narrator here.

I have four kids: two in college, two in high school.

The older ones, right before COVID, we were going through getting them an apartment so they would start paying rent and learn some self-sufficiency. There are many good things about the "empty nest" so to speak, but where I'm from, unless people get married they don't leave home. I feel like that person will never learn reality and they will be dependent all the time. But because of COVID, the kids got stuck with me again. I kept them home. I would be worried otherwise. Child care is always a problem in Maine. For me, back when they were young, I was a busy mom going to school and going to work. You have to have backup. It is tough. It's a vicious cycle of discouragement. And it seems like systemically it was never built for moms. COVID, it just doubled the problem.

Throughout the pandemic, we never sat. There was not one day we took off. I was always working. We're an ethnic-based organization; we provide social services for people. If people got COVID, we would deliver food. We would call with emotional support. We were on the front lines, we didn't rest. The community knew us and trusted us. COVID, in the BIPOC community, it got so bad. Most of the contact tracers were contacting the kids rather than the parents. Parents would say no, don't go, so we had to intervene and take kids to shelters. The luxury of having a room where an infected person can go doesn't exist in our community. And people are also frontline workers. Those are the social determinants of health. In Maslow's hierarchy, we are at the bottom. We don't have the luxury of staying home. If you stay home, your check is smaller, and bills have to be paid. We don't have rainy day funds. You're a laborer: you work, you get paid.

It was a myth, also. People didn't believe that COVID was real until people started being affected by it and getting sick. Early on, we lost a couple of people. That's when it hit people: this is real.

All the agencies were meeting, brainstorming, seeing what the problem is, how that problem can be solved. The CDC would come to our Zooms. A group of ethnic-based organizations also came together so a task force was formed. Even for testing, people wouldn't want to test because they thought when you swabbed the nose, you were touching the brain. So no one was going to be tested.

The Lewiston-Auburn task force was maybe 14, 15 agencies. We'd divide up the work, and divide Lewiston on a map so we each concentrated on certain areas. We did that for six or seven months, just educating people, reaching out. We had to show people there is no brain touching. This is a nasal thing. We had to be an example. We put videos on WhatsApp.

We left voice messages. We showed people: it's not that scary.

For schools, we introduced a concept called virtual tutoring. The Lewiston school was giving out one laptop or ipad for each family. Most of our families, they have large numbers of kids. We had to look for donations, and help sign up kids.

We were building a plane as we were flying it. Things were changing so fast. Information was changing so fast. But where there is a will, there is a way.

It has changed for the better, actually. I've been with this organization since it started in 2014. I remember many years ago, someone in the office emailed the CDC. We finally met with the person exactly a year after we emailed. I was surprised. That was many moons ago. Now we have contracts with them, now we're working closely with them. We've come a long way.

If you have a new neighbor, it will take time for you to feel comfortable. Everything takes time. The positive part of COVID is the CDC and DHHS saw the problem first hand. That helped carry the resources to support the community, and created another layer of working relationship. Now there is an office of minority health.

The community didn't know the CDC before. I have a masters in public health. I dreamed big. People would say, what are you going to do with this degree? People now know the famous Dr. Shah. Even people who don't speak English would listen to Dr. Shah's reports. They would say, "I have to watch Dr. Shah." Did I just hear what I heard? I would, out of curiosity, say, 'what do you understand?' They would listen and were up to date with information.

We are people of hope. And it's changed for the better. The silver lining is that office of minority health re-opening. Prior to COVID, there was no sign of re-opening it. Now there is hope for it. They have a staff of one, but they're hiring. There is hope. Where there is a will, there is a way.

STEPH ARKELS

Registered Nurse in the Emergency Department at Maine Medical Center and mother of two.

I took a job in the ER at Maine Med both because I believed it was my calling and because I was following in my mother's footsteps. She worked in the same ER for the first thirteen years of my life. Little did I know that three years into my ER career, COVID was going to rock our world. I was actively trying to have another baby, and as it happened, I got

pregnant in April of 2020.

On March 13th, 2020, the staff literally transformed the "old ED" into the "Covid Castle." We had 16 private negative-pressure rooms exclusively for COVID positive and patients with any COVID-like symptoms. Each room was stripped bare to lessen the chance of disease transmission and allow for faster cleaning and turnover. We were all in PAPRs (think space suits) for four plus hours at a time and taking care of some extremely sick individuals. The suits alone were exhausting, uncomfortable, and hot! A four-hour shift in the PAPR suit felt like several hours at the gym.

There was a stress level in the "castle" that was unmatched. Incredibly sick patients, ineffective communication due to the PAPR suits (though we made it work), and unthinkable discomfort. Especially while pregnant. Thankfully, the staff in the ER at MMC is understanding and supportive, and the pregnant and otherwise immunocompromised staff were exempt from working in our quarantine area.

We've been screening patients for two years for symptoms that might vaguely seem like COVID, then triaging them accordingly. Unfortunately, family members are then sent home or to their cars to wait for an update. That sometimes seems like the hardest part: sending a family member away from their loved one who is sick or injured. It never gets easier and always feels awful. Even this far into a pandemic, there's still a misunderstanding about visitor policies and it's unbelievably uncomfortable to tell someone we're not allowing them to visit a patient because of COVID rules.

We were lucky. We were also extremely careful. My parents live in Yarmouth and are in their 70s; they were reluctant to visit and we were nervous to see them. My in-laws are from Illinois, and I was more than scared to have out-of-staters visit us, even to meet their new grandson.

Josh, my husband, is a carpenter and took a few months of unemployment but has since become a stay-at-home-dad for the boys while I continue to work full time. Looking back on the last two years... I actually wouldn't change a thing. We had a beautiful baby and my family has been forced to be together and learn each other's quirks. My husband has had more time than he imagined with the boys and although my work is still intense, I get relief because I don't have to be on mommy-duty the second I get home since Josh is around.

WE WERE LUCKY. WE WERE ALSO EXTREMELY CAREFUL.

KELLEY STROUT

Director of the School of Nursing at the University of Maine, mother of two.

I accepted a position as the interim director of the UMaine School of Nursing in September 2019. Our school was up for re-accreditation, which only happens every ten years, and the report was due in January 2020. I had been working around the clock before the pandemic hit to prepare for accreditation, and I had been telling myself "you can make it to spring break...you can make it to spring break." Then, spring break came, and we were dealing with a worldwide crisis.

We had to re-invent the way we did everything: classes, laboratory, clinical, safety, schedules, meetings, childcare, graduation ceremonies - everything.

Our kids were in kindergarten and second grade when their schools went remote. The remote schooling consisted of a daily email with no direct communication to the student from the teacher. Both kids needed a lot of support from my husband and me to work through the assigned classwork. We were taking turns "being teacher" and working. But, my job became so overwhelming that I was unable to help with the schooling. My husband ended up taking an FMLA to support our kids and eventually he ended up resigning from his job.

