New Community Opportunities Center at ILRU presents: Building an Effective, Comprehensive CIL Youth Program

April 10, 2012

LIFE of Mississippi Youth Programs and Services Overview

Christy Dunaway and Augusta Smith; Judith Holt

>> JUDITH: Now we'll have the Mississippi crew kind of roll up here. And I think from what you've heard Kim and Annie discuss, it's really clear that you look at the list of funding streams. You looked at the list of different types of services. Again, as I said before, this isn't a one size fits all. You need to adapt, adopt, look for strategies. I mean you can do a lot with $8,000. Especially if it comes in every year and you know it's coming in. I really appreciate the flexibility and the number of different sources and partners and activity that is we're doing.

We'll be hearing from Mississippi as soon as they get mic'd up. Where is the paper I was passing around? Make sure your E-mail address is correct. Where did that end up? Keep it moving. That would be great.

When we were meeting as presenters last night, we were kind of discussing different things to remember. So we decided that Christy would be the most challenging. Christy talks fast and has a southern accent. But I'm sure y'all will be able to understand her just fine. Christy and Augusta.

>> AUGUSTA: I'm an interpreter's worst nightmare I apologize. I'm Christy Dunaway and I'm the Executive Director of living independence for everyone of Mississippi.

>> AUGUSTA: My name is Augusta Smith and I'm the assistant director of life conditions of Mississippi.

>> CHRISTY: Let me start by saying that life of Mississippi is -- we're very unique compared to most other centers for independent living in the country. In fact, I think that we now may be the only center that operates this way.

We're one center for independent living in the state of Mississippi. We don't have three or four or 20 or 30. Close your mouth. We are one center. That's the way we were established in 1993.

We have six offices throughout the state of Mississippi. So all the funds flow into, you know, like the state office in Jackson and then it's distributed out from there.

Now, we've had our battles over the years with powers that be that have said that's not really practicing independent living. Well, we've tried really hard in the state to convince our offices to become private nonprofit and go after some of the federal funds.

Well, their attitude about that is why should we do that? You're handling payroll and you're handling the A. 133 audit every year, you have to worry about the money and we don't want to do all that. We just want to serve.

So that's our challenge that we've had over the years. And whether you like it or not, the bottom line is that it works in Mississippi. It works for us. And I believe -- and I think Augusta would agree with this -- that we can provide a lot more service the way we are set up right now. We actually get surprised when we talk about -- when we hear about other centers that are really in like a metropolitan area that are serving two or three counties. And we're like, wow, really?

Because this is the way we've been doing it for so long. Again, we were established in 1993. And it was after the reauthorization of the Rehab Act. Unfortunately, Mississippi until recently has not been frontier driven. So they had to wait until the Rehab Act was reauthorized in 92 before we started even thinking about centers for independent living on a private nonprofit level.

So our organizational chart, you'll see the most important thing and the largest thing you see on that chart is the independent living consumers, the people that we serve. And it's down there at the bottom, but you see the big arrow.

We have -- of course we have a board, all of our board members are individuals with disabilities with the exception of two and those two are parents of children with disabilities or in some cases adult children with disabilities.

We have an executive director. We have an assistant director and while I'm the executive director, Augusta tells me what to do. I just go into the office every day and they say here is what you're doing today.

We have a current budget of 1.452 million. You can see our core independent living grant is 159,000. And that does cover the entire state and it operates all six of our offices.

Only it's not all that we need in order to function and to provide services in different ways, so we have a total of about 12 sources of funding throughout the state. We have 426,000 in grant and contracts. We have another 30,000 in United Way funding. We have about 54,000 in private foundation funds, 58,000 in partnerships, and I'll explain that later, and then we bring in about 25,000 in fund-raising events each year.

We have six offices as I mentioned. We cover the entire state. Tupelo is in extreme northeast Mississippi. Greenwood is in the delta area of the state. Jackson of course is centrally located, and that's where our state office is, M\_c\_Comb is in southwest Mississippi, hat tease burg is in South Central and Biloxi is on the coast. Cindy is an independent living transition specialist in our Biloxi office.

