The Department of Mental Health hosted “Weathering the Storm,” its Third Annual Trauma-Informed Care Conference, September 20-22, featuring speakers from here in Mississippi and from around the country as well.

The conference gathered mental health professionals from throughout the state to build skills, knowledge, and awareness so they can effectively respond to various aspects of child, adolescent, and adult trauma. Mississippi First Lady Deborah Bryant opened the conference with a frank discussion of her own experiences with mental illness.

“I grew up in a household affected by mental illness,” Bryant said. “I very well know what mental illness in your family is like. I know what families go through. I know how important family support is to someone who has a mental illness.”

First Lady Bryant at DMH Trauma Conference – Pictured are (l to r) Board of Mental Health member Dr. Jim Herzog, DMH Executive Director Diana Mikula, Mississippi First Lady Deborah Bryant, and Board of Mental Health member Dr. Sampat Shivangi. First Lady Bryant spoke at the department’s 3rd Annual Trauma Informed Care Conference and shared her own personal experiences with mental illness.

“People with trauma in their past have the opportunity to make themselves better, of healing the hurts in their past and moving on towards their future.”

She recently gave her support to the Department of Mental Health as it released the state’s first Suicide Prevention Plan, and discussed how she had also been personally affected by suicide. She also spoke about childhood bullying, an issue she has been passionate about for some time, and one that, when taken to extremes, can be one source of trauma for young people.

“That can be more than just saying hurtful things,” Bryant said. “Mental health is very near and dear to me personally, and I want to thank y’all for being here today and addressing these issues with families out there. People need to know you can have a normal life even with a mental illness, so thank you for doing what you’re doing.”

A keynote presentation later in the week from Dr. Terry Morris also drew applause and acclaim from conference participants. He recounted his childhood history of childhood abuse and how...
EXECUTIVE DIRECTOR’S MESSAGE

Welcome to another issue of Mississippi Profile, the Department of Mental Health’s quarterly newsletter. Our last issue was a combined Spring/Summer release earlier this year, and we have a lot to share because we have been busy in the past several months.

Earlier this year, I asked members of our agency to form a workgroup to address suicide prevention efforts in our state. DMH has had ongoing campaigns for suicide prevention over the past several years, but the state has never formally adopted a plan to gather all of those activities and partnerships in one place. The Suicide Prevention Plan Workgroup included professionals who work in mental health, education, strategic planning, all of them from various agencies both inside and outside of state government. They were able to develop the Mississippi Suicide Prevention Plan by September, which is also National Suicide Prevention Month. I’m proud of the work that group accomplished, and looking forward to the progress the plan will guide us on over the next two years.

We also have several stories that highlight various aspects of the DMH Strategic Plan, an important guide for the agency as we continue to transition to a system more focused on providing community services. The stories in this newsletter about CHOICE, an affordable housing program, supported employment, and the DMH Office of Consumer Support are small looks at the ways we are working to make sure people are able to get the services they may need while remaining in the communities of their choice.

You can also read here about two recent conferences we have hosted. I am very glad to know that both our 17th Annual Alzheimer’s Conference and the 3rd Annual Trauma Focused Care Conference had excellent attendance and participants from throughout the state. I know that everyone will take what they have learned and use it to keep working towards a better tomorrow for all Mississippians. Thank you to everyone who helps contribute to that mission.

Sincerely,

Diana S. Mikula, Executive Director
The Mississippi Department of Mental Health (DMH) has released its first state plan for suicide prevention, making an important step in efforts to prevent the loss of lives by suicide in Mississippi.

Though the agency and its partners in the community have worked for years at suicide prevention efforts and to fight the misconceptions of mental illness, the Mississippi Suicide Prevention Plan marks the first time a comprehensive plan has been formalized and adopted. It is available on the DMH web site. Its release in September carries special significance as September is Suicide Prevention Awareness Month.

“Whether we realize it or not, many of our friends and neighbors have been affected by suicide or mental illness,” DMH Executive Director Diana Mikula said. “Suicide affects people across all ages, races, and backgrounds, but through collaboration, sharing resources, and working towards common goals, we can prevent the tragedy of suicide.”

The plan contains three core sections: Assessment, Capacity, and Goals and Objectives. The Assessment section addresses demographics and trends in the mental health field. The Capacity section examines resources that are currently available to help address suicide. The Goals and Objectives section are the specific targets DMH is working towards with the plan.