I think the greatest challenge at my job was that even though I was doing everything in my power to keep everyone safe AND progressing through their goals, someone was always dissatisfied. Some thought we didn't have enough in-person learning while others thought the in-person learning we had was putting their lives at risk. It was a really delicate

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balance and you always felt like you were not doing the right thing.

Children were very much forgotten in this pandemic, and our society will pay for at least a decade. Everything related to children was the last to come back. We opened salons before schools, restaurants before schools, everything before sports and clubs and after school activities. I worry about the mental health of children as a consequence of this pandemic

My family and I took up hiking with our good friends who we "podded" with throughout the pandemic. I explored the most beautiful parts of Maine and felt genuinely grateful to live here. That was an unexpected positive outcome of this experience.

I don't think I've quite come down off the adrenaline rush that I've been carrying for the past two years to truly reflect on all that has happened. Lately, I've found myself quite emotional when I talk about various activities related to the pandemic over the past 2 years. I think I've been operating in overdrive, and I will need to heal like everyone else, and it will take time.

SHAWNEE

Nurse at a tribal health clinic and mother of three, who asked we use only her first name.

My husband works for dispatch, so we were always needed. Unless we got diagnosed with covid, we were at home. Other than that we had to work all the time. Here on the reservation, they closed down. I've lived here on the reservation for 16 years now and it's the first time that ever happened.

At the beginning, I felt like it helped. It was kind of a pain, but it still helped. My family lives off the reservation and we weren't able to bring them over during holidays. If we wanted to see them we had to go there.

At the beginning we had a few positives and we wanted to see if it was going to spread. We did a lot of testing through the whole reservation. We had security to let people go through— people sitting at each entrance. We're a small community, so they knew if you lived here; if you didn't you weren't able to cross over. That lasted a few months then went away by Christmas. We were paying people to do it, and we ran out of funding.

We still have cases here and there but I feel like now we know what to do, we know what's to come, what to expect. If someone does pop positive, we know what to do. And we got nearly everyone here on the reservation vaccinated; people who are non-native who work here, too.

I knew I was going to catch it. The kids are always

up my butt; they always need something. There's only one bathroom. It was just a matter of time. We finally caught it at the beginning of the year. My husband caught it first, then my youngest, then my middle, then oldest, then me. I was out of work for like 3 weeks. We had someone pick us up food at the beginning, but I have big kids, and they can eat.

AMANDA HENDERSON

Learning Resource Center & Simulation Education Director at the University of Maine, Orono, and mother of three.

When the pandemic started, the campus shut down. Our responsibility of providing nursing education had to immediately go remote. That meant labs, clinicals, and classes. It basically meant faculty standing on our heads, trying to view things from a completely different angle. You can't just stop the semester, we still had 8 weeks to go. No one got a spring break. We were just problem solving as a faculty.

We had someone at the university doing record keeping and he wanted to interview faculty. It was the director of the school of nursing, me, and a few other professors. We all just broke down and cried during the interview. We were exhausted, not from being at patients' bedsides, but from trying to problem solve for our students. Students were asking us, 'Are we going to be okay?' We really didn't know the answer

Life is really getting back to normal. We started this academic year and the kids seem to be doing great. Their lives seem to be going back to normal. Removing masks was monumental. I was thinking the two year delay would be harder for little people, but I see it more in my older kids. I think my college-age kids are socially and academically delayed in ways I don't quite know how to quantify.

My daughter transferred to the University of Maine, so I had all three kids under my roof. It was chaotic because they had no structure. My highschool senior checked out. He'd gotten his credits to graduate and the world was upside down. What do you do, how do you enforce rules? How much do you discipline at a time when it just doesn't seem like the most important thing? I was more concerned about safety and that we were all going to be friends when this was done. As a parent, were they the best decisions? Who knows. But I have a good relationship with my kids two years later.

In the fall, the university thought they'd bring everyone back to campus. We didn't know how long the campus would be open. We thought we might get a few weeks, so we designed a lab immersion

program for students. It was a semester's worth of lab experience for nursing students condensed into three weeks. Twelve hours a day, five days a week. Our goal was to get those clinical skills checked off as competent and then they could go home if campus closed and commute to clinical if possible.

We had a covid outbreak in class, and some of my students were alone in the quarantine dorm for 10 days. I'd see them on Zoom and they just looked so sad. It was awful. My son had to do that for 17 days. Our family had over 50 days of quarantine in that first year. We were fortunate, but it was still so impactful. Everyone sacrificed something.

MEAGAN

Nurse in a clinic in Aroostook County, mother of three, she requested anonymity.

I had a baby that was only five months old when the world shut down. He was in day care. Then I had two older kids who were in school— kindergarten and second grade. My husband is in customer service for a power company- he got sent home for an undisclosed amount of time. We thought it was going to be two weeks, but as we know, that didn't happen.

I work at a very small, rural clinic in Northern Maine. We were going to stay open, but break up shifts, putting the minimal number of people in the office just to keep the building open.

We were doing multiple people's jobs but at least staying open. We were panicked, doing things in a panic, panicking at home. Looking back now, we had no reason to be worried. But at the time we were really worried about seeing anybody.

I have an elderly grandmother who would come down to my house often to see my kiddos. Their great grandmother. We were like 'you can't come here because it's not safe for you. If we see you it needs to be at a distance. We don't want to lose you.'

She basically was like, 'I don't want to live if I don't see my grandkids and great grandkids.'

It put us in such a hard position, because we were like, 'we don't want to be the reason that you die.'

We're a very close family—being separated from them felt very sad for us. It hit us really hard.

Ultimately, we made a pod. My grandmother lives alone, so she was in our pod. We all decided we would be very careful. We wouldn't allow our kids to go out in the community. We would keep our pod very close— have some family interactions but that was it. We had no friend interactions except through FaceTime.

My husband was home but he couldn't take care of a five month old and work—he's on the phone all day. But day care was allowing kids if their parents were front line workers. We were able to keep our family safe through limited contact.

Before the vaccines, I had to sit down with my kids and tell them that if they came down with COVID, we have such a limited staff, I would have had to leave them in order to keep being able to work.

We were probably about nine months into the pandemic, but they were returning to school. We knew at school they could potentially be exposed and we had no control over what they might be exposed to. They'd already been wearing masks for a long time, but we had to sit with them and talk about the importance of wearing their masks and wearing them correctly and if they got COVID what it would mean for our family: that I would have to be away for potentially ten days. I've never done that. I had a child who was one—thinking about what that would mean for him, it was just really emotional. I knew I had to be brave, because I knew if I lost it, they wouldn't get the information.

They'd been through so much already. I spent a half a day at work just crying, getting ready for the evening. We had the conversation and they were upset about it.

We were thankful that we didn't get COVID until we were all vaccinated. We were careful, we plugged along. We laugh about some things now, but that was the hardest. Having to have that conversation about being separated if it came down to it. It was just so hard.