We started our youth program called healthy opportunities for transition in miss many years ago. Healthy opportunities is -- we shortened that to hot because we're hot in Mississippi. Right?

I was really proud of that acronym when I came up with it. So y'all can laugh. I mean, you can clap for that acronym because I was proud of it when we came up with it.

[APPLAUSE]

>> CHRISTY: I thought the acronym hot for young people was really cool at the time which really just probably shows you my age. Because somebody says the first presenters a minute ago -- I think it was Kim or Annie said you crossed over or something as an adult ally. Yeah, that was 20 years ago for me.

So we were originally -- when we first got started with our youth program, let me back up just a minute and give you a little bit more history that will help you understand a little bit better.

When LIFE was created ((Laughter)) I love saying that. When life conditions was created, we had an extraordinary advocate in Mississippi by the name of mark Smith. And mark was -- actually nationally known for his work with Justin Dart and he was the director of the coalition for citizens with disabilities which was created when Justin went all over if country back in the late 80's trying to get the Americans can disabilities act passed and is there anybody in the room old enough to remember that? Okay, good.

So the coalition for citizens with disabilities in Mississippi was created back in the late 80's by mark and basically what he did was he brought all these different disability organizations together. As in many states we had probably 100 really. You had the coalition for the blind. You had the Mississippi center for deafness. You had the cerebral palsy foundation and the Down Syndrome society and all these different ones. And mark coalesced them all into one -- they maintained their own independence, but they were all coalesced into the coalition for citizens with disabilities. So it was the coalition, mark Smith and the Board of Directors of the coalition who applied for the funding, the Title VII Part C funding that created LIFE of Mississippi. Then we were immediately our own 501(c)(3). And the coalition stayed in operation and we were housed together for the first several years.

I'm slowing down for you. And so we were housed together for the first several years and so mark, he actually went after the original funding for our youth program. And LIFE did not have the contract, but we served as the coalition's network around the state. So they used our offices and all of our staff throughout the state to serve as their big network to get service toss people all over the state. So the contract was actually directly between the coalition for citizens with disabilities and he RSA. Health whatever leersa stands for these days.

That's where the original money came from and LIFE simply was like a subcontract. That ended in 2005. That funding ended in 2005. Well, by that time mark Smith had passed away and the relationship between the Center for Independent Living and the coalition for citizens with disabilities had -- we had become our own entity more and more over the years.

So we applied for the he RSA money and we didn't get it. However, the state department of health did. And they turned around and contracted it back out to us to provide services to young people with disabilities.

So the whole purpose of healthy opportunities for transition in Mississippi was to establish a strong and responsive system of transition services for Mississippi's children who had special health care needs and their families and bring together all these diverse groups and individuals and build good community infrastructure and result hopefully in successful transition.

Now, everybody has their own definition of transition, right? Transition means a number of things. You can transition from an institution back into the community. You can transition from hospital to post-secondary education. You can transition from kindergarten to first grade, right? So everybody has their own definition of transition so for us in Mississippi, transition is essentially everything. It's transitioning from one stage of life to another. From one phase of your life into another. It might be kindergarten to first grade. It might be middle school to high school or high school to post-secondary ed or to working.

So transition for us means everything. We are trying to provide comprehensive services throughout the state that are family-centered, that are culturally competent, that have a primary focus for us on health and prepare our children who have special health care needs to be successful in their life in the community and that primarily includes adult health care. And we're going to talk about that a lot more tomorrow in our presentation tomorrow. Desmeon and I will explain to you what we mean about adult homes and health care. We believe that's highly important and the reason that we have that very specific focus is because our money is coming from the state department of health now. And they want that to be our focus. And you know you typically have to do what the money people say that they want you to do. But we wouldn't do it -- wood e never compromise our principles and we wouldn't do it if it wasn't something we really, really believed in.

Our objectives for healthy opportunities are to serve young people between the ages of birth and 21 years old who have special health care needs and we provide them with whatever services are going to help them be successful in their transition. And we have the four core services and Augusta will talk about that in a minute.