Also included throughout the plan are a series of stories written by people who have been affected by suicide, either as loved ones or friends of someone who took his or her own life, or as people who have attempted suicide or had suicidal thoughts themselves. Though some names have been changed, they are all the experiences of Mississippians who have faced tragedy.

Mississippi Board of Mental Health member Teresa Mosley shared her own personal experiences in the story, telling of the loss of her daughter Elisabeth.

“There was such a stigma attached to suicide and I wanted to share Elisabeth’s story in an attempt to start a conversation with individuals whose lives had been touched by this tragedy,” she writes in her story in the plan.

She said that unless someone is a suicide survivor, others have no idea...
he overcame it to earn multiple advanced degrees and become an electrical engineer with NASA’s Langley Research Institute.

His presentation spoke of the ways he moved forward despite his background, not letting opportunities pass him by when they presented themselves.

“People with trauma in their past have the opportunity to make themselves better, of healing the hurts in their past and moving on towards their future,” he said. “You can either choose to live in the past, or you can use that energy. I want to take whatever steps I have to go through so I can live a better life. I don’t want to just survive. I want to thrive. I want to live.

“This is what healing from trauma is about. It’s about life.”

Dr. Terry Morris at Trauma Conference – Dr. Terry Morris (center) appears with the planning committee of “Weathering the Storm,” DMH’s Third Annual Trauma-Informed Care Conference. Dr. Morris shared how he overcame his history of trauma to live a successful, inspiring life.

how it feels to lose someone to the tragedy of suicide.

“When studying suicide, we like to look at statistics,” Mosley said. “However, those statistics don’t really make it real. It’s real when you love one of the numbers.”

Suicide is the 12th leading cause of death overall in Mississippi, but among people aged 10 to 24-years-old, it is the third leading cause of death. Suicide rates also increase with age, and older adults have the highest suicide rates.

The plan’s four goals hope to address those statistics, leading to greater coordination of suicide prevention activities, increase partnerships between public and private organizations, and promoting and improving mental health literacy and attitudes about mental health.

Mississippi’s First Lady, Deborah Bryant, shared a letter in the plan mentioning how she had been affected by suicide.

“I have seen first-hand the effect that suicide has on people’s lives, and my hope is that we do all we can to prevent unnecessary deaths by suicide,” she said.

She also notes that suicide affects people in all walks of life.

“People from all populations – young adults, military, older adults, males, and females – will be impacted by the goals and objectives in this Plan. An integrated and coordinated effort is essential to prevent suicide attempts and deaths, and to save the lives of those we love,” she wrote.

One thing all Mississippians should be aware of now is the National Suicide Prevention Lifeline. DMH is the statewide provider for this lifeline in Mississippi, and the line is staffed 24 hours a day, seven days a week. It can be reached at 1-800-273-8255. DMH also operates a toll-free helpline available at all hours by calling 1-877-210-8513.

Anyone who feels they need help, or who knows someone who appears to need help, is encouraged to call one of those numbers any time of the day and any day of the week. All calls are confidential and help is available at all times.

The Mississippi Suicide Prevention Plan is available on the DMH web site, www.dmh.ms.gov, located in the Resource Library.
DMH HOSTS 17TH ANNUAL ALZHEIMER’S CONFERENCE

The Department of Mental Health held the 17th Annual Conference on Alzheimer’s Disease and Psychiatric Disorders in Older Adults on August 17-19 in Natchez.

The conference was an opportunity to inform, educate and train all who are involved in the care of persons with Alzheimer’s disease, dementia and psychiatric disorders. For the second year in a row, there was also a pre-conference intensive held the day before the conference began in full, providing an additional avenue to educate caregivers – specifically direct care workers.

“This conference provides a unique forum for professional interactions, networking, and one-on-one contact to discuss issues and ask those important questions to some of the state’s leaders in the field of Alzheimer’s disease and other dementia,” said Kathy Van Cleave, Director of the Division of Alzheimer’s at the Department of Mental Health.

“We had an excellent group of speakers this year. They have a wealth of knowledge, both personal and professional, in this field. I know everyone who joined us learned a lot from the presentations.”

The Pre-Conference Intensive was a half-day format designed primarily for professionals working in direct care with people who have Alzheimer’s disease and other forms of dementia. A growing proportion of family caregivers attended the Pre-Conference with topics that included improving communication, enhancing listening skills, and understanding challenging behaviors while improving quality of life for persons with dementia and caregivers.