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a conversation with JEANNE LAMBREW

et nobody say that Jeanne Lambrew isn't up for a challenge.

As President Barack Obama's deputy assistant for health policy, she played a largely invisible but absolutely essential role in the passage, implementation, and defense of his signature Affordable Care Act.

It was no small feat, but it was nothing compared to the challenge she would face back at home in Maine.

In 2019, incoming Governor Janet Mills tapped Lambrew to head up the state's biggest agency: the Department of Health and Human Services, which now employs some 3,400 people, 77 percent of them women, and which had, under the previous administration, been decimated.

The agency oversees virtually everything even remotely related to health and well-being in the state of Maine, and it had lost ten to fifteen percent of its overall workforce, including fully a quarter of the staff of the Maine CDC. Morale was nonexistent. And that was before a global pandemic.

We spoke to Lambrew about her highs and lows from the last two and a half years, what she's most proud of, and why she still isn't getting any sleep:

IT'S REMARKABLE TO THINK ABOUT THE FACT THAT YOU ONLY HAD A YEAR TO STAFF UP, AND WERE DOING THAT WORK WITH LITTLE EXPECTATION OF WHAT WAS COMING.

Well, the expectation is to be prepared. That's the truth about public health. The emergency response needs to be there when you need it, and you need to always be planning for it, even when there are no clouds on the horizon. My priority the first year was rebuilding the department. That meant an intense hiring effort. And I did a nationwide search for our Maine CDC director, knowing from my experience at the federal level that you need to have somebody prepared for the worst. I had been in the federal service during H1N1 and ebola and we knew that we needed somebody with experience, should we have

a crisis. I recruited Dr. Shah. We set about rebuilding the Maine CDC, and we were so grateful that we'd significantly begun that process when the pandemic hit. We started that work in 2019, which is a godsend to the state of Maine. I remember Dr. Shah coming back from a meeting in Washington, DC in December of 2019 saying, 'Now's the time.' He was worried; we needed to start preparing. So we started preparing well before a lot of other states and probably even the federal government for COVID-19.

SO WHAT DID THAT PREP LOOK LIKE?

Our response to COVID-19 was multilevel. It became clear that this was a significant pandemic, so we pulled in senior people from across the state to help us out. I pulled in an operations expert from one of our health systems to help with testing. We pulled a retired LL Bean procurement specialist to help us with PPE—personal protective equipment—procurement. We pulled a global expert in pandemic response who did our social services report. So we built a team around the Maine CDC to support them.

HOW'S THE MORALE AT DHHS?

So here's what I'll say about our workers. They come to these jobs with an interest in public service and when they feel demoralized by a lack of respect or lack of support, we try to address those challenges, and that's what we tried to do in our first year here. When the pandemic hit and we all had to take our work to a new level—doing it remotely in some cases, doing it after hours and weekends in other cases, doing it with PPE and other safeguards in different cases—they routinely rose to the challenge.

I think we feel the performance during the pandemic was emblematic of the Maine people's response. I mean, when I look back at what I'm proud of during this pandemic, not just our work, not just the leadership from the governor who basically created this North Star of 'how do we save lives?' but also close partnerships between our teams, the private hospitals, the nursing homes, home health agencies, volunteers, you name it, to try to make a difference in

people's lives. I feel as though—even though we're still in the grasp of the pandemic, it's down but not out—we feel as though we strengthened all those connections, both with our partners and the community throughout this process.

ANY OTHER PARTICULAR MOMENTS YOU'RE PROUD OF?

I remember going to the opening of the Scarborough Downs large scale vaccination clinic and seeing all the volunteers who were there to help, to say nothing of our own teams who would go into different homeless shelters or different parts of rural Maine to try and make sure that people got tested or vaccinated. There are so many moments of which I'm proud, including the Maine National Guard that came out this winter to really prevent our hospitals from being overwhelmed by COVID-19. There was also this very robust, Maine response volunteer group who contributed hundreds of thousands of dollars to help with our acquisition and testing and COVID response. There's no shortage of moments and examples of the efforts of the people of Maine of which we're proud.

And look, the results speak for themselves. We still remain third highest in the percentage of our residents who are fully vaccinated and are amongst the lowest states per capita for cases and deaths from COVID-19, which is spectacular because it is despite the fact that we're the oldest state in the nation and the disease hits older people more.

WHAT'S KEEPING YOU UP AT NIGHT THESE DAYS?

Oh, I don't sleep very much. In terms of COVID, we have to continue to worry about it. Our number one task is to learn from recent surges and be better prepared for the next. We also recognize that there's trauma associated with this pandemic that is now over two years old. So how do we address mental health anxiety, increased substance-use disorders, children struggling in school. How do we begin to begin to address those secondary effects of COVID-19 in an aggressive way?

We also have to keep our readiness up. There's a lot of COVID fatigue out there. People just want to say, stop talking about COVID. We don't need this anymore. We don't need to prepare for what's next, when part of the reason we were able to manage it in Maine is because we were prepared. So I think we need to continue to pay attention.

WHAT'S GIVING YOU HOPE?

I feel hopeful that because of good fiscal manage-

ment by the governor plus unprecedented resources from the federal government, we can not only emerge from this pandemic in a way that's healthy, but we can also address some long-term problems. For example, childcare. We have received over a hundred million dollars in federal funding for childcare in Maine, which to put that in perspective is multiple times the usual annual federal funding for childcare. So we've been able to use that already for stipends for our childcare workers. There's \$200 a month stipends that are out there currently for over 80% of our childcare providers. We also plan on announcing grants for brick and mortar construction of childcare centers because we know that there are too few of them. So we're excited about the prospect of being able to shore up our childcare system, which we know is essential to women being able to work, and for communities to thrive.

