

Extraordinarily Normal: A Journey of Breaking Free from the Limits of Labels



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Now I See A Person Institute is a non-profit graduate and postgraduate teaching and clinical institution using Collaborative Practices, horses and a nurturing and normal environment for clients to heal from trauma and resultant challenges. We especially have success (evidence-based qualitative research) with those clients who unfortunately have lengthy histories of trauma, and extensive past experiences with hospitalizations, years of therapy, years of residential care or rehabilitation and medications which did not aid. Our clients see themselves as a person and not a diagnosis that may have labeled or limited them in the past. Our team of therapists, horses, and ranch environment provide a community of support while symptoms dissipate and new self-perceptions evolve, and family member relationships are rebuilt.

Questions

Questions presented to the research subjects were: How was Now I See A Person Institute different from past services? What was helpful at NISAPI? What was not helpful at NISAPI? How did change occur for everyone? What helped that change occur?

Themes

Changes that occurred as described by family, excerpts from transcript of videotaped interview Colleen's Healing Journey:

Prior to NISAPI:	NISAPI:
<ul style="list-style-type: none">Lonely, unhappy, distraught.	<ul style="list-style-type: none">Less suicidal thoughts, less being depressed, less medications, less stressed, being able to go to college.Helping me be more me, not being this "depressed" person and being labeled

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	<p>with all of these things.</p> <ul style="list-style-type: none"> • Being with more positive energy, not coming around in therapy being sad all the time sitting there not wanting to go. • More happy. • Doing the things, I'm able to do now that I wasn't able to do before.
<ul style="list-style-type: none"> • Cycle of hospitalizations, being told by professionals "send her there, throw her there, that's the place to be for her." 	<ul style="list-style-type: none"> • Breaking the cycle of hospitalizations, not relying on the hospital. • She never once sent me to the hospital. She always asked me if I wanted to go but I always said no... she would tell my parents but she guided them not to panic.
<ul style="list-style-type: none"> • Disconnected family. 	<ul style="list-style-type: none"> • Helped our family be more connected rather than being disconnected, we weren't communicating, we weren't able to do the things we liked to do in the past year my parents were always paranoid for me to do things but when there was something wrong my parents and I were always able to rely on David or Dr. Swim to answer the phones and then guide us through what to do.
<ul style="list-style-type: none"> • Living on fear. 	<ul style="list-style-type: none"> • I can laugh now because I know she knows her limits, and she knows she's okay.
<ul style="list-style-type: none"> • Being told "you are bipolar, you are this." 	<ul style="list-style-type: none"> • Being able to express themselves as just a person.

Journeying with NISAPI

- **Freedom to speak:** "What you see is really me. What I couldn't do on the other side of the venue was I couldn't be free enough to speak." "You allowed me to be me and not feel I had to be someone other than myself and it was okay to kind of speak so you get to know where we were coming from and our feelings." "Allowing us to tell you what happened from the past in order to get to the present."
- **Welcoming:** "When we finally got to you, you were so welcoming. You didn't size us up. You didn't look at us like 'okay what are you people doing?' You wanted to know what you could in order to heal the family unit."

- **Viewing each other through a lens of shared humanity:** “I’m not looking at a CV, I’m looking at a person... (in regards to the relationship to the staff at NISAPI).”
- **Generosity of time:** “The other change for me was, okay here is this person who is a PhD who really wants to help and not go ‘well here is my five second review and if you go to the psychiatrist I want you to fix your, you should really tell him or her about this’ and you weren’t anything like that.” “She also would communicate with my parents all the time.” “She’ll call my parents and ask how I’m doing.” “My parents and I were always able to rely on David or Dr. Swim to answer the phones and then guide us through what to do.”
- **Guiding not telling:** “She was guiding me through it, but she wouldn’t do all the work for me. She would make me find what would work for me rather than her telling me what to do.” “People are out of the box and not one size fits all either and you’re very good at knowing what size fits where and not shoving an attitude or thought process that you have to adhere by.”
- **No longer pinned to a wall:** “The biggest thing was she wasn’t looking at me like some crazy person.” “Helping me be more me, not being this “depressed” person and being labeled with all of these things.”
- **Harm from experiences prior to NISAPI:** “Because not only do they label the one who they think has an illness, they label you in conjunction with them.” “Because we were the neglect. ‘Neglect.’ I heard that word once, I heard it a million times.” “I felt oh my gosh I’m defending my whole existence.” “Every time we went the DCFS would blame me or Adam.” “I didn’t want to call the hotlines because they were hard, they weren’t going to listen to me, they were going to just send me right to the hospital and I didn’t want that.” “I mean you weren’t given options; you were just given a to-do list... if she does this, do that, do that, go, go, go to the hospital.” “If the client is not strong enough to push back you get swallowed by it.”
- **Community engagement:** “What makes you different because you want to collectively work with them and not at them. There’s a big difference... But you genuinely wanted everyone to know her. Not who we thought she was but who she is and in order to do that we had to know her through therapy.”