The keynote speaker for the pre-conference was Karen Stobbe, who has worked with persons with Alzheimer’s disease or dementia for the past 20 years, including as a caregiver of both parents who had/have Alzheimer’s disease. She has contributed to the development of several different curricula and training programs related to Alzheimer’s disease. She was also a keynote speaker at the conference itself, along with Mondy Carter, Kent Dean, Michelle Daniel, Mary Kim Smith, Linda Gholston and Heather Palmer.

Presentations throughout the event followed the theme of “Building Bridges Together,” and were designed to foster creative learning with conference participants, to foster creative interaction between caregivers and individuals with Alzheimer’s disease and related dementias, and to open discussion about the strengths people living this journey share.

The conference also hosted a Legislative Forum that consist of presentations from organizations comprising the Dementia Care Network, including the Mississippi Department of Mental Health Division of Alzheimer’s, the Alzheimer’s Association, Alzheimer’s Mississippi and The MIND Center at

We are so fortunate to honor the efforts and accomplishments of such fine people in the field of dementia care.

continued on page 8
Mississippi has been awarded a $647,461 federal grant aimed at reducing recidivism by addressing untreated co-occurring substance use and mental health disorders in offenders under community supervision.

The Department of Corrections and the Department of Mental Health are partners in administering the Second Chance Act Reentry Program for Adults with Co-Occurring Substance Use and Mental Disorders for 36 months, beginning Saturday, Oct. 1.

“Our state is in dire need of programs that can offer ex-offenders a full continuum of integrated care that will improve their functioning and outcomes when they return to their communities,” Commissioner Marshall Fisher said. “Therefore, when the Department of Mental Health approached me about supporting its efforts to get this grant, I didn’t hesitate.”

Fisher said the grant could not have come at a better time considering the number of incarcerated offenders with mental health and addiction disorders. There are 3,194 inmates receiving ongoing mental health treatment and about 15,000 have self-reported abusing alcohol and drugs.

“We believe individuals with co-occurring mental illness and substance use disorders represent a group of people who have been under-identified and may have had difficulties accessing the services they need,” DMH Executive Director Diana Mikula said. “The Mississippi Second Chance Act Reentry Program will work to identify these needs and get people the services that can help them begin their recovery process.”

Our state is in dire need of programs that can offer ex-offenders a full continuum of integrated care that will improve their functioning and outcomes when they return to their communities.

The grant allows the two departments to do several things, including improve identification of inmates with co-occurring substance use and mental health disorders, provide training to staff, integrate individualized treatment plans and track participant outcomes.

The departments will use mental health assessments to determine individuals’ needs and collaborate to develop re-entry plans, including pre- and post-release treatment.

Those treatment services will include cognitive-behavioral therapy, crisis intervention, and recovery support services such as housing, vocational, and educational services.

As the program begins, it will focus on non-violent offenders returning to Hinds County. Current plans are to serve 90 individuals during the three-year pilot program in order to develop a program model that can be replicated statewide with the receipt of additional federal grant funding. Unlike similar re-entry models, this program will require people under community supervision to participate in a minimum number of intensive outpatient therapeutic hours, based on their individual recidivism risk level.

“Through our collaboration with the Department of Corrections, we know there are a number of eligible individuals right here in Hinds County,” Mikula said. “We will be collaborating and using existing resources in the state mental health system to get these Mississippians the treatment and support services they need. I know that with all of us working together, we can create a better tomorrow for the people of our state.”
J. RICHARD BARRY NAMED CHAIR OF THE BOARD OF MENTAL HEALTH

J. Richard Barry of Meridian assumed the role of Chair of the Mississippi Board of Mental Health on July 1, 2016. An attorney, Barry is a Senior Partner in the law firm of Barry, Thaggard, May and Bailey, LLP in Meridian.

Barry served as Vice Chair of the Board of Mental Health during Fiscal Year 2016 and was first appointed to the State Board of Mental Health by Governor Haley Barbour in June 2005. He was later reappointed by Governor Phil Bryant in 2012. Barry received his law degree from the University of Mississippi. He is a member of the American Bar Association, Mississippi Bar Association, Lauderdale County Bar Association and the American Health Lawyers Association. He also became President-Elect of the Mississippi Bar Association in July 2016.