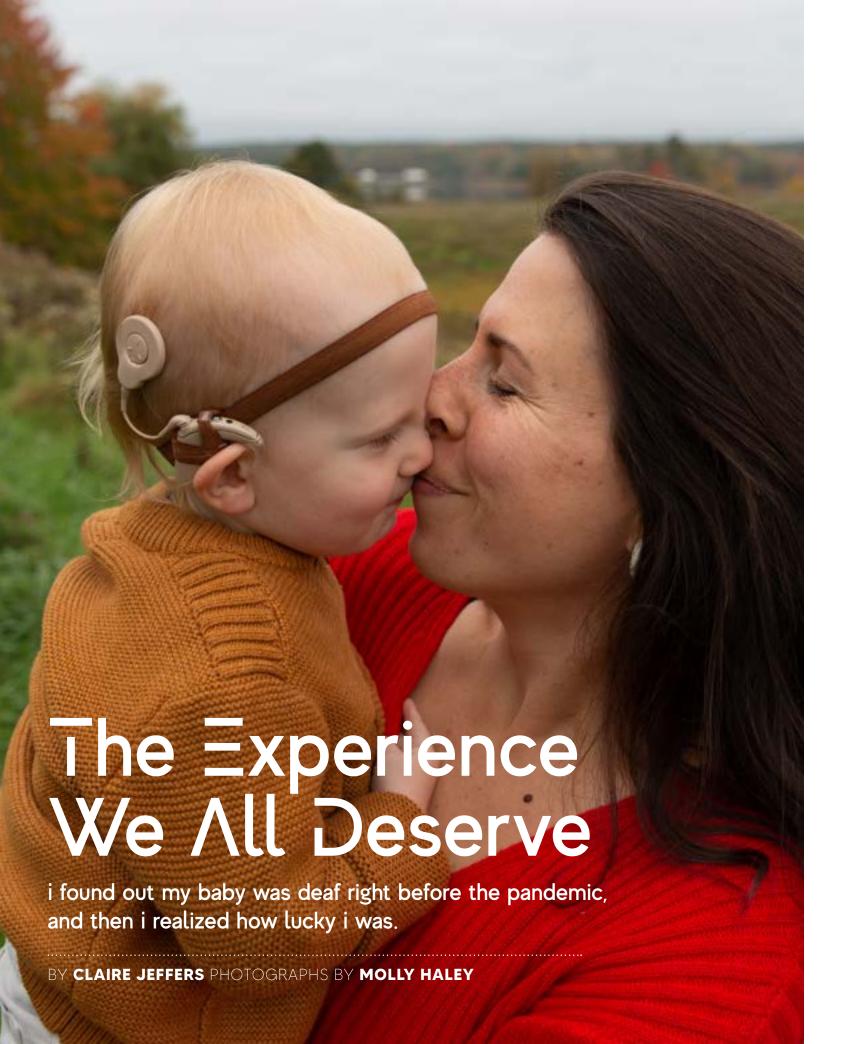
IT DOES SEEM THAT AMID ALL THE TRAUMA OF THE LAST COUPLE OF YEARS, THERE ARE SILVER LININGS HERE AND THERE.

I hope so. We are also hopeful that people will feel better about government after this pandemic. While there were a lot of challenges and there were shut downs and so on, I hope people look back and realize that people in state government were working around the clock, were there to help, and did make a difference. I'm hoping that the trust in state government did increase during the pandemic.

HAVE YOU BEEN ABLE TO TAKE A VACATION AT ALL?

I tried to take a vacation and it didn't go very well because there's no such thing as a vacation during COVID-19. I think we are trying to recognize the fact that our workers are our backbone and our heart, so we're trying to make sure that our workforce gets what they need to do their job. But I will flip it around and say that it's such a privilege to do this work on a day-to-day basis. Most of us find it gratifying work, sometimes even joyful work when you meet people you've helped.

I went down to Maine Medical Center last winter to meet with a team working on the COVID intensive care unit. Boy, those are hard jobs to do day in, day out. They're dealing with people who are severely ill, their family members who are struggling. To see their own dedication, their own passion, their own finding these moments of joy in their work, how these small acts of skill and kindness can make a difference... it isn't necessarily a vacation, but it's what keeps us going.



ilo's hand grasped my index finger as a woman tapped the bottom of his infant feet. Another waved a laser pointer on the ceiling, and I watched as Milo's eyes followed the red dot back and forth. "Good," she said, and checked a box on a form.

It was February 25th, 2020 and I was sitting on my living room floor, with my two-month-old son wiggling on his back. The house was full of strangers. They grinned at him, and he grinned back. I was new to all of this and felt totally exposed. The months had gone by in a flash. My body was still soft from pregnancy and sore from childbirth. I hadn't slept for more than two hours at a time for eight weeks. My eyes carried an entirely new heaviness.

One of the women pulled a large hand bell from her bag and the room went quiet. Ten days earlier, an Auditory Brainstem Response (ABR) test had told us our son was deaf. And now our house was full of people conducting laser and foot-tapping tests. Milo's initial ABR results were sent to our pediatrician, who then contacted Child Development Services (CDS), and within days, my husband and I were setting up in-home evaluations to officially confirm Milo's eligibility for state-funded services. The hand bell was irrelevant, we all knew, but it was a box the CDS team needed to check – you know, just in case the ABR test was wrong (it almost never is).

The woman with the bell clanged it loudly behind Milo's head. No response. His head didn't move and his eyes flitted back and forth to our faces as usual, not toward the sound of the bell. She did this a few times – piercingly loud at first, and then with a softer clang. "Nothing," she mouthed.

I kept my gaze on my son, still grappling with the reality that not only did I grow and give birth to a human with my own body, but that I was now a mother of a baby who is also deaf. He hadn't heard anything I had said to him so far – not the I love yous, or the silly nicknames we gave him, none of it. Our son was the first profoundly deaf person either my husband or I had ever met. As a hearing mother of a deaf child, I began my journey learning about Deaf culture, community, and communication knowing just four words in American Sign Language (ASL): "more," "finished," "light," and "beautiful."

As I sat on the floor, the wool carpet itching my thighs through my maternity leggings, contemplating how I would communicate and share a full language with my son, I felt utterly daunted. I didn't even know the sign for mother.

i kept my gaze on my son, still grappling with the reality that not only did i grow and give birth to a human with my own body, but that i was now a mother of a baby who is also deaf.

The first indication that our son was perfectly healthy was when he screamed as I pushed him (with the force of one thousand gladiators) out of my body. No one needed to tell me he was ok – I already knew. He was heavy, pink, and started nursing soon after we sang him a teary version of "For Baby, For Bobby" by John Denver.

Milo passed all but one of the hospital newborn screening tests with flying colors. The nurses assured us he didn't pass the hearing one, state-mandated since 1999, because he "probably just had fluid in his ears" from the 24-hour labor – a too-common, and often misleading tale among hearing parents with deaf children. I didn't think much of it. Fluid in his ears was the least of my worries. I was more concerned that he was getting enough breastmilk (he wasn't) and that he would have his first poop before we left the hospital (he did).

The thought of my son being deaf did not occur to me until seven weeks later, when the audiologist said the words out loud. By that time I felt I had mastered at least a few parenting milestones: newborn diaper changes; knowing when my baby needed to nurse and for how long; and I had even found the time to go on a walk by myself (around the block, that is). When, after three hours of testing, the audiologist told us that our baby is deaf, it felt like someone had placed me back at the base of a very tall mountain I had spent nearly two months already climbing. Exhausted, overwhelmed, and scared, I remember thinking: I can't do this. In shock, but still holding Milo in my arms, I had turned to leave the audiologist's sound-

Because my son was eligible for services, i had what many parents have in other countries: government-funded parenting support services. in talking with other mothers, i realized i was actually one of the lucky ones.

proof testing room and then stood in the doorway, looking left, looking right. I couldn't remember which way to turn.

