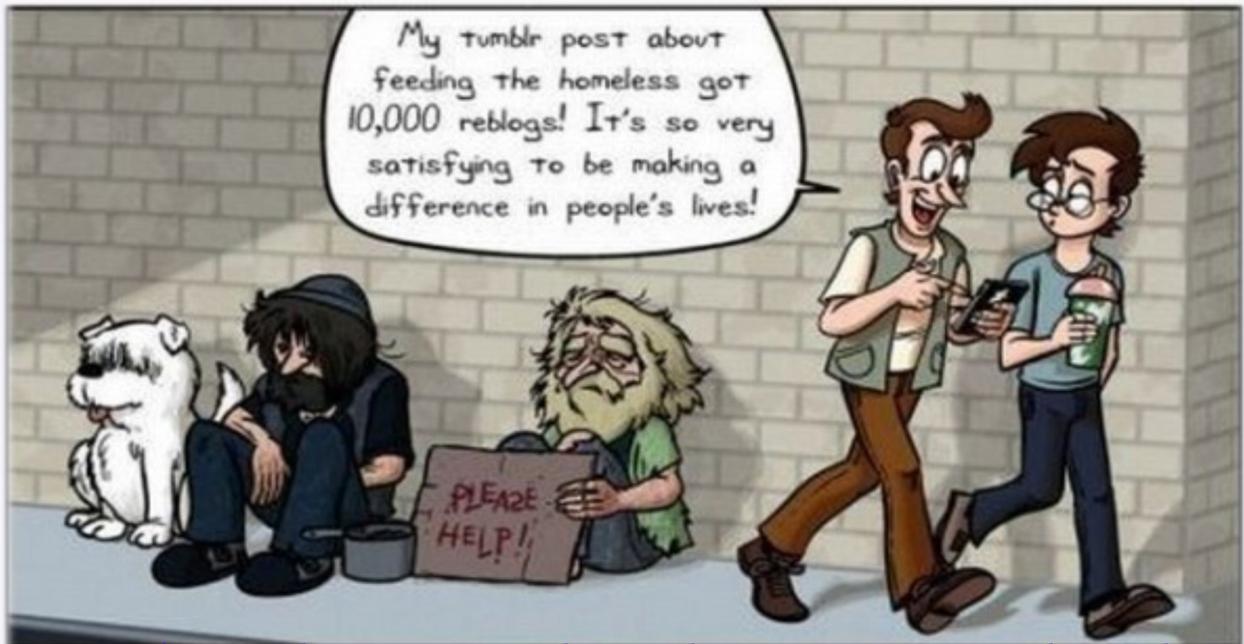


CHANGES...

JANUARY 1, 2017

BEHAVIORAL HEALTH SERVICES NETWORK

VOLUME 6 ISSUE 1



Annual survey on homelessness at month-end

A survey that captures one night of homelessness is slated for Wednesday, Jan. 25 in each of the five Mid Shore counties. The Mid Shore Roundtable on Homelessness, a collaborative group focused on the issues of homelessness for Caroline, Dorchester, Kent, Queen Anne's and Talbot counties, is preparing to conduct its annual Point In Time Survey for 2017. Volunteers will gather demographic information on individuals and families suffering from homelessness. The count is just one night to capture the most accurate data. Information gathered is de-identified and then reported to the Department of Housing and Urban Development where it is then examined at a national level. This data is also used to illustrate the growing need for services for individuals and families affected by homelessness in our region.

This year, with funding from the Maryland Department of Housing and Community Development, the Mid Shore Roundtable will hold four Point In Time Events. The four events will be held from 9 a.m. to 3 p.m. at Delmarva Community Action Center in Cambridge, Maryland; Haven Ministries Community Resource Center at St. Paul's Episcopal Church in Centreville, Maryland; St. Vincent de Paul in Easton, Maryland; and, in partnership with Caroline County's Caroline Cares Community Resource Day, at St. Luke's Methodist Church in Denton, Maryland; Volunteers survey homeless individuals and families at all events. Refreshments will be available and incentives such as hats, gloves, socks and food gift cards will be offered to survey participants. Volunteers also will connect participants with needed resources.

In an effort to count any homeless individuals and families that may not be able to attend one of the events, volunteers will also be working in pairs to canvas homeless encampments in the five county region. That night, service providers, faith-based organizations, county offices, and additional volunteers will administer a brief survey to homeless individuals and families. Most evening surveys will be collected in our area's cold weather emergency shelters and from our community service providers.