“It is a privilege to serve in this role for the coming year,” Barry said. “I hope to help people realize the depth of the services offered by the Department of Mental Health. The department has a variety of programs throughout the state that serve people of all ages with a vast array of needs. This agency and its employees are dedicated to providing the best care possible for the people we support and serve, and I’m glad to be a part of it.”

Barry said he would like to thank the Legislature for the commitment it has shown to expanding Mississippi’s system of community-based care of the past several years, and for the funding it has provided to build a new receiving unit for acute-care patients at East Mississippi State Hospital (EMSH) in Meridian.

“People need to see these programs firsthand and get a personal perspective on what they are doing day in and day out. The Department of Mental Health is a large state agency. Some people have said it may be too large. I say it’s not large enough,” Barry said. “If you’ve never had a family member in need, then it’s hard to understand how important this is.

“The one thing that every single person with a disability, substance use disorder or with a mental illness has in common is they all deserve the best support and the best services we can provide.”
Presenters from each organization shared priorities and activities for the upcoming year. Field Representatives from Senator Thad Cochran’s office, Senator Roger Wicker’s office and Representative Steven Palazzo’s office shared information about current legislative initiatives affecting individuals with Alzheimer’s disease and their care partners. State Representative William Shirley also attended the Forum. Participants were given the opportunity to ask questions regarding the initiatives shared.

The Conference concluded with its signature Paint It Purple! party and Awards Breakfast. Participants were encouraged to wear purple to Friday’s sessions and were given PIP packets filled with informative flyers to promote creative Alzheimer’s Awareness activities in honor of World Alzheimer’s Day. The Natchez Convention Center was decked out in purple décor for the event.

Awards were given to acknowledge the Direct Care Worker of the Year, Volunteer of the Year, and the Dorris Award for Caregiving. Recipients included Vanessa Ray Jones of Amory as the Direct Care Worker of the Year, Fidel Garza of Gulfport as the Volunteer of the Year, and Barbara Parker of Amory as recipient of the Dorris Award for Caregiving.

“We are so fortunate to honor the efforts and accomplishments of such fine people in the field of dementia care,” Van Cleave said. “This event would not have been possible if it had not been for the wonderful staff of the Natchez Convention Center, Natchez volunteers, and the diligent Information Systems staff of the Department of Mental Health.”

Robert Landrum of Ellisville has been named Vice Chair of the Board of Mental Health for Fiscal Year 2017, which began July 1, 2016.

Mr. Landrum has been involved in mental health since the early 1980s, when he and his wife became active in Ellisville State School’s Parents and Friends Organization. Mr. Landrum represents the Fifth Congressional District and is a family member of a person who has received services through the public mental health system. He currently serves on the Board of Mental Health’s Property Subcommittee. In 2005, he received the James “Jimmy” Stubbs Award, which recognizes a commitment of volunteer service to Mississippians with intellectual or developmental disabilities, mental illness, or substance use disorders.

“We are pleased to have Mr. Landrum take up this position with the Board of Mental Health for the coming year,” said DMH Executive Director Diana Mikula. “We know he is committed to providing quality services to people in need, and his experience makes him an invaluable person to work with at DMH. We look forward to continuing to work with him in the future.”
20 PEOPLE TRANSITION FROM DMH REGIONAL PROGRAMS IN 1ST QUARTER FY17

As the Department of Mental Health continues to focus on the availability of community services, more people are getting the help they need in the most independent environments possible.

Over the past several years, people served in DMH’s six regional IDD programs have been able to transition to group homes, to homes with their families, and to their own homes and apartments. Sometimes they are aided by supports and services from the ID/DD Waiver, but these transitions all represent steps towards more independence.

In the first quarter of FY17, those transitions continued. From July 2016 through the end of September 2016, 20 people were transitioned from DMH regional programs.

One of those people who has benefited from the focus on community services is Kiki, who has transitioned from Hudspeth Regional Center to a group home, and is now preparing to once again make another transition.

In 2001, Kiki, then 10-years-old, came to live at Hudspeth Regional Center (HRC). Kiki had a history of intellectual/developmental disabilities and behavioral problems. Her move to HRC represented a big change for her, but it also opened many new opportunities.

At HRC, Kiki learned how to get along with others, how to follow directions, and she started school – first at the school on campus, then moving to public school. Slowly but surely, Kiki began to love her new life.

When she became high school age, she worked during the summers and earned her own money. She was loved (and a little spoiled) by the HRC staff and had lots of friends on campus.

It became apparent that Kiki was ready for a new step in her life, and she began to prepare for a move to a home in the community.