On March 9, 2020, we met Amy, our assigned Early Intervention Specialist from the Maine Educational Center for the Deaf and Hard of Hearing (MECDHH), an organization that is contracted through CDS. It would be the only time we met her in person; a few days later, the whole world shut down. We moved our weekly meetings to Zoom and for the next fifteen months, Amy, along with our Deaf Family Mentor, Melinda, watched Milo grow through the narrow window of a computer camera.

The Zoom meetings were challenging. I would be breastfeeding or bouncing a crying Milo while my husband would be trying to listen, take notes, and give an accurate report on how things were going. With Melinda, a Deaf adult in her sixties who was also a mother and grandmother, we began learning how to sign things like diaper change, good morning, time for a walk, playtime, and various children's books and songs. When Milo began eating solids, we learned how to sign all the foods he was eating.

We learned as much as we could, as fast as we were able to, while both working from home and, like everyone else, cut off from any family member or friend who could come over to help. I learned the sign for "mama" and signed it as often as possible ("mama is here!"; "mama is drinking coffee!"; "mama has the milk!") in hopes Milo would sign "mama"

before he signed "dada" (my strategy didn't work; "dada" was first).

As weeks turned to months, our meetings with Amy and Melinda weren't only about raising a deaf child. Sometimes the meetings were simply about raising a child. We might spend the majority of the hour talking about a developmental shift, or a sleeping challenge, or even discussing Milo's affinity for pooping in the bath which, like sleeping challenges, went on for months.

My initial annoyance at having these two weekly hour-long meetings (along with all of the hours of research and studying I was doing on the side) shifted to a feeling of relief and even excitement. As I moved through the long days of parenting a baby during pandemic quarantine, I would bookmark things that I wanted to flag or discuss with Amy and Melinda. I was a new mom in total isolation from the world, but I began to realize that what I actually had was more support than nearly all of the other parents in my community. Because my son was eligible for services, I had what many parents have in other countries: government-funded parenting support services. In talking with other mothers who were parenting babies and young children almost completely solo month after month, I realized I was actually one of the lucky ones.

It's no big secret that the U.S. spends less on families and children than any other advanced country in the world. For annual childcare, as just one example, the U.S contributes roughly \$500 a year per family through tax breaks; the world's other wealthiest countries contribute an average of \$14,000.

Perhaps the starkest difference is what is (or isn't) available to a family as soon as a birthing person becomes pregnant. Most of the world's wealthiest countries provide fully (or majority) paid parental leave. However, many of these countries aren't just providing paid leave and government subsidies for childcare. These same countries are often providing in-home help from experts: In the U.K., a midwife visits a birthing person's home every day for 10 days after they and baby return from the hospital, helping with common challenges as basic as feeding, diapering, and sleep. In Germany, parents can choose what's called a Hebamme, or nurse-midwife, even before the baby is born to help the family prepare and eventually get acquainted with the new routine of caring for a child.

There are countless other examples of how governments and cultures around the world prioritize



new parents and babies. What they all have in common is consistent, in-home, fully-funded support that allows new parents to be held, seen, and supported by a wise and experienced community. The kind of experience I received thanks to Milo. The kind of experience we all deserve.

Milo is now two. He knows two languages: American Sign Language and, with the aid of his Cochlear Implants, spoken English. In terms of language expression and receptivity, he has already surpassed what would be expected of a hearing peer of the same age (with both ASL and spoken English). My family will have state-funded Early Intervention services until Milo turns three, at which point he is eligible to attend state-funded preschool with other deaf and hard of hearing peers.

Just the other day, Milo was being uncharacteristically shy as we entered a room with other deaf and hard of hearing families at a playgroup we've attended a dozen times. He was clinging to me and insisted we read a book together in a secluded corner. I caught Melinda's attention and signed to her that he wasn't quite ready to play. She nodded with understanding and fingerspelled "S-E-C-U-R-E" to me. It took me a minute to understand but I eventually got it. She was just telling me that Milo needed to feel secure before he could join the other children. I sat with him for a few more minutes, holding him close and reading a book about dinosaurs. Before long, he leapt off my lap and without looking back, ran toward the line of kids at the slide. I walked over to the other parents I've been getting to know. They all have their own stories and battle wounds from these last couple of years. We don't always have much to say but it's clear we're all relieved to see our kids laughing and playing. It's everything for us to all just be together in one place, feeling seen and, most of all, supported.

MAINE WOMEN MAY 2022 33

birth roots: a resource for parents

BY LEAH DERAGON

Parents are invisible. Parenting is invisible.

Our current systems fail families at a time when they're most vulnerable. In addition to clinical care, new and expectant families have very real and urgent non-clinical needs with non-clinical solutions.

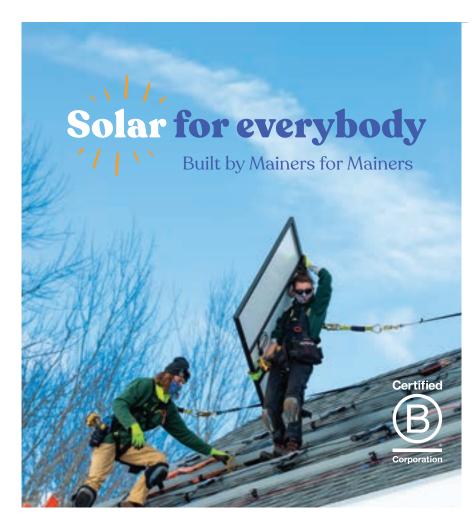
Many of these nonclinical needs and solutions are not prioritized or even recognized at any point within our current systems.

Since 2004, Birth Roots has been creating spaces for new families to gather and reflect on their lived experience of the consequences of these lagging and nonexistent policies. Birth Roots has been challenging outdated narratives, amplifying a more accurate message, a more responsive model, and a shift towards community-supported parenting.

We are in a fight to create conditions in which parents aren't drowning. As a result of working so intimately with nearly 7,000 families over the last 18 years, the insights we've gathered and the dots we've connected are helping define what non-clinical, community-based family care can look like and achieve. We envision a world that prioritizes parents and parenting as a starting point and not an afterthought.

LEAH DERAGON IS THE CO-FOUNDER AND PROGRAM DIRECTOR OF BIRTH ROOTS, IN PORTLAND, ME. FOR MORE INFORMATION, VISIT BIRTHROOTS.ORG.



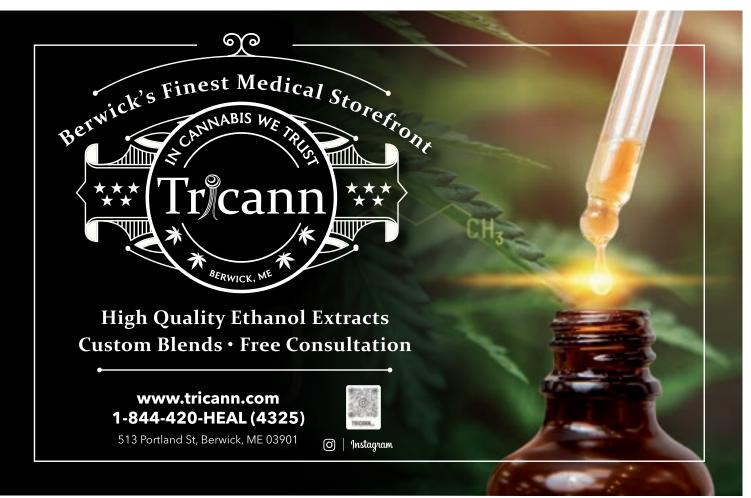




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Created by our family for yours.