Journeying with the person and family through the lens of the therapy team at NISAPI:

- Population we serve are viewed as people traveling and not bound to trauma.
- We provide a conversational space where people are free and safe to speak and be.
- We genuinely care about people and join their narratives, knowing they have inherent self-agency and personal skills to transform into directions they desire.
- Change occurs when we all see each other as people. Change occurs, when people suffering are provided conversational space to create new possibilities and options. Change, therefore, is owned by the person and their community.

We call what we do Community Engagement: A Collaborative Recovery Model, CEACRM.

CEACRM represents to us:

- Through relational connection, we become people talking with people suffering without labels of experts or educators.
- Absence of pathology or deficiency language to describe oneself or others.
- We talk in their language to avoid social and cultural bias.
- People are seen as people who are suffering from life challenges and societal mandates not due to mental disorder or personal deficiency.
- We see people for how they wish to be represented rather than the prior diagnosis.
- People are assets, rather than problems, and we are in awe of their strengths, resiliencies, capacities to self-solve, and that they are having normal reactions to extraordinary circumstances.
- We are in awe of their stories of suffering and their beautiful willingness and ability to transform. We feel our journey with them results in being “Extraordinarily Normal.” The beginning narratives of pain and suffering transforms to conversations of honoring strength, resiliency, hope for the future and themes that are Extraordinarily Normal.

Reflections

What happens when people seeking support are viewed as normal people who are going through difficult times? When we honestly care as human beings about others and genuinely invest the time to attempt to understand the hardships that they face? When we embrace the idea that people can get over “mental illness” and invite others within a person’s community to join in the acknowledgement of a person’s strengths and capacity to heal?

We wished to share a case study of a family who endured over a decade of services that unfortunately led to long term institutionalization. With our meetings at Now I See Person Institute with a team of therapists, the family lost the language of pathology, deficiency, and diagnostic labels to describe themselves, and it freed them to self-solve. For almost a decade, all mental health professionals saw them through the lenses of deficiency and for almost a decade, there were stories of psychiatric interventions and institutionalizations. Current discourse is about living daily life, developing new self-identities, finding happiness, and hopeful futures, that we call, Extraordinarily Normal Themes. Extraordinarily Normal Themes represent good and not so good days, building relationships, celebrating when days go well and problem solving when they do not; themes that we all have as being human.

We were asked by the research subjects to include their reflections after reading this qualitative piece. These included: “You only live once and if you find ways to do it right that is enough, and only you have the decision to do that.” “You have to feel safe, and nonjudged for change to happen.” “In being at NISAPI I’ve realized there is therapy with caring and knowledgeable staff who see you as a person, who can help for life long

change and can give new meaning and hope and not just be the focal point of what they think change should be, or how we should be.” “Previous therapists and psychiatrists did not treat us as human beings and would sum us up in a few minutes to coerce us to do what they thought we should do without even knowing us, and this led us down a rabbit hole to nowhere.” “It is like communism and it was like I was forced to abort my child who I love.”

We wish to share these stories in qualitative research to support the idea that all people can heal when people are seen and treated as people, for us it is a social justice mandate.

Now I See A Person Institute

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