

Daniel Gillison: Hagen, thank you very much. Really appreciate it. And to everyone joining us today, good afternoon to you. We greatly appreciate you being with us for our 2025 Virtual Mental Health Equity Summit. So, today is an opportunity to come together to listen, to learn, and to strengthen our shared commitment to making mental health care more accessible, more inclusive, and more responsive to the people who need it. Our theme, The Power of Storytelling, Partnership, and Advocacy- Advancing Mental Health Equity. So I want to repeat the theme, The Power of Storytelling, Partnership, and Advocacy- Advancing Mental Health Equity.

It captures the heart of what brings us together, which is connection, hope, and the power we have when we unite to make change possible. As I often say, people don't care how much you know until they know how much you care, and that spirit of caring is what today represents, showing care through action, listening, and connection. Throughout the summit, you will hear stories of courage and resilience. You'll also learn how sharing your own story can spark understanding and create momentum for change. At NAMI, we know that authentic personal stories bring this movement to life.

They remind us why we do this work. Behind every number or policy change is a person, a family, a community, each with the story that deserves to be heard. For nearly 50 years, NAMI has been the trusted voice for people affected by mental health conditions. We build awareness, advocate for change, and connect people to education and support that help them find a way forward. And through the Community Health Equity Alliance or CHEA, NAMI is helping bridge the gaps that keep too many people from getting the care they need.

When someone begins to wonder if what they or a loved one are experiencing might be a mental health condition, the next steps can feel confusing or out of reach, especially in communities where care is limited or trust in the system has been shaken. Through CHEA, we are working hand in hand with our NAMI state organizations and affiliates, community organizers, faith and spiritual leaders, and national partners to make sure help is available in ways that feel safe, culturally responsive, and grounded in trust. That same commitment to collaboration is what today's summit is all about.

We are bringing together advocates, young leaders, people with lived experience, and partners from across the country to show what is possible when storytelling and advocacy come together to move us toward a more just and caring system of mental health care. At NAMI, we carry that approach in everything we do, grounded in compassion, connection, and hope, and in the truth that lasting change happens when we work together. Now, there's an African proverb that I always think through, and it reminds us, "If you want to go fast, go alone. If you want to go far, go together."

That's the power of our movement and everyone who's a part of it. Together, we are turning hope into action, building understanding and trust, and creating a reality where care, support, and healing are within reach for everyone. Thank you all for what you do and for what you're going to do to carry this work forward.

We really appreciate you. So now let's get started, and I'd love to hand it off to Stephanie Robertson. Stephanie.

Stephanie Rober....

Thank you so much, Dan, for being here today and for opening up our Mental Health Equity Summit. Your presence really reflects the NAMI's deep commitment to advancing mental health equity and really meeting people where they are. I'm Stephanie Robertson, director of Mental Equity Innovation, and thank you all again for joining us today. This year's theme, the Power of Storytelling Partnership and Advocacy- Advancing Mental Health Equity, is hosted by the Community Health Equity Alliance or CHEA. Throughout today's event, we'll explore how storytelling, advocacy, and strategic partnerships can help us move from awareness to action in advancing mental health equity.

So, echoing a bit of Dan's opening, I just wanted to say that our hope is today's summit inspires you, sparks new ideas, and motivates you to take meaningful action in your own communities. Before we begin, I want to take a moment to note that today's conversation may include discussions around mental health and suicide, which may be difficult or triggering for some. We therefore want to provide the following content. Warning disclaimer. "At NAMI, we believe that sharing personal stories can foster connection, understanding, and healing. However, we also recognize that some topics may be difficult or distressing.

The following presentation contains real stories and lived experiences that may include references to abuse, violence or trauma, racism, suicide or self-harm, death or dying. We encourage you to take care of your mental health and emotional well-being. Please feel free to step away at any time and remember that you are not alone." You can also find help to more resources at nami.org or go to our NAMI helpline, or in a crisis, please call or text 988. And so, now let's go ahead and get started. Today you're going to hear from experts, advocates, and those with lived experience. We'll start with an engaging session led by Brandon Graham, advocacy director with NAMI.