Products and Farmers you can trust.

Our eighth generation farmers produce our organic products, from seed to shelf, all on our 200 year old farm. We don't outsource a single step in the process to ensure the very purest CBD products are always delivered from our family to yours.



"To show a man age 50+ how much you care, remind him to schedule a prostate cancer screening!

-DR. DEVON EVANS, MEDICAL ONCOLOGIST

"Prostate cancer is the leading cancer among U.S. men today, but it's increasingly treatable—especially if detected at an early stage. So reminding your husband or partner to get his prostate checked could help save his life.

"If a problem is ever detected, New England Cancer Specialists has a wide range of resources to treat it successfully—including clinical trials and consultation with Dana-Farber Cancer Institute."

To learn more about prostate cancer screening, treatment, and support, visit our website or call us at (207) 303-3300.

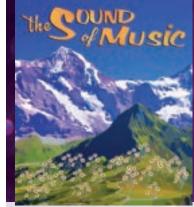
 NEW ENGLAND **Cancer Specialists**

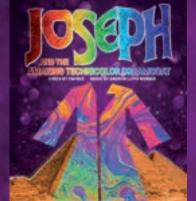


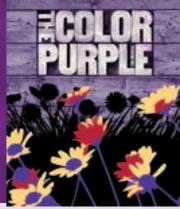
NewEnglandCancerSpecialists.org

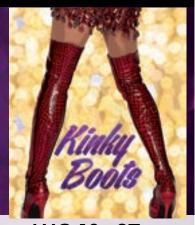
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JUNE 8 - 25

JUNE 29 - JULY 16

JULY 20 - AUG 6

AUG 10 - 27

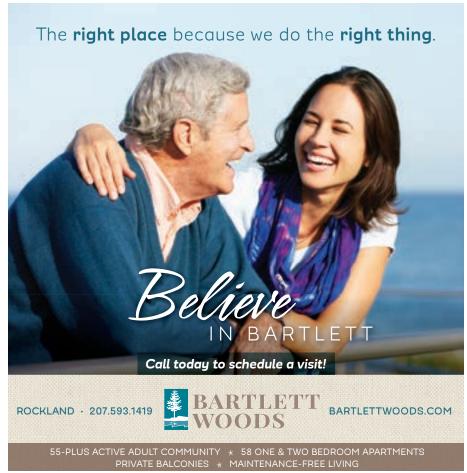
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Surely you've heard the statistics about how many moms left the workforce due to a lack of child care or seen articles about the women who met up in a field to rage-scream in solidarity. Who can blame them? What else was there to do?

Sadly, it seems no reinforcements are coming. Not soon, anyway. There is really no amount of self-care that can compensate for the toll the past two years has taken. However, there are some mind shifts and methods that you can try to stay steady in the face of continued uncertainty and challenge.

Find some gratitude every day. It's called a gratitude *practice* because thinking of things you are grateful for every once in a while doesn't quite cut it. All the research says the benefits come when you make gratitude a real habit. Start small if it feels daunting, with a goal of noting three to five things you appreciate in that moment. Work your way up to ten and see how it goes. If you are having a really bad day, aim for a lot more! Use a white board, start a journal, or email a group of friends (an added bonus of accountability)—the how is not nearly as important as the practice itself.

Be mindful of the moment. There is also plenty of research on the positive impact of mindfulness. Dr. Jon Kabat-Zinn, known for popularizing mindfulness in the West, defines it as, "Paying attention in a particular way: on purpose, in the present moment, non-judgmentally." Instead of scrolling your phone while you make your morning coffee, try to really pay attention to the process: note how the beans smell, what the water sounds like as it heats up, and how the hot coffee tastes. Not a coffee drinker? Try it with a glass of water. It sounds simple, but practicing mindfulness daily can improve your mental and even physical health, raising your emotional intelligence by increasing your awareness of the bodily sensations that accompany various feelings and making it easier to sit with your own and others' emotions.

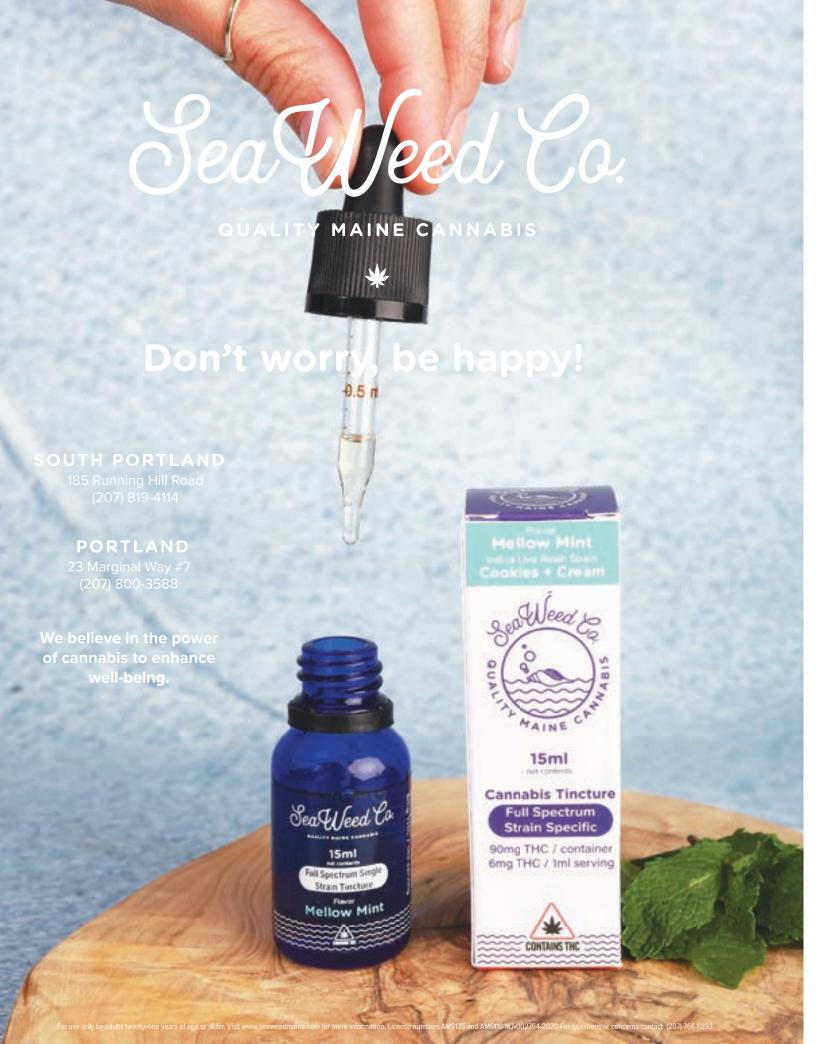
Cultivate kindness and be gentle with yourself. When something is challenging, there is the difficult thing that is happening and then *right next* to it is



the story we are telling ourselves about that challenge. If the voice sounds like a coach, it's cheering us on, offering encouragement and context. If it sounds more like a critic, it can be the meanest, most undermining voice in the world. This is where kindness and self-empathy come in. You can stop the self-judgment and intentionally bring a gentle voice to your head. We all find ourselves engaged in negative self-talk from time to time, but if you take notice, stop beating yourself up about it, and send it on its way ("No more from you today, critic!") you will have broken the cycle.