All of those services include the four core as well as any other type of independent living service that we need freeway. We also -- our families of children with special health care needs receive training and ongoing support. And again this is something else that we're going to go into in more detail, but we could not make this work if we did not have really strong partnerships with both the family to family center in the state. The state department of health and our university affiliated program in Mississippi known as the institute for disability studies.

and we've been around for a long time, and we have developed really good strong working relationships with the director of all those programs. And so we could not do all the work that we're doing as well as I think I believe that we're doing it in we didn't have those really strong partnership was those ent substituents in the state. And we're going to get into later -- a little bit later exactly how you guys can develop those relationships with those people in your state, too. The bottom line is you can't provide a good quality of service if you don't have the funding behind you. Right? So I believe really that the funding is out there. It's just a matter of you finding it. If I can find it in Mississippi you can find it in your state, trust me.

So I'm going to give you one quick -- well, I can do that tomorrow when we talk about medical humps, but I have a personal reason for being so interested in medical humps and I'll tell you real quickly. I've noticed in Toledo that when you started in 1920 you were called crippled children, crippled services, something like that. Well, we had the same thing in Mississippi all the way until 1987. It was called the crippled children's services in the state. And I was a product I guess of that. I was born with my disability and my parents fitted me with my prosthetics at a very young age, like six months of age.

and I got all miff prosthetics through the children's medical program which used to be called crippled services or whatever. I got all of my prosthetics through the children's medical program until I was 21 years old. And then when I was 21 years old I could no longer be seen at children's medical program because I was no longer a child. So then all of a sudden it was like -- oh, what do I do now? Where do I go? Who do I see? You know, can I continue to use the same prosthetic company that I've been using my entire life? What do I do? And there was nothing. They did not discuss it with us. They didn't give us any suggestions or any kind of advice or guidance, and I was fortunate enough to have an orthopedic surgeon who really cared about me. He was not a pediatric orthopedic surgeon fortunately. So he was able to continue seeing me and over the course of the next few years he and I talked and he helped me to find what we would now call a medical home which is a general practitioner who knows me, knows my disability, knows how it affects me, understands the secondary complications that I have now or may face in the future, can make those referrals out. And so a medical home is kind of close to my heart and so Desmeon and I will talk a lot about it tomorrow. So at this point I'm going to turn it over to Augusta to go through the activities of healthy opportunities for transition and then we'll finish with a few minutes to spare so we can take some questions from y'all.

>> AUGUSTA: Hello. I'm going to tell you right now that I'm add, seriously. So I probably will not follow the PowerPoint the way Christy would prefer me to, but please work with me and my disability because she's an interpreter's worst nightmare and I'm the PowerPoint killer.

So please bear with me as I go through this. A little bit of my background is as you can see I'm an adult and I have an adult child which means I guess I'm one of those old allies now, but I have an adult child with a pretty specific learning disability. So that's how I got involved with this. I got involved because I'm not one of those parents that really want my child to stay at home. I was trying to find a place where I could put him out and he could move. So that's where I come from.

I'm not one of those really protective -- I see these really protective parents and it's just so cute because I really wanted my child to get out and stay out.

I got involved with this -- [APPLAUSE] -- that's how I got involved with this and I'm kind of animated so bear with me as I go through this.

We have our core services which I'm sure that everyone is familiar with, but I kind of go through this to let you know how at the hot program we kind of program these services and like Christy said we're pretty unique in Mississippi. We have kind of a really creative way to be able to serve a whole state. I saw her mouth drop when she said we serve the whole state, but I think we do a pretty good job because Christy says she surround herself with pretty competent people and that's one of the ways we get our services provided.

Our main core service that we're really proud of is our peer support. We have a really, really good group of young advocates. As you can see, Cindy and des who is part of our healthy options for transition program, they are still young and they can peer support with young people that are actually going through the things. They can actually remember not being able to get their locker open in junior high which can be a big issue for some kids when they are being able to transition from elementary school to high school.