It is hoped that through the survey, individuals and families affected by homelessness will not only be counted but will be linked with all services they may need in order to help them overcome homelessness.

The Mid Shore Roundtable on Homelessness wants this process to bring awareness to the community of the ever growing need of services for individuals and families affected by homelessness. For additional information about the Point in Time Survey, or the Roundtable on Homelessness please contact Continuum of Care Coordinator Jeanine Beasley, at 410-770-4801 or jbeasley@midshorebehavioralhealth.org.

Learn how best to help homeless individuals at <http://webuserblog.com/?p=4862>



Our Mission

To continually improve the provision of behavioral health services for residents of Caroline, Dorchester, Kent, Queen Anne’s and Talbot counties through effective coordination of care in collaboration with consumers, their natural support systems, providers, and the community at large.

Our Vision

A rural behavioral healthcare delivery system that is clinically and culturally competent. This system will ensure access, have a community focus, be cost-effective, and be integrated to serve the community as a whole.

WHAT IF YOU SIMPLY DEVOTED THIS YEAR TO LOVING YOURSELF MORE?

Crisis services survey

A survey has been designed by Maryland’s Behavioral Health Advisory Council (BHAC) to help inform a strategic plan for ensuring the 24/7 availability of behavioral health walk-in and mobile crisis services. This stems from Coalition priority legislation, SB 551, enacted earlier this year. Hundreds have responded, and the input has been invaluable. However, the BHAC wants to make sure that it has heard from all who touch the behavioral health system, including providers, consumers and community members.

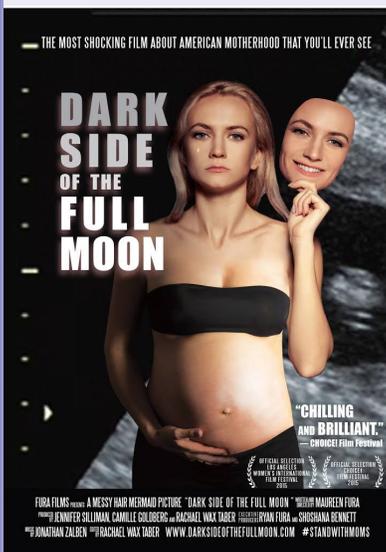
The BHAC is particularly interested in hearing more from the following:

Historically under-represented communities (people of color, ethnic/racial minorities, LGBTQA, bilingual, Latino); Emergency Management System (EMS) professionals; substance use disorder treatment professionals; judiciary and other criminal justice communities including state’s attorney, parole/probation, public defender and pre-trial release; and geographically isolated county representatives, including people working in local health departments and health enterprise zones. Please take the survey, encourage others to take it and share it via social media. Find the survey at <https://www.surveymonkey.com/r/YQYXNRQ>. The survey closes Tuesday, Jan. 31.

‘Full Moon’ documentary explores maternal mental health

A screening of the film “Dark Side of the Full Moon” is 6 to 8:30 p.m. Jan. 19 at St. Christopher’s Catholic Church, 1861 Harbor Drive in Chester. The film delves into the unseen world of maternal mental health in America. It uncovers the disconnect within the medical community to effectively screen, refer, and treat the 1.3 million mothers affected each year, giving a face and voice to the countless women who have suffered in silence. The screening is co-sponsored by the Mental Health Association of the Eastern Shore and Health New Moms, a Lutherville-based education and advocacy agency. The film highlights inconsistencies of care, questioning the system and doctors as well as ourselves, asking who should be held accountable for the staggering number of women still suffering in silence, facing barriers to treatment, where professionals and the general public lack of knowledge when mixed with fear can create fatal consequences. Those interested in attending the free screening may register at <https://www.eventbrite.com/e/dark-side-of-the-full-moon-screening-st-christophers-catholic-church-tickets-30464683689>.

Learn more about the film at <http://www.darksideofthefullmoon.com/the-film-1/>





Mental Health Association
of the *Eastern Shore*

Regional Mental Health Association changes name

The Board of Directors for the Mental Health Association in Talbot County voted in October to change the name of the organization to the Mental Health Association of the Eastern Shore, effective Jan. 1, 2017.

“It was time for this change. Our programs, advocacy, and educational activities have taken place throughout all counties on the Eastern Shore for quite some time,” said Board President Hope Fulton Leuchter. “We believe this change will more adequately reflect who we are and who we represent.”