Only from the future looking back will we know if where we are *right now* is finally the end of the long tail of this pandemic. In the meantime, we remain in the discomfort of the unknown. But uncertainty is also just an inherent part of living. Developing habits that help find stability when things feel rocky will serve you no matter what comes next.

SARAH MACLAUGHLIN IS A SOCIAL WORKER AND AUTHOR; HER MOST RECENT BOOK IS RAISING HUMANS WITH HEART: NOT A HOW-TO MANUAL.



LEGAL ADVICE the great disruption

FOR ALL OF THE TURMOIL, LOSS, AND GRIEF CAUSED BY THE PANDEMIC, THERE HAS ALSO BEEN A SERENDIPITOUS DISRUPTION TO THE PROFESSIONAL WORKPLACE FOR WORKING PARENTS.

Countless working parents have long reported that the culture built on the billable hour was not always supportive of parents or adult children providing care for their own aging parents. Pre-pandemic, many employers failed to appreciate the cultural benefits of flexibility on employee morale as well as the tangible benefit of increased productivity when people are afforded trust and flexibility to get their work done while also attending to other demands.

On a personal level, I will never forget the employer who told me that if I showed up late — say 8:45 AM instead of 8:30 because I had to speak with my child's teacher — I had "better put in a leave slip for those 15 minutes because we're not one of those flexible workplaces." This, despite the fact that I was handling my workload efficiently and successfully and putting in many hours on nights and weekends preparing for trials

That boss thereafter walked past my office every night at 5:15 to make sure I was still there. At the time, I had been practicing law for more than 12 years, but rather than feeling like a trusted and experienced professional, I felt like a prisoner to the nightly bed check. Looking back, I see that this experience helped me understand that trusting my employees to do their jobs while attending to the demands of their lives was not only good management, but simply the right way to treat people.

We have all read much about the Great Resignation flowing from the pandemic, and likely share the belief it is partly attributable to the notion that employees grew sick and tired of workplace rigidity. We also can appreciate that many women have left the workforce during the pandemic because they simply could not support the exponentially greater needs of their families. It was, for so many, the proverbial straw that broke the camel's back.

As we emerge from the pandemic, employers are finding it incredibly difficult to fill vacancies and will likely fail to do so unless they can compete in the workplace flexibility race.

Conscientious employers who want to compete for top talent should take the lessons of the pandemic and implement policies that support women and caregivers in specific ways: tying performance metrics to the quality of completed work, not hours at a desk; providing not just sick time, but flexible family leave time as well; or simply abandoning leave policies of the past and instead affording generous paid time off (PTO) without regard to the reason underlying the leave, so long as the work is getting done and goals are being met.

Navigating this rapidly changing landscape from an employment law perspective may be complicated for all. The employer who does not want to provide flexibility for those positions where facetime in an office is not necessary to do the job may be able to hide behind laws preventing discrimination in the workplace. They might argue that they must treat their entire workforce consistently and to demonstrate that there is no discriminatory effect flowing from policy to protected groups, for example women. Similarly, the employer who provides flexibility for some employees but not others, based on job function, may be penalized for apparent disparate treatment.

While it appears that employers have the better hand in this scenario, employees may hold the winning cards ultimately because they will gravitate to employers who offer flexibility with the employers sticking with the rigid workplace practices of the past will be scrambling for talent.

There is no question that this Great Disruption will yield significant changes in the workplace and employment law arena for many years to come.

MICHELLE DRAEGER
IS THE EXECUTIVE
DIRECTOR OF THE
MAINE JUSTICE
FOUNDATION.

BY MICHELLE DRAEGER

CAREER ADVICE self-care

A MEME POPPED UP IN MY FEED RECENTLY AND MADE ME TAKE PAUSE: IT SAID "I'M ALLOWED TO DO WHAT'S BEST FOR ME, EVEN IF IT UPSETS PEOPLE.



A meme popped up in my feed recently and made me take pause: it said "I'm allowed to do what's best for me, even if it upsets people." I'm not usually one to take advice from social media, but something about that simple sentence struck me. Was it feeling an upcoming time crunch I had put myself in for overcommitting to projects? Was it guilt for saying no to an extended family function because of the aforementioned taking on of things? Was it shutting the door on my one-year-old daughter to take an uninterrupted shower? She was supervised by her dad and completely safe, but oh, it can be hard not to comfort those tears.

Oftentimes we measure our own happiness by the happiness of those around us – our families, our coworkers, our boss. We are taught to be nurturers, to say yes, and to meet the expectation of juggling every ball thrown at us. That carries over into our professional lives as well. So, what if we could achieve true happiness through self-care at work? What would that look like?

It takes practice, and it may be different each day, but remember - you are allowed to do what's best for you.

LADIES, LET ME REMIND YOU, SELF CARE IS:

SAYING "NO" TO SOMETHING YOU DON'T WANT TO DO. IF SOMEONE GETS MAD AT YOU, THAT'S AN EMOTION THEY NEED TO OWN.

FOCUSING ON WORK YOU FIND MEANINGFUL. DO WHAT FILLS YOUR CUP.

TAKING CONTROL OF YOUR TIME. SCHEDULE LUNCH OR A WALK OUTSIDE ON YOUR CALEN-DAR AND COMMIT TO IT.

THINKING ABOUT MENTAL HEALTH LIKE YOU DO YOUR PHYSICAL HEALTH. IF YOU NEED A DAY OFF, USE A PTO DAY. HIT THE RESET BUTTON.

PRACTICING MINDFULNESS AND INTENTIONAL BREATHING. TAKING TIME TO SLOW DOWN IS PROVEN TO IMPROVE CLARITY AND FOCUS.

SPENDING TIME WITH THOSE WHO ENCOURAGE YOU TO BE YOUR FULL, AUTHENTIC SELF.

HEATHER DOUGLASS IS THE WORKFORCE COMMUNICATIONS DIRECTOR FOR THE MAINE COMMUNITY COLLEGE SYSTEM.