We as we get older kind of forget that those things can be important. So we surround ourselves with young people so the things that they can talk to a person about with the peer support. I would not begin to try to peer support with someone who is a (inaudible). I wouldn't begin to start doing that. I can turn to Cindy and they did get a person through that. So we make sure that we have the right type of person to peer support with an individual and we also have group peer support where we can kind of come in. We have a lot of times on Saturdays, des can have a group of guys come in and sit around and talk. I don't stay in the roam. Cindy doesn't stay in the room. We listened at the door and let them say what they are going to saned go through it. That's the kind of way we do things.

As things come up, we don't just pop up and do things, but we plan it, but we listen to what our young people have to say. We do listen to what they want. We listen at the crises going on in their lives so we can make sure we're peer supporting on what they need to hear and not what we think they want to hear.

Information and referral is just that -- I'm not going sit here and tell you how we refer people. If you have some information and you know it, Christy was talking about a list of people that we have good collaboration with. If we know about a program, we don't hold it on to ourselves. We get kind of protect representative of things. That's not serving your adults. If you don't want to spread the information, we want to make sure that everyone knows about it so we can get the services that people need.

Skills training is just that. We find out what a person needs. We do have group skills training. We have people come in and the Americorps program that I will tell you about. If a person might not want to learn to you thou balance a checkbook or have problems with subtracting or adding. We can make sure we do that on an individual basis. We can bring somebody in and sit down and explain how you would do that. So it depends on what that person needs.

Advocacy -- we are -- we are very fortunate that we have a very vocal executive director. She'll not tell you that she's probably one of the most well known people -- it's the hill in Mississippi. It's not really a hill like the capital, but it's our hill. And we're really proud that she's known there so we can actually go out and do some systems change. And we also can go out and we can -- we're fortunate enough that we can have our mini protests and things like that. And are teaching young people how to go out and advocate.

We are really proud of the fact that some of the programs that I can tell you about -- we have an a merry Corps program which is young people and they are involved. Cindy and des were a part of the a merry Corp. program. The main part of the program was to transition people out of institutions, but they also have other goals and objectives. And the way we kind of get into schools and things, we use people a lot. We have children that are in a school or we have a parent that teaches at a school, you know, all the activity perseveres that people have to have. We take our members in and they do skits. And the young adults love the skits. And we were surprised that the teachers actually loved the skits. And what we do is the AmeriCorps members take things that happened to them every day situations and they turn them into little things that are funny, that are cute. We can do people first language. We use words that are no longer used any longer.

We have one that is called I am not a coat rack where people kind of throw a coat on a person. We have a restaurant scene where I get to play trixie which is the rudest waitress that you will ever get to meet in your whole life. It starts conversations and every time we leave the school, guess what, we end up with a consumer. Somebody is going to come up and say well we have this person that needs this and we have this person that needs that. So that's how we can build our consumer base.

We also a very -- have a very, very active youth advisory council. Our advisory council is not as you would say a council they kind of meet and say this is what we want. No, they will tell me exactly what they want the hot program to look like and I know that I have to follow their directions. And I have to say that as an older ally or whatever they calling us these days that we have to be able to step back and listen to what young people are saying. Be able to follow their directions.

It would be really easy for me to say, no, we're not going to do that, but I have to realize that they are the ambassador council and they are tell me what they want me to do.

When we plan our healthy opportunities for transition retreat every year, we have it from ages 14 to 21 and we have about 25 young people that come out and they spend the night. And most of these young people it's the first time they've ever spent the night away from their parents. So it's usually very interesting because the advisory council plans the activities and they also plan the parent retreat which is going on at the same time.

Which givers the parents an opportunity to be able to for the first time spend the night away from their young adult. When I tell you that the advisory council plans everything, they plan the meals. They plan all the activities. They plan what the parents want to hear, what they want the parents to hear. Last year it was really interesting because these young adults were in tune enough to realize that their parents were stressed. So they wanted a nurse to come in and give their parents the blood sugar glucose test, the high blood pressure tested, they wanted them to be able to go to the movies and what is interesting is one of the men that was there, the fathers that was there ended up being so -- his blood pressure because so high he ended up having to leave that next Monday and go and get on blood pressure meds. These are things our kids are telling us and they realize that.

It's also very interesting when they want their parents to know about sexuality and things like that, the parents are saying no we don't want to talk about it. But if kids are saying, yeah, they need to hear it because guess what, I'm going to have sex. So these are the things that we listen to them. We listen to what they are talking about.