The Mental Health Association has been in existence for 58 years in Talbot County; it was originally formed by Talbot County families who at that time had loved ones in state psychiatric hospitals. With the closing of these hospitals and more and more loved ones returning to their communities, mental health associations formed to support these families and to ensure their loved ones received the community supports necessary for a successful transition from hospital to home. Today, many Mental Health Associations are more focused on education and advocacy efforts to defeat the stigma often associated with people suffering from mental illness.

“Education is the key to the way we address mental illness. That’s why our mission will not change with this name change,” said Executive Director Jackie Davis. “We remain dedicated to promoting mental health and behavioral wellness with education and advocacy for everyone on the Eastern Shore. The name change just makes sense for us at this time.”

The Mental Health Association of the Eastern Shore invites you to visit their website, www.mhamdes.org, or join them on Facebook at Mental Health Association of the Eastern Shore to learn about upcoming events.



Area provider meetings established

In an effort to encourage collaboration among area health departments and mental health and substance use disorder providers, Mid Shore Behavioral Health has begun to schedule county-specific provider meetings.

The hope is to eliminate barriers for consumers who seek treatment and too often have to navigate unfamiliar systems of care as well; communication among service providers may improve behavioral health care as each become aware of various services offered. Providers also gain education about access to obtain treatment for individuals who are uninsured and underinsured. Currently, provider meetings have been convened in Caroline, Dorchester and Talbot counties.

While many providers serve multiple counties, each county may have different policies pertaining to treatment and access to care coordination, which provides additional funding for people engaged in substance abuse treatment.

The state requires that all individuals receiving state-funded level III treatment also be linked to care coordination through respective health departments. The coordinator links clients to resources such as recovery housing, peer support and other relative resources.

Upcoming provider meetings are scheduled as follows:

Caroline County — 1:30-2:30 p.m. Thursday, Jan. 12 at the Caroline County Public Library in 100 Market St. at Denton.

Dorchester County — 12 to 1:30 p.m. Friday, Jan. 20 at Affiliated Santé Group’s Eastern Shore Crisis Response Center at 505 Bryn St. in Cambridge.

Talbot County— 1 to 3 p.m. Wednesday, Feb. 1 at Talbot County Department of Social Services at 301 Bay St. in Easton.

Those interested in attending the meetings or learn more about services in a specific county may contact Mid Shore Behavioral Health at 410-770-4801.



The lizard inside

Like a reptile lodged within me,
paranoia hatches unbelievable
conspiracies that my mind
embraces with stunning naivety



Hatred is different from paranoia. Hatred can engulf a nation in a millions-strong frenzy of self-righteousness. Hatred can be held by one person all the way to the grave. It can be suddenly relinquished (sometimes beautifully); or it can just wear itself down like an overused axe blade.

Paranoia, on the other hand, is a matter of self-defense: it assumes malice on the part of the other. *My department chair, Torrone, wants to fire me. He's planted a graduate student in my Latin class.* I'm thinking primarily of schizophrenic paranoia, such as my own. It is a red-hot drive that inhabits an individual and feels like it wants to take over his mind. When I'm paranoid, I travel on the horizon's edge, the line between all and nothing, between 'them' and me. *That student is to observe me, to report back to Torrone.* I travel that edge alone. Aloneness is of the essence. Paranoia has nothing to do with loneliness which, after all, seeks union. And it's seemingly forever. Paranoia doesn't dissipate, run down, run out of steam. Logic is almost always pointless against it: I can no more will my paranoia away than I can will my thinking straight. *Just yesterday I saw Torrone, out walking, all these years after the incident. I ducked down a side street.*

And paranoia is far more complicated than hatred. That's because paranoia is a whip-snapping combination of anger and fear. It's often a reaction to a perceived slight – one that suddenly seems to hide a conspiracy behind it. A conspiracy involving distant relatives, creatures from outer space, even God. Paranoia hatches involved, unbelievable, soap-opera-like plots that the mind readily embraces with stunning naivety. Paranoia is sneaky, secretive; it hides inside, often known to the paranoid individual alone. Thus its expression sometimes comes as a complete surprise to others. It can be like a crocodile lying low in a watering hole for hours, only its nostrils showing, until with great splashing and lunging it suddenly takes down a water buffalo – or a gazelle. Starting out as fear of another's malice, my paranoia morphs into layers of anger over fear, over anger over fear. It doesn't occur to me to question the validity of the malice or the appropriateness of my reaction. I don't recognize that the problem is largely inside me, that I'm projecting it onto someone whom I've judged out to get me. I have signs on the bulletin board behind my computer, to alert me at just such a time: ANGER IS A SYMPTOM and ASSUME THAT IT'S PARANOIA. But in the heat of the moment, I find the idea that I might be paranoid, well, ridiculous.