He will share how to turn personal experiences into powerful tools for advocacy, showing how stories can influence decision makers and drive real change. This session will run about 30 minutes, followed by 10 minutes of Q&A. So please put any questions you may have in the chat, and we'll try to get to as many as possible. We're also planning to premiere two new videos today from our Stories of Hope series, but have decided to release them separately to really give full attention to the live participants as well. Please make sure to visit nami.org/chea and sign up for updates to let you know... so we can let you know when that will be happening, and we'll provide the contact information after the session as well.

We're going to have a short break after a Brandon session and then move into our final one at 4:00 PM Eastern Standard Time, featuring four phenomenal members of NAMI Next Gen, a group of incredible young adults who bring their voices and lived experiences to the mental health advocacy space. So again, welcome and thank you for joining us today. A little bit about the Community Health Equity Alliance, or as we love to call it, CHEA. We envision a world where minoritized and resource-limited communities have equitable access to mental healthcare, grounded in empathy, compassion, and understanding.

To bring that vision to life, CHEA works to expand pathways to culturally responsive care, through partnerships and knowledge exchange, working to ensure individuals with mental illness receive timely, continuous support from trusted providers, families, and communities. In 2025, CHEA's efforts have really centered around A.C.E., which is Amplify, Convene, and Expand. Delivering culturally responsive resources, bringing together stakeholders, fostering collaboration, and strengthening partnerships to drive lasting change in mental equity is really at the core of CHEA's work.

So along with summits like this one and other virtual town halls, CHEA also leads initiatives like the Crisis Can't Wait campaign, a customizable toolkit designed to help communities navigate mental health crises and recognize the signs before they escalate. It also helps to explain what to do if you or someone you love is in crisis, including how to access resources like 988. To learn more, you can also visit nami.org/chea, which I believe was just put into the chat as well. And so, now we're going to go ahead and dive into our first session, which I'm super excited about, Journey to Advocacy: From Storytelling to Systems Change.

We are extremely fortunate to have NAMI's Brandon Graham serve... who serves as director of advocacy with our government relations and advocacy team. Brandon oversees NAMI's advocate development and mobilization to advance policies that help build better lives for all people affected by mental health conditions. He is responsible for strategic advocacy campaigns, including NAMI's #ReimagineCrisis and #Vote4MentalHealth campaigns. Brandon also leads efforts to elevate lived experience through the policymaking process and expand the organization's advocacy presence and thought leadership. On a personal note, I was so excited when Brandon agreed to be a part of today's summit.

Only a few years ago, I started sharing my own story about my journey with mental health and mental health challenges, and began to truly understand the power of storytelling, especially when it helps others feel less alone. I thought I was doing a pretty good job telling my story until I had a chance to sit in on a session that Brandon led for our NAMI state organization as the... an affiliates and on how to really tell your story in a way that not only moves people, but also moves the needle, which will really help create lasting and real change. So, I'm excited to keep learning, right alongside all of you. And with that, I'm going to go ahead and turn it over to Brandon.

Brandon Graham: Thank you so much for that introduction, Stephanie, and thank you so much for all of you for joining us today. As Stephanie mentioned, my name is Brandon Graham. I am NAMI's director of advocacy on our government relations policy and advocacy team. Next month will mark eight years at NAMI National. I am thrilled to be here with you today to really talk about how we can leverage our personal experiences for storytelling. I'll share more about some of the work we're doing at NAMI National, but really I want you to walk away from today's session with tips you can take to go in your community and start making change. I want everyone to walk away with some actionable ideas about how to really

push forward the ideas and concepts that create a better world forever and affected by mental health conditions.