One of the new things we're talking about now is sibling support. We are kind of realizing that as we're moving into a full range of inclusion, we want to make sure that our kids are no longer segregated off into nursing facilities. They are home. And there are issues they are having to deal W. my kids didn't like each other. My kids still don't like each other. They are 30 and 2827 and they still feet when they see each other. We have to realize these are things we have to deal with. Siblings have things they need to talk about.

One of the things we're going to have to work on this year and I'm really so excited that they invited the council, this particular summer the theme of the retreat is I'm an American, too. It's right before Memorial Day. They are going to bring vets in and they want to talk about vets -- they have questions they want to ask their servicemen. We want to bring somebody in to show them how they will use a voting machine. These are the things that they are interested in doing.

We have to make sure that we are listening to what the young people are saying, that we can follow their directions. I have no problem following directions. They are so excited when they get to the campground. The one parent that we always hear is going to say oh my child is going to cry, they don't want to be a bother. Those are the ones that can't wait for their parents to leave. Please leave.

Please don't come back. And we always have that one parent that's crying and Christy is over with the parents and they are over there having a party and having a good time. So this is the time they get a chance to be away from their parents. The parents get a chance to be away from their young adults. Once they get used to it, we have people applying far in advance trying to get to go to the youth retreat. These are the young people that wouldn't get a chance to go other camps because their disability is so involved. We have a staff of nurses for about 25 campers. We have between 75 and 100 volunteers. And the way you get your volunteers is if you go into the schools, like someone said, those young people need those service hours. When you go into the schools and they start asking about volunteering, when they come out to volunteer, then they want to be involved. Some of them do. Some of them don't, some of them do.

One things we realize is our members who have disabilities, they are the ones out there helping build those wheelchair ramps. So when you see a person or people with disabilities and they are out building and working and doing things, and plus we're hot in Mississippi so they want to be around us, right?

So that's how we provide some of our services. Christy and des will go over the medical home. We'll be talking about 504 and IEP's a little bit tomorrow.

Like I said I'm the nightmare for PowerPoint. I'm sorry. Do we have any questions? I told her I was add. She doesn't want to work with my disabilities.

>> CHRISTY: Am I on? You did blow that PowerPoint right out of the water. That's okay. You guys can look at the PowerPoint. One thing I do want to point out that our healthy opportunity specialists do is they've all been really very well trained on IEP's and 504 and IDEA, et cetera, et cetera. And they are one of the few people who will actually continue to go into the school with young people and their parents and sit through an IEP meeting and sever as an advocate. Now, we have parent training and information center in the state as I'm sure many of you do. It's a good V. it really is, but apparently they were asked too much or I don't know, I guess the resources were spread too thin, and they could no longer do the individual IEP meeting thing. And so they do more training as a group. And that's great. It's very, very needed and again our PTI center in Mississippi is really terrific.

Put there is still a need -- and let's face it, we're centers for independent living and our hot specialists are strong advocates. You've heard Cindy this morning and you'll hear des tomorrow. They are strong people and they are good at what they do. And so we don't hesitate to let them go to IEP meetings with students that if it's really needed to serve as their advocate.

on the other thing I wanted to mention that is on the PowerPoint is that I try and I hope I'm successful, I try and Augusta tries to encourage all of our employees with LIFE of Mississippi to serve on other boards and committees. We don't want to do this forever. In fact, I have every intention of retiring like in seven years. And so --

>> AUGUSTA: Six years and six months.

>> CHRISTY: So we want to be able to turn it over and the only way that that will ever happen is if you let go of the rope a little bit, let the young people in your centers begin to serve on boards and committees in the community, and speak for the center and speak for people with disabilities and speak for themselves. And it doesn't have to necessarily be youth-related. I know that Cindy you're serving on the transportation coalition down on the coast, are you not?

>> CINDY: Yes, ma'am.