She was both excited and apprehensive, but she has loved the time she has spent in her new home. She is employed in Morton and does a great job. She is an active member in her church and never misses a Sunday.

Kiki has also become a “big sister” to a younger girl at the home and thoroughly enjoys the role. She has taught her new little sister to dance, because Kiki loves to dance more than anything. Kiki gets to visit with one of her sisters who lives in Ridgeland and has a boyfriend.

Again, it has become apparent that Kiki is ready to move on. In the not too distant future, Kiki will be moving to her own apartment. She knows how to clean and not only does she do it well, but she enjoys doing it.

And again, Kiki is apprehensive about moving. She will have to leave her new friends at the group home and live a more independent life, but she is almost up for the challenge.

Kiki has come so far - she came to HRC as a 10-year-old girl with a lot of potential, and she is now a young woman ready to face her future.

...more people are getting the help they need in the most independent environments possible.
The Office of Consumer Support (OCS) at the Department of Mental Health has a vital role in the agency—its three components play a part in the lives of thousands of people each year.

The office is the call center that provides information and referral to DMH Certified Providers throughout the state, including providing counseling to Mississippians who call the National Suicide Prevention Lifeline. It also investigates grievances about DMH Certified Providers, taking information from people receiving services, family members, and staff members. The office also plays a role in SPOTT, the Specialized Planning Options to Transition Team that works to offer services to people with challenging needs.

The office has four full-time staff members, three part-time staff members, and staff have a master’s degree and/or six or more years of experience in the mental health or a related field. In FY16, those seven staff members in the Office of Consumer Support received a total of 4,638 calls through the DMH Help Line. An additional 1,278 calls came into the office through the National Suicide Prevention Lifeline.

In the first quarter of FY17, the office took 482 calls from the National Suicide Prevention Lifeline and another 1,715 calls from the DMH Help Line.

Someone needing services or information can call the DMH Help Line at 1-877-210-8513 and receive an answer 24 hours a day, seven days a week.

“The DMH toll-free Help Line number is publicized throughout the state and provides connections to services throughout Mississippi,” said Molly Portera, OCS Coordinator.

“Calls range from referrals to community mental health centers, Mobile Crisis Response Teams, or Crisis Stabilization Units. We may provide information about the commitment process, or we may be speaking to families in crisis who need immediate help.”

Another crucial role OCS plays is in handling grievances reported through the Help Line. This process offers an assurance of quality control and may lead to investigations of documentation, certified providers, and/or their environments of care. Grievances may remain anonymous, and can also be submitted via fax or email to include all relevant details.

OCS collaborates with The Arc of Mississippi on SPOTT, which has been developed over the past two years to support people who have required treatment in inpatient programs on multiple occasions. The team links people with additional services in the community to help them remain successful in their recovery.

It grew out of services offered through The Arc of Mississippi, and was associated with services for intellectual and developmental disabilities, but has since grown to include mental health services. Members of the SPOTT team come from a variety of backgrounds and agencies. There are private providers, but also state agencies such as the Division of Medicaid, the Department of Human Services, and Vocational Rehabilitation.

Since its inception in late 2013, it has served 352 people in finding placement for needed person-centered services. “SPOTT has been an excellent way to provide community services to people who have historically required inpatient treatment on multiple occasions,” said Veronica Vaughn, OCS Director.
Congratulations to Melody Winston, who took over as Director of the Bureau of Alcohol and Drug Services at the Department of Mental Health in September.

Winston has worked for the department for the past 17 years, having previously served as the Division Director of Substance Abuse Prevention and Treatment Services in the Bureau of Alcohol and Drug Services. She is filling the role vacated by Mark Stovall, who left DMH to continue to pursue his passion of providing alcohol and drug services in the private sector.

Winston has extensive experience with overseeing a number of federal grants. She served as Senior Project Director for the Strategic Prevention Framework 2015, was the Senior Project Director for the Strategic Prevention Framework II, managed the State Prevention Enhancement Grant, and annually develops the prevention portions of the Substance Abuse Block Grant.

She is currently a member of the Mississippi State Drug Courts Advisory Committee and has served as the state representative for the National Prevention Network for the past four years. Winston received her Master of Science in Community Counseling from Mississippi State University in 1994 and is a Certified Public Manager, Licensed Mental Health/Mental Retardation Administrator, Certified Mental Health Therapist, and a Certified IDD Therapist.