But first, I want you to just take a moment, think about compelling stories, think about stories that moved you, think about stories that stuck with you. What made that story compelling to you? You don't need to share anything in the chat. I just want you to take a moment to think about the pieces of a compelling story that you've heard in your life. Now, some people will also think back to what I think might be one of the best organizations and companies of storytelling, which is Pixar. Now, I've got a public domain photo here. I'm not showing some of the copyrighted clips, but think about movies like Up, Soul, Toy Story, Monsters, Inc., all of these very popular blockbuster movies that really capture your attention because every Pixar movie that is out there is storytelling. It's an arc. It pulls you in. It makes you feel things.

These are concepts that really lead people to walk away with some general thoughts that everyone usually agrees with. People walk away from these compelling stories or movies like Pixar movies, thinking that this gave them hope or it really had them emotional. It brought in that emotional side of things. That you start connecting with the characters in a story, or you start rooting for them, you're cheering for them. There's hope in there. It's uplifting you. You're finding a way to reel people in and start uplifting them. And in the end, their story helps make some experience or some tale real for you. And that's what we really want to hope any story for advocacy can do as well. And when I say advocacy, I want to talk about the difference between personal advocacy and issue advocacy.

So when you think about personal advocacy, that's advocating to change the circumstances for you or someone you care about, right. You are advocating on a daily basis. That's why we are all here, because we are advocates in our own lives. But some of the topics I'm going to talk about today are focused more around policy or issue advocacy. So how can we change systems to affect our entire community, our entire society, and just really change some of... remove some of the barriers that people are facing, and create a more equitable society? So at NAMI National, I really want you to walk away just knowing a bit about how we approach this because NAMI envisions a world where all people affected by mental illness live healthy, fulfilling lives, supported by a community that cares.

We're doing that in the policy and advocacy space through board past Alliance-informed policy positions. You can see those at nami.org/advocacy. And ultimately, as we are advocating on all of these different policies, we're guided by a central idea. Will this help or hurt people with mental illness? Before I go any further, I do want to share a bit about my team at NAMI National, the government relations policy and advocacy team. I work with some of the most amazing and talented people that are out there, and we approach a lot of this work under the leadership of our Chief Advocacy Officer, Hannah Wesolowski, in a lot of different ways. So we've got congressional affairs. That's what you think of the I'm just a Bill Schoolhouse Rock version of advocacy.

Up on Capitol Hill, we have a team that's focused on looking at federal policy and working directly with members of Congress and their staff. We're advocating at the policy level. We have some amazing experts on our team who can analyze really complex policy and find ways to weave in lived experience into that, whether that's public comment periods. Like up here, NAMI executive director in NAMI, Wisconsin, got to join the administration announcing a stronger mental health parity regulations a few years ago because of the public comments received by the administration in that effort, 60% came from NAMI advocates. That's incredible and a testament to making sure that lived experience is part of the policy work.

So huge shout-out to my colleagues there. We have colleagues... We have people working focused on helping our state organizations and affiliates navigate different advocacy, best practices, and questions about how we can do some of this work and learn lessons from state by state, because so much work is happening in this country at the state level. States are really the laboratories of a lot of different policy. And then there's advocacy. This is my little vertical of the team. We're making sure that we are finding ways to lift up people and engage them and give them the tools and empower them to be part of the process. That could be meeting with folks, that could be taking a NAMI Smarts for Advocacy workshop.

If you've had a chance to do so, it's sharing your story. It's signing up and taking some of those advocacy alerts that we send out. If you're on NAMI's advocacy list, you probably see a lot of emails from me. I am both sorry and appreciate the action that you are taking, as you get many opportunities to engage from us in your email. One thing, though, I hear as part of that work quite often is, "This is all so new to me. Where do I begin?" And it can seem scary. It could seem that changing systems or engaging in this type of advocacy effort is something that's so distant or far away. But ultimately, your story can make an impact. Your experiences can make an impact, and you can make that impact today in your community.