>> CHRISTY: That's not necessarily youth related and so Cindy is veer vining on that committee. I encourage them and for that matter do I not only encourage them, it's part of our work plan for our 704 every year. And y'all -- does everybody know 2704? You know what I'm referring to. We're all centers for independent living for the most part. So yeah it's part of our work plan and our 704 report is that our staff need to participate on other boards and committees in the communities. And we encourage that.

and when I can, I encourage them to participate in other training and stuff when the travel funds are available for that.

We have just found that the way that we found our youth that we have hired as Augusta said was through our AmeriCorps program. Is everybody familiar with AmeriCorps and what I'm referring to the corporation for national and community service.

AmeriCorps is service to America. Essentially and the corporation for national and community service is a national program that they have three different branches I guess -- it's sort of like America's peace Corps. It's like our hometown peace Corps. There are AmeriCorps members. There are vista volunteers and then there are AmeriCorps vista. We applied for and received an AmeriCorps grant nine years ago now. And our intent with that grant was to help us transition individuals from nursing homes or other institutions and back into the community.

and so we have continued -- we've maintained that grant. We've been refunded each year and we have 20 AmeriCorps men's throughout the state of Mississippi. So we have like 30 staff members and then we have an additional 20 AmeriCorps members. I'm proud to say that we were the first center for independent living in the country that actively recruited individuals with disabilities to serve as AmeriCorps. And they --

[APPLAUSE]

>> CHRISTY: They have since that time since we were struggling to do it, they have since created a wheel disability bridge -- what's it called? Disability inclusion. Disability inclusion under national service. And so we continue to actively recruit members, people with disabilities to serve as AmeriCorps members. And we search for young people with disabilities to do this.

We want them to have the experience. It not only gives them the experience of working in an office setting, so it teaches them how they need to be dressed and working as a team in an office setting, but it also teaches them more about their own disability. Because they are young. So they learn a lot about their own disability. They are in a terrific mentoring skills training type setting. And we're using them to work for us, you know. So when they have completed their 1700 hours of service each year, they then receive an educational award that they can use to further their education.

and it's just a win-win situation for everybody involved. And I'll be glad to go into more detail with any of you about the program and how we got it.

but I have to tell you that des me on was an AmeriCorps member. Cindy was an AmeriCorps member. Fred disci up in our Greenwood office -- most all of our healthy opportunities staff were AmeriCorps members at one time. So it's a great recruitment tool for us in the center. Because we know after a year or two of them serving with us as AmeriCorps e members, we know whether or not, you know, that they've got what it takes to continue working for us in the center.

It's really a great tool for us to hire people.

I don't know what the time is or how much time we have left. We're good. As Augusta said, she skimmed right through her part of the PowerPoint. I'm happy to answer questions. I'm sure that there are some out there more specific about our center.

Really? Yes, ma'am.

>> AUDIENCE MEMBER: Hi, I can talk really loud though.

>> CHRISTY: No, use the mic. He's getting it for you. Hang on.

>> AUDIENCE MEMBER: I am Precious Putnam from Disabilities Network in Eastern Connecticut. In Connecticut we have five centers, but we all kind of have our own way of doing things. We have our own focus. So with your six offices, do you find that each office kind of develops their own way of doing something or that they specialize in a certain disability, for example? We have a lot of deaf consumers and a lot of our other IL centers in cop n don't have those kind of services. Do you find that to happen?

>> CHRISTY: That's going to happen and it's okay with us. In Mississippi the reg opens of our state is vastly different. The delta region is very poor. They compare Mississippi to a third world country and always have. And that's up in the delta. And then the Gulf Coast region there is unique things down there. I mean they have to be more prepared for disaster than anybody else in the state typically does.

and then in northeast -- so all of our six offices definitely have unique parts that they do. Basically we're all trained together. I make sure that I bring all the staff in quarterly for training. So we're all trained together. But yeah, they do develop sometimes their own unique style of doing things and there are certainly certain groups within the disability population that they might be better at serving and a lot of times that might have to do with the disabilities of the individuals in that office. At one time, we had a person who was hard of hearing on the Mississippi Gulf Coast and so at that time, you know, she had this large group of people who were deaf that she knew. And so we were probably serving more people that were deaf at that time down on the Gulf Coast. So, yes, that does happen, but one thing I've found is that being one center for independent living and being integrated to that degree and yet giving them enough rope to do what they need to do to serve their particular area, it works beautifully because I think that we're serving more people and we are looked at more often by potential funders because we have this large network. You know, they know that we can branch -- we can get anywhere we need to in the state. And they know that. They can see that because we have the six centers. And so we're looked at more favorably I think by funding sources because they know we have this big network.