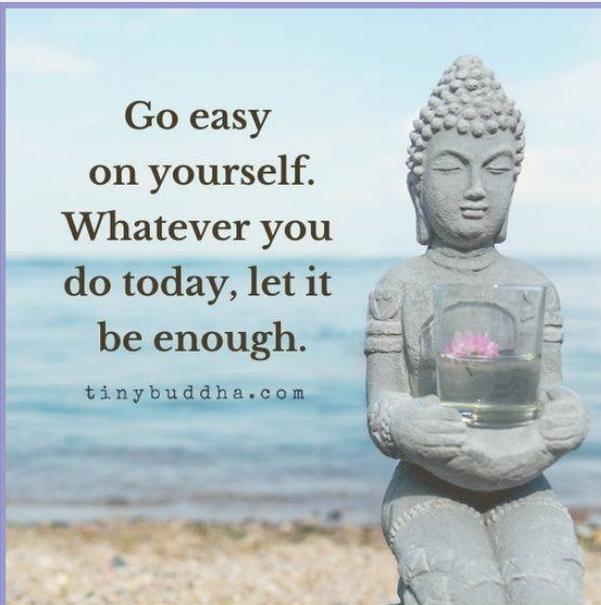
Words, tones of voice, facial and bodily expressions, apparel, any way at all that humans seem to be communicating, are at the heart of it. Of course, it's never possible to understand another's modes of expression perfectly. We all mishear, misread and misview to some tiny or huge extent. So we're all sometimes confused, miffed, frightened. Some of us solve the problem by crediting good intentions to the other. Some of us ask for clarity. Some hold a simple grudge that will likely fade. Some misinterpret through habits of sarcasm and cynicism. A few of us become paranoid.

Read this entire article at https://aeon.co/essays/what-it-is-really-like-to-suffer-from-schizophrenic-paranoia?utm_source=Aeon+Newsletter&utm_campaign=ab3763091d-EMAIL_CAMPAIGN_2016_11_21&utm_medium=email&utm_term=0_411a82e59d-ab3763091d-68651277



January 2017

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|---------------------|--------------------------------|---|---|-------------------------|-----------------------------|-----|
| 1 New Year's Day | 2 MSBH Closed | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 BHSN Crisis 1:30 -2:30 | 10 Roundtable on Homelessness 1:30 Consumer Council 3-4 @ CVI | 11 | 12 BHSN C & A 3-4 | 13 | 14 |
| 15 | 16 MSBH Closed MLK Day | 17 | 18 | 19 | 20 BHSN Forensic 9-11 | 21 |
| 22 | 23 | 24 | 25 BHSN Quarterly 10-12 TC DSS PIT survey 9-3 | 26 | 27 | 28 |
| 29 | 30 | 31 | | | | |



Go easy
on yourself.
Whatever you
do today, let it
be enough.

tinybuddha.com

Talbot County's Neil Edwards retires

Cornelius "Neil" Edwards has provided substance use disorder treatment in a variety of treatment settings throughout the Mid-Shore over the course of his career. But at year-end, Edwards left the Talbot County Addictions Program (TCAP) in pursuit of retirement. He has been licensed as a drug and alcohol counselor in Maryland since 2001 and has assisted many individuals, families, groups and organizations with addressing substance use concerns and finding ongoing support within their communities. During his time with the Talbot County Health Department, Edwards served as the clinical supervisor and director of the TCAP including overseeing tasks as the Local Addiction Authority for the entire county. He has represented the Health Department in a liaison capacity with officials and other agencies in an effort to enhance the health and well being of the citizens of Talbot County.

Edwards has been a wonderful asset to the Health Department, his hard work and dedication have been a very important part of our team, and we would like to wish him all the best in his future endeavors. Colleagues thank him for all the laughs wish for him that, "life always bless you and find you happy and healthy."

Mid Shore Behavioral Health is located at 28578 Mary's Court, Easton, MD 21601. You are invited to join us in our work to improve services on the Eastern Shore by joining the BHSN workgroups, Email kstevens@midshorebehavioralhealth.org for information.