FCP Live-In's Live-In **Caregiver Services Helps** Maine's Seniors Stay In Their Own Homes!

Dr. Walter F. Keller knows the importance of staying active, adopting good nutritional habits, and other ways to keep healthy that would lead to living independently as long as possible.

After all, Dr. Keller was a thoracic surgeon in Portland, Maine, for more than 20 years. He received his medical degree from Philadelphia College of Osteopathic Medicine and later became affiliated with multiple hospitals in Southern Maine, including Mercy Hospital of Portland and Maine Veterans Affairs Medical Center.

A few years before retiring, Dr. Keller was diagnosed with muscular dystrophy, a disease that causes progressive weakness and loss of muscle mass. Over time, Dr. Keller needed aroundthe-clock care in order to live independently in his own home.

While in a rehabilitation facility, Dr. Keller met with Constance McFarland, care coordinator at FCP Live-In, a leading live-in home caregiver provider that services families throughout the New England area. Constance conducted an his needs and completed the paperwork and helps him with anything he needs. necessary for him to have a live-in caregiver to help him maintain his independence. An FCP Live-In caregiver was cooks for me and helps me with whatassigned to him promptly.

Dr. Keller thinks the world of his liveassisting Dr. Keller in using a motorized wheelchair and a Hover lift, which allows the safe lift and transfer of patients. Joey also helps Dr. Keller with his



"My caregiver is one of the nicest people I have ever met! He cooks for me and helps me with er and CEO, said he started the compawhatever I need help with.

I could not go to a nursing home. It is wonderful to be in my own home."

Dr. Walter F. Keller

daily routine and does light housekeeping, cooking meals, laundry, and other household needs. Plus, Dr. Keller says if he ever has a question, he can call Sarah Levesque, FCP Live In Field Superviinterview with Dr. Keller to determine sor, and she always responds promptly

"My caregiver is one of the nicest people I have ever met," Dr. Keller said. "He ever I need help with."

"Dr. Keller is a beloved and retired in caregiver, Joey, who is proficient in medical director. He is such an interesting man," Constance said. "It was wonderful and rewarding to help him return to his home. More than a few of his former co-workers reached out to thank us for helping him remain independent and at home!"

> FCP Live-In helps families navigate the unknown by walking them through the process of live-in caregiving and knowing when to make necessary adjustments, particularly when a loved one's health condition changes.

> David Anthony, FCP Live-In's Foundny because options are limited when it comes to caring for a loved one.

> "I could not go to a nursing home," Dr. Keller said. "It is wonderful to be in my own home."

"In Memoriam" Dr. Walter F. Keller

FCP Live-In sadly mourns the loss of Dr. Walter F. Keller. A client and close friend of the FCP Live-in family, Dr. Keller will be missed by all!

To learn more about FCP Live-In home care, call 866-830-4443 or visit www.liveinhomecare.com today!

In April, Tyler Dubois, who is 30 years old and the mother of six, won the annual student activism award from the Department of Gender and Sexuality Studies at the University of Maine at Orono, where she will graduate with a Bachelor's of Social Work in June and begin a Master's degree in the fall.

When we asked her for a quick bio, she jokingly sent us what actually amounts to perhaps the least 'professional' but most memorable bio we've ever seen: "Has six kids so they can organize and overthrow her if she gets too tyrannical and overbearing as a parent; got her Bachelor's of Social Work because she's angry at everything and when she asked, 'Who is going to fix this??' realized that she is an adult now and she is the 'who' that must fix 'this' if she wants it to be different."

WE ASKED DUBOIS WHAT SHE WOULD DO IF MONEY WERE NO OBJECT. **THIS IS HER BIG DREAM:**"I would use the money to start a

"I would use the money to start a housing project building zero-energy homes out of dirt (I promise they're not as weird and gross as they sound).

for essentially anyone who needs it, as housing is a right and, essentially, a civic responsibility. I would put them on this 200-acre plot of land that's been for sale in Orono forever. There is a guy in Canada named Clifton Schooley, and he has figured out how to make rammed-earth housing appropriately insulated. He runs workshops every summer in weird remote places, so I will learn how to build them up there. I also want to make sure they aren't built stupidly like the majority of our housing is today. Passive heating and cooling is very possible! There is no reason we should have to live in moldy hotboxes. And I want one for myself, to be honest. They're just so cool."



Plant-based power lunch!

Packed with fiber and protein, this simple, vegetarian tostada will keep you full and satisfied.

Garlic Hommus Tostadas

SERVES 2

Ingredients:

- Medium tomato, diced
- 1 Cucumber, diced
- Avocado from Mexico, peeled and diced
- 1/4 cup Hannaford Stuffed Spanish Olives, sliced in half
- tsp. McCormick® Perfect Pinch® Italian Seasoning

 Juice from half a lemon
- 2 Hannaford 6-inch Yellow Corn Tortillas
- 1/2 cup Cedar's® Garlic Hommus Salt and pepper, to taste

Directions:

- Combine tomato, cucumber, avocado, olives, Italian seasoning and lemon juice in a bowl. Set aside.
- 2. Warm corn tortillas in a large skillet on medium heat.
- Once warmed and slightly toasted, remove tortillas from skillet and put on serving plates.
- 4. Spread the top of each tortilla with garlic hommus.
- 5. Spoon tomato mixture on top and season with salt and pepper.

Nutritional Information (amount per serving):

Calories 450; Fat 31 g; Saturated Fat 4.5 g; Cholesterol O mg; Sodium 1040 mg; Carbohydrate 37 g; Fiber 11 g; Sugar 8 g; Added Sugar O g; Protein 9 g

Source: Recipe adapted from cedarsfoods.com • Photo courtesy of Cedar's Foods



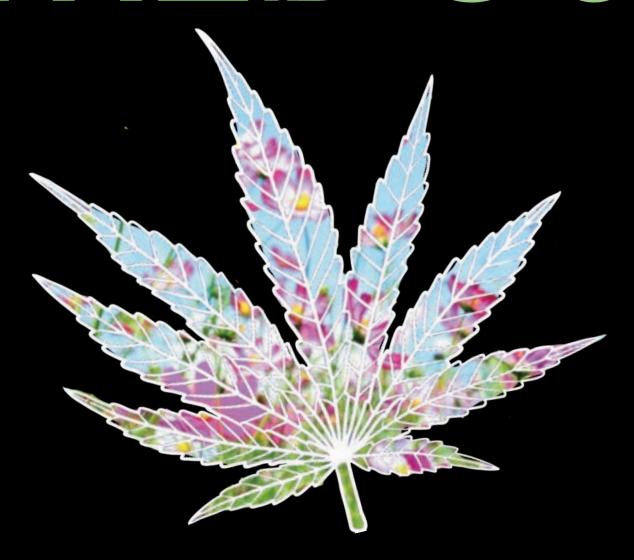
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