You can start by realizing that you have this power to create change. And when we use all of our different experiences to advocate together, we can really improve systems and change lives. So, as we start going along with this, I want you to remember a few things. Your story is always right. Your lived experience has value and meaning, and you don't have to have all the answers because, ultimately, facts and figures are going to support your ask. But stories like yours are going to change hearts and minds. So I want to show you how this works in practice because both are important. Facts, incredibly important. Stories, incredibly important. So up here, I have a snippet of a big letter that NAMI led with mental health groups during the fight earlier this year to protect Medicaid.

This is a real excerpt of a letter that was sent to Congressional letters... leaders. I'm not going to read this all to you, but I do want to highlight some things, right. We're talking about financing structure or shifting costs. We're talking about eligibility, benefits, payments. There are stats and figures in here. These are super important for policymakers and their staff to understand. But how can we also change hearts and minds? By sharing stories. During this Medicaid effort during

NAMI's Protect Medicaid. Protect Mental Health campaign earlier this year, we collected over 1,500 stories from advocates about how Medicaid has impacted their lives.

I have just two of these up on the screen, but I really want to read these out to you because I think they really drive home the fact that these are emotional and powerful. "Without Medicaid covering my mental health treatment, I would not have improved to where I am now. I have not been hospitalized for 19 years, and I'm in recovery. I've been able to manage my symptoms through the help of Medicaid. Medicaid saved my life because I got the right medications, a good psychiatrist, and a therapist." And we also hear from Katie in Kentucky, who shares, "Because of Medicaid, I was able to afford my mental health medications when I aged out of my parents' insurance.

This allowed me to manage my symptoms and continue to work. I urge Congress to keep Medicaid the way it is because without it, I wouldn't have been able to be healthy during my time of need." You can see the difference between these two types of stories and some of these letters and more details that need to be shared with policymakers and their staff and both have a role. And to show you that, I'm going to take a second to just show you a quick video that we prepared that weaves together both the facts and stories.

Video:

Medicaid is the backbone of the mental health system. It is a critical lifeline for people with mental health conditions. Medicaid covers over 72 million Americans.

Without Medicaid coverage, I would not be alive today.

Medicaid has been really important for my mom and has made a huge difference in her life.

Every day, we are hearing stories from people where Medicaid has changed their lives. People are able to work. They're able to live on their own. They're doing well, and it's because Medicaid connected them to the treatment they need.

If federal funding for Medicaid is cut, it would be devastating for people with mental health conditions.

Medicaid improves lives, and I'm not just talking about the lives of people on Medicaid. I'm talking about the people who are the family of those people, the community that person lives in.

Cutting Medicaid doesn't just hurt the person who's impacted. It hurts our entire community.

Medicaid was a lifeline for me during my most vulnerable times in my life, during the most difficult times in my life.

So Medicaid has been a game-changer because it pays for her home health services. The reason that she needs this home attendant in the first place is because my mother lives alone, and her mental and physical health conditions prevent her from being able to leave the house by herself. So she really would not have any means of meeting a lot of these basic needs if it weren't for her home attendant and Medicaid.

We are valuable people. We are capable of living healthy, fulfilling lives as long as we're supported by a community that cares.

We can't go back in time to when people didn't have healthcare coverage.

We are worth the healthcare coverage that comes with Medicaid, and most of us without it would not be alive today.

Even if you are not directly impacted, someone around you is. Everyone should care about Medicaid. Go to nami.org/medicaid to learn more, to take action, to share your story, to contact policymakers, to make sure everyone understands why we need to do everything in our power to protect the Medicaid program.

Brandon Graham:

So thank you for watching that because I think it really gives a great example of how we can balance sharing facts and sharing stories, and why together they are so important. So, with that all in mind, with those examples out there, I want to take some time about the actionable things, how you can best tell your story for advocacy. For those of you who have taken a NAMI Smarts workshop before, some of these are going to sound super familiar because they are the core concepts of that.