>> AUGUSTA: and we use each other as referral sources. We can use each other like Christy said, if somebody called the Jackson office and they had a hearing disability, we could refer them to our specialists on the coals. I'm a parent, if a parent needs someone to go to an IEP meeting with them, I'll get that call if it's a specialist that's not really familiar with going to an IEP meeting. We use each other in our own network.

>> AUDIENCE MEMBER: You didn't say anything about one of your funding sources or sit a funding source any longer -- that you received money from the gaming industry in Mississippi?

>> CHRISTY: Yes, it is no longer a funding source.

>> AUDIENCE MEMBER: Thank you.

>> AUDIENCE MEMBER: to follow through or to complete that thought, whether it's the gaming industry or not, two things: How do you reconcile what your funding source says that they want you to do with the money and when it is a funding source like the reservation and a tribal council, the diversity of the community that you're serving requires that you be responsive to that community's needs, so can you speak to those two?

>> CHRISTY: Yeah. First of all, just to give y'all -- tell you quickly what she's referring to, you know as centers for independent living I think we all know and understand that we need unrestricted dollars, right? Because if you've got grants and contracts coming in, you're doing with that money whatever it is you said you were going to do in the grant and contract or at least I hope you are. And so you know you're strict in whatever the money is supposed to be used for. So in Mississippi, for many years our source of unrestricted dollars was restricted only by what my board told me I could do with it. Was we ran a charitable bingo hall down in south Mississippi. And it was an excellent source of funds for a number of years. It truly was, but about a year after Katrina came through, and wiped out the southern part of our state for the most part, that bingo hall went under. And we tried unsuccessfully to revive it and couldn't do it. So we had to start scrambling really quickly to come up with a new source of unrestricted dollars. So the money coming from the gaming commission -- well, from the bingo hall was those funds were monitored carefully by both the secretary of state's office, of course, as well as the gaming commission in Mississippi. And so while they were considering it unrestricted dollars and we could use them for program services or whatever my board said we could, and what we mainly did was we spent a lot of funds on consumer services purchasing things for our consumers. They were still very highly regulated.

It could be certainly at times a nightmare to do -- to use those funds. But I think to get back to your real question and that is, yeah, we get funding from the department of rehab services. We get funding from the department of health. We get funding from the University of affiliated program which is through the University of southern Mississippi. Those are all agencies quite frankly that we had advocated for systems change within those entities in years past and still will today if that's necessary.

One thing I have found is that by giving the staff of LIFE kind of enough rope to go out and serve on other committees and stuff, as the director, I can sit at a meeting with all these other directors of these state agencies in there and try to work through something reasonably and rationally that I think is wrong within their department. If it doesn't work, I don't hesitate to pick up a sign and go picket at the front door. So whether I'm receiving their funds or not.

Because one thing -- and I mentioned mark Smith's name before. Mark was the kind of person that he was a very strong advocate and he would fight until the end until something was fixed, whatever system might be broken, he would fight for it to get fixed and in so doing he was still highly respected by every single agency within the state of Mississippi. And so when I took over as the director of the center, my goal was to be that way one day. And I don't know if I've quite gotten there yet or not, but we've reached a point in our advocacy I think with LIFE and with the center for independent living that those entities, the division of Medicaid, the Department of Rehabilitation Services, the state department of health, all of which we received funds from, I think that they see what we've done in the state and to be honest with you I think that they respect what we've done enough to make system changes if we fight hard enough for it to be done. And they understand that we may show up at their front door and block them in if they don't do it quickly enough.

and we've done that. And then they come out and go, Christy, what do you want?

>> AUGUSTA: Please leave.