She lives in Madison, MS with her husband Mike and their three daughters, Baylie, Kaysie, and Mary Grace.
CHOICE is Making Housing Affordable

A partnership between the Mississippi Department of Mental Health, Mississippi Home Corporation, the Division of Medicaid, and the state’s 14 regional Community Mental Health Centers is helping to make housing affordable for people living with a mental illness.

In Fiscal Year 2016, the Mississippi Legislature appropriated funding to establish this partnership, now known as CHOICE – Creative Housing Options in Communities for Everyone. The program was developed over the fiscal year, and found housing for 48 people in the communities of their choice during that time. While CHOICE provides the assistance that makes the housing affordable, local Community Mental Health Centers provide the appropriate services, all based on the needs of the individual. It is currently being piloted in Regions 3, 4, 8, 12, and 14.

“Our role at DMH is to make sure people are supported and successful in their homes,” said Veronica Vaughn, Director of the Office of Consumer Support/Community Living. “Everyone who is referred to CHOICE uses the same referral form used by SPOTT in our office, which helps us ID the services that are needed.”

SPOTT is another partnership of state agencies and other providers that works to connect each person to all of the specialized services they may need. Using the same referral form helps guarantee that CHOICE is not only getting people placed in the communities they prefer, but close to the services they need.

“Everyone is given a pre-screener, and that’s how this all starts,” Vaughn said. “We meet with them, talk about where they want to live, and what services are needed. For instance, if they need a PACT team, that’s the most intensive service offered in the community, so we need to make sure they’re able to get that.

Referrals come through DMH or a Community Mental Health Center, and Mississippi Home Corporation provides a housing voucher that helps individuals pay their rent. The number one priority is to provide assistance to people who are being discharged from a DMH program after a treatment period of at least 90 days.

Other priorities include people who have had multiple hospital visits in the past year, who were arrested due to conduct associated with their mental illness, or who have had multiple periods of homelessness in the past three years.

DMH has also partnered with Muteh, inc. – Mississippians United to End Homelessness – to track data related to homelessness and the effects of programs working to prevent homelessness. The data collection and reporting are vital in evaluating practices in the community and gaps that may exist in the system. Besides its use in CHOICE, this data can also be used in an ongoing federal grant, the Coalition to Benefit Homeless Individuals. The research and the data gained can aid in developing blueprints as the state continues to build its capacity for community-based services and supports.

“There are people coming out of our hospitals, and we are linking them to services in the community,” Vaughn said. “This is all very person-centered. There is not one decision made that is without the individual’s input.”

“This is going to be a big project that will be taking place over several years.”
Supported Employment Brings Jobs to 108 Clients in FY16

The process of recovery is different for every person who has a mental illness, but there are several major dimensions that can help support recovery no matter the person. Those are health, home, community, and purpose.

Purpose includes meaningful activities, such as school, volunteering, caretaking, creative endeavors, or employment. To help provide a purpose for people in recovery, the Department of Mental Health has funded four pilot sites through appropriations by the Legislature, with four more to come funded through a federal grant, that are providing Supported Employment for people in recovery from a serious mental illness. The pilot sites currently operating are in Community Mental Health Centers Region 2, Region 7, Region 10, and Region 12.

Over the past fiscal year, those four initial sites made 2,763 business contacts with potential employers, resulting in 165 job placements. As of June 30, 2016, 108 people remained employed across those four pilot sites, with job positions ranging from independent house cleaning and self-employed maintenance workers to cooks, restaurant employees, and mailroom clerks.

One of those people is Arsenio Brown, who has both a hearing impairment and a mental illness. He had been looking for a job for about a year, so he was excited to learn about the program. He began working in October 2015, not long after it started, and said he has been learning ever since.

“I was depressed and bored during the day because I couldn’t find a job, and I didn’t have anything to do,” Brown said. “But when I received the phone call for an interview I was so happy.”

He started out working as a dishwasher, which he did for several months before his dedication and hard work helped earn him a promotion to a cook. He said he was motivated to quickly learn how to be a good cook, and he knows working has been good for him.

“Since getting my job, I have been able to help the people in my life that depend on me. I have become more dedicated and hardworking,” Brown said.

His dedication and hard work were noticed by others as well. He was named employee of the month earlier this year, a far cry from the discouraged person who joined the Supported Employment program last year.

“He is more motivated and has a more positive outlook. It has been amazing watching his transformation over the last few months. This has truly been an example of how employment can serve an important role in someone’s life.”