And just because we're talking about these here doesn't mean that I don't highly encourage that you connect to your local NAMIs to take a NAMI Smarts workshop and really practice telling your story. But for today, we're going to run through some of these and give you some good tips for telling your story, and then how to structure it. So first, your audience doesn't want to hear your whole life story. We could probably write full books on what's happened to us.

Some of us could write a chapter on one incident alone, but when we're meeting with policymakers or staff or trying to advocate, we need to keep it brief. We're sticking to the highlights like a movie trailer. 90 seconds. You know what you're getting. That's how we can try to structure it. It's actually one of the hardest parts about writing your story. You just want to add more and more info. But when we keep it brief, we keep our listener. Because when we keep our story brief, it ensures that we have time for those additional interactions when we're talking with a decision maker.

We want them to be able to ask more follow-up. We want them... you to be able to share more about what you're there to talk about and what your issues are. And something I wanted you to think about what makes the story compelling for you, or when you think about a Pixar movie, is that you should have emotion as part of the story that you are sharing, but your emotions should help move your

listener, not fully overwhelm them. It's important that we are all at different parts of our own mental health journeys.

We all feel comfortable sharing different details of our story. It's important to include pieces that you feel comfortable sharing in this public setting, but that don't fully overwhelm you. You want to be able to finish your story. You want to be able to get to the later points about the systems change that we want to create. It's important to share what makes you feel most comfortable and doesn't fully overwhelm you in that moment. Where possible, it's important to use positive concepts like hope, wellness, and recovery.

Not every story is going to include those. There are a lot of difficult stories and difficult experiences we've all faced. That's what makes NAMI and the full alliance so incredibly powerful, as we have stories to share from so many different aspects, and there's so much more work to do. But where possible, your listener, especially decision makers, want to find things to root for, uplifting stories, that concept of hope that we can really drive home.

So where possible, it's really important to use that to your. And finally, we're talking about policy advocacy, right. So make sure you make an ask. This is the part that so many people forget to do when advocating. They want to keep telling their story, the time runs out, and you have not asked your listener, let's say, a policymaker-

PART 1 OF 4 ENDS [00:27:04]

Brandon Graham: Ask your listener, let's say a policymaker or staff member, what you want them to do. We want to have concrete actions and questions that we want them to do. "Can I count on you to support HB 555 to improve mental health care in our community?" That is a concrete action that you can try to get them on the hook for. Even if you don't get a affirmative response, even if they don't say, "Yes, I'm going to support that." You know what work there is to continue to do. If they give you that yes, fantastic, you have a champion on your side. If they give you a non-committal response, don't take that personally. They're being pulled in a lot of different directions. Maybe they need to do a little more research. And even if they give you a negative response, they're not going to support this, you know that you can follow up with more information. You can stay in touch. You can build a relationship because we need to make progress. Not everything is going to be an immediate yes right away.

With that, how to structure your story. At the heart of NAMI Smarts, at the heart of how we try to help people think about telling their story is a basic structure that I use all the time and I try to help people understand all the time. People have said this is really, really helpful. So I'm going to give you the seven steps we have for telling your story for advocacy.

The first, who are you? You have to introduce yourself. You have to make sure that you center yourself for your listeners so they know why you're there and frankly why they should listen to you. Policymakers, their staff, decision-makers want to talk to constituents, people in their area, people who have a connection.

"I'm Brandon Graham. I'm from Arlington, Virginia, and I'm here to meet with you today because I think we need more mental health funding in our community." I have now placed myself in the listener's mind of who I am and why I am in the room today.

The next part is talking about what happened to you or a loved one. This is where we start giving some of those highlights about what's so important for your listener to hear. We start sharing some more details, but the details that we have picked or we have tailored for part of our story to really pull people in to set the stage to help someone understand in that quick movie trailer-like setup.