>> CHRISTY: the mayor of Jackson came up to me and said, Christy, what do y'all want? I said, well, what I want right now is to go in your office to sit down and discuss this. And let's talk about it. He said let's sit down right here on these steps. I said there is four media outlets here. Do you really want to do this in front of all these cameras. And he said yes. I said fine with me. Let's get it on the record.

So yeah, I'll never compromise my principles and I hope that whoever comes behind me in seven years, in six months and two days when I tire won't either.

Did that answer your question?

>> AUDIENCE MEMBER: Yes.

>> CHRISTY: Yes, ma'am.

>> AUDIENCE MEMBER: My name is brandy Brady from Missouri. I was really interested in the youth advisory council that you have in saying that they put together the whole retreat. With that, do you handled over everything to them as far as the budget and everything and they in turn do everything? Or do you have a staff member that facilitates certain things with them? How do you --

>> AUGUSTA: We are really fortunate that some of the people that are on our youth advisory council are also staff. Desmeon is the chairperson of the youth advisory council and Cindy is the vice chair. The way that we get our youth advisory Council Members, they are usually people or young adults that have gone to the retreat. They go to the retreat and see what's going on and they become really active. And as they start to age out of the retreat or get close to aging out of the retreat, they start to -- other advisory Council Members start to look around to see who they feel could be a good asset to the council. The way that we usually do it, we meet quarterly and when it comes up for the time for the youth retreat to start, they start planning it, and yes, they do know the budget. They know eke lacet how much money they have to spend.

>> CHRISTY: a tell Augusta what spef to spend for that year and she passes it on to them.

>> AUGUSTA: They know how much it will cost per hour for each attendant, how much it will cost for the registered nurse to come administer meds. They have to figure out the menu. How much money for the caterer, how much money for their decorations. They pick the collars for each of the cab ins. They pick their D. J. They plan the entire event. The only thing I have to do is do what they tell me to do. Which is really easy because they give me the directions and I'm telling you when these young people tell you what they want, we have the caterer come in and she decided that she wanted to add something extra on menu for them one year and one of the Council Members came to me and said that was not on our list. Why is it here? And that's what I mean about they truly plan that youth retreat right down to the music. When you give them the power, that advisory council is extremely thrift tie when it comes to the money. Because they want the most money, the best bang for their buck because they know when it comes to hotel rooms for the parents, how much they are going to pay and I have to negotiate that. And they tell me this is how much they want to pay for that hotel room, I have to go to that hotel manager and negotiate that price. That's how involved they are. So they do it all.

>> CHRISTY: Any other questions? Yes, ma'am.

>> AUDIENCE MEMBER: I'm just curious if you take one of the youth with you -- I'm curious if you take one of the youth with you so that they can learn to negotiate?

>> AUGUSTA: Yes. One of the persons that is on the advisory council is also the assistant -- he's actually just about to age off which I think is funny. He actually goes with me. He talks to the hotel person. The only thing I really do is sign the contract because they know they don't want to be responsibility for the money. That's how smart they are. They'll negotiate and say you go sign. So this is how they sit down with the lady. They know exactly how much everything is going to cost. They go through the menu. Dem can tell you how much they have for the meals and they know how to go through and negotiate those contract.

>> CHRISTY: We try to have a youth with us almost at every turn so that they are learning how to negotiate so Augusta and I can quit one day.

>> JUDITH: Can we give them a big thanks.

[APPLAUSE]

>> JUDITH: When I lived in the south in Louisiana, we always had a saying, thank the Lord for Mississippi because we were never last. We were next to last. I think you can see that Mississippi -- I'm sorry, that's (inaudible) -- but you can see that Mississippi is far from last in the innovative things that they are doing, and I think the health piece is often overlooked because you can't have a job, can't hold a job if you're sick, have trouble going to school if you're sick. You have trouble living independently in the community. So I think this is really important, the health piece, and I'm excited to learn more tomorrow.

Now, do you remember the rules for lunch? Everybody picks up your stuff. You older allies and pick up your stuff. Everywhere has to leave the room. We'll come back in about 20 minutes and there will be a nice meal sitting in front of you. No buffet. So if everyone can do that so the folks from the hotel can get in and set up, that would be great. Thank you.