Brown said it was incredible for him to be named employee of the month.

“It’s incredible news for me, and I’ve proved that deaf people can do things just as well as people with hearing,” he said. “I believe by doing what I am supposed to do and working hard, this has caused me to be successful in my job.”
DMH Deputy Executive Director MATT ARMSTRONG to Retire

Department of Mental Health Deputy Executive Director Matt Armstrong has announced he will be retiring from state service on November 30, 2016. He is leaving the department with almost 40 years of experience with DMH, having served as deputy executive director since 2014.

During his tenure, he has worked in early intervention programs, family support services, community services, and in intellectual and developmental disability (IDD) services. Over the past several years, he has been seen by his colleagues as being essential in transforming the system of care for people in need of IDD services.

“He has spent his career working to improving services for Mississippians with mental illnesses and intellectual and developmental disabilities,” said DMH Executive Director Diana Mikula. “He has always focused on the people who needed services, their families, and he has led the way to transform the state’s public mental health system to include more community-based care.”

Armstrong has always been an advocate for people and families to have access to services in a community-based system. He has worked with regional programs, private ICF’s, and IDD Waiver providers to create a person-centered system that allows more independence. His vision has helped hundreds of people with IDD transition to more independent environments in the communities of their choice.

“We wish Matt the best as he moves into the next phase of his life,” Mikula said. “He will be irreplaceable at the Department of Mental Health, but he is leaving behind a legacy that will continue to benefit Mississippians throughout the state for many years to come.”
The year 2016 brought with it a hallmark celebration at one of the Mississippi Department of Mental Health’s regional programs.

Boswell Regional Center in Magee celebrated its 40th anniversary this year, but that wasn’t the only reason 2016 was momentous for the program. It was originally founded as the Mississippi Tuberculosis Sanatorium in 1916, 100 years ago, by the Mississippi State Legislature.

The original architect was the German-born Theodore Link, who also designed the Mississippi Capitol, the campus of Louisiana State University, and buildings at the 1904 World’s Fair in St. Louis. He was interested in helping construct the sanatorium because two of his children had died from contracting tuberculosis. His design was modeled on another tuberculosis hospital in San Antonio, Texas, which is why some of the older buildings on the campus feature Spanish tile. Link’s involvement has led to a lot of archival and historical interest in Boswell Regional Center.

The original hospital was very much self-supporting, operating its own power plant, having water piped to the campus from the nearby McNair Springs, raising their own livestock, farming their old vegetables, and even operating its own fire brigade.

It was named in honor of Dr. Henry Boswell, the first superintendent of the sanatorium who led the program for 40 years. Dr. Boswell and his wife are actually buried on the campus, with his grave site known as the 19th Hole. The old hospital had a golf course on the grounds. Dr. Boswell could look out of his office window in the first floor of the old hospital and look across the lake and see the site he wanted to be buried. He called it the 19th hole.

In 1976, The Mississippi Tuberculosis Sanatorium became what is now named Boswell Regional Center and provides services to people with intellectual and developmental disabilities. The first director was Joe Earp, who oversaw the program until September, 1979. Subsequent directors were:

- Roger McMurtry – August 1, 1979 to December 31, 1979
- Clyde Woodruff – January 1, 1980 to May 1, 1984
- Dr. Paul Cotten – May 2, 1984 to July 31, 1992
- Dr. Suzie Lassiter – August 1, 1992 to July 1, 2000
- Raymond Johnson – August 2, 2000 to June 30, 2012

Today, Steven Allen is the current director of the program, which serves around 375 people in need of services. Its motto is “Where dreams can become reality.” Its employees are dedicated to helping the Mississippians served there make that motto become true. As a matter of fact, one employee, Ronald Britt, is so dedicated he’s worked there since November of 1977, almost as long as the center itself has been operating.

It is one of five regional programs in the state operated by the Department of Mental Health to treat people who have intellectual and developmental disabilities. The main campus is located off of Highway 49 in Magee, but it also operates other facilities in Mendenhall, Brookhaven, Wesson, and Hazlehurst. The program options are designed to identify the supports necessary to allow the people served to successfully transition to their own communities.

Boswell Regional Center has undergone many changes over the past 40 years, including the addition of new buildings constructed on the campus in 2010, but there has been one constant over the decades – the dedication for each and every person served to be happy, healthy, safe and, most of all, for their dreams to become reality.