From what happened, that's where we started talking about what did help, what would've helped. Think back to as I was having you think about some of these Pixar movies. It's an arc. A good movie storytelling is an arc. You have the hero's journey. It's an idea for a reason. Like someone may hit a low and then something helped. Something helped pull them further back into this room, into this space. So how do you help your listener, especially if they're policy maker or some other type of decision-maker to understand the things that you got or your loved one received or someone you care about received or they should have received that would help in that moment?

And then this is where it's really important to leverage those concepts of hope, wellness, and recovery were possible. How are you different today? "I got connected to this support because of that. I went back to school. I got my degree. I am working full time. I'm volunteering with my local NAMI. It's incredible. I'm so connected with my family again." All these important ideas, use them to your advantage when advocating for your policy ask because then we take these first four steps. These first four steps that are purely about your story and we start shifting them over to what change we need to see in our community.

What's that need or that problem that's still lacking? "I was able to get the help I needed because in my community we had a mobile crisis team, but not every community has non-law enforcement response available in a mental health crisis. That's why we need to support this." You've got that need or the problem and you share a bit more about what's going to help others. "We have a shortage of in-person mental health crisis response opportunities, so we need to invest and build them." These two steps very much done in practice together, but it's helpful to think of them separately.

Just like I said before in some of these tips, your final step, sometimes the most important piece, what is your ask? What do you want your listener to do? Get them on the hook to give you a response. "Can I count on you to support this bill that is going to invest in our community, that's going to build more mobile crisis teams, that's going to do X, Y, and Z?" You can tailor this structure to anything you're advocating for and it doesn't need to just be with policymakers. If you are on a college campus, think of the administration there as the decision-makers as well. If you are advocating on Capitol Hill or with your city or town council, all of these principles apply directly the board.

We've talked about why stories are so important. We talked about how to start building your story. Now, how to start using your story. The first pitch I am always going to give is make sure to sign up for NAMI's federal advocacy alerts at nami.org/takeaction. We send multiple different opportunities on multiple different issues for you to engage where most impactful at the federal level. That could be adding your name to a petition. That could be writing a member of Congress. That could be commenting on a federal public comment period or sharing your story because stories power so much of NAMI's advocacy and we need to know all of the different experiences of people that are out there.

You can take that first step. You can take some actions we currently have available at nami.org/takeaction. You can just sign up so you're on our list. You'll probably receive many emails from NAMI Advocacy or Brandon Graham or Hannah Wesolowski or more. But that is a great first step you can do. And when, when we have opportunities to write elected officials and get involved, we make sure there's a section for you to customize that letter that you send with parts of your story. We always encourage you to do so. Quantity is important, but so is quality. We want to make sure people are sharing what they feel most comfortable with in those messages to elected officials.

Something that's really important too. I may be at NAMI national, but it's so important to connect with your local and state NAMI organizations. So much work is being done to create an equitable society at the state and local level. Make sure to visit nami.org/local if you're not already connected and look up who is your local NAMI organizations, plug into their work that they're advocating at the state house, they're advocating at the county and city level, and get involved and plug into those efforts that are ongoing. There are so many different ways you can get involved from the national level all the way directly into your community. It's important to plug in where you can.

I have already made this pitch, but I will make it once more. NAMI Smarts for Advocacy is an incredible resource that is out there offered by NAMI state organizations and NAMI affiliates to practice sharing your story for so many different opportunities. I gave you some of the tips from our main module, Telling Your Story, but we have different resources to help prepare you and give you the skills to meet with policymakers, contact them, learn more about how to advocate around state budgets or re-imagining crisis response and so much more. So I hope that you'll reach out while you're connecting with your local state NAMI organizations to plug into some of their ongoing work to see if they also have a NAMI Smarts workshop available.

One thing I would just like to mention again, advocacy is more than meeting a policymaker on Capitol Hill. We can create so much systems change at so many different levels of this country by just advocating with the decision-makers we have. So that, like I said, could be a college campus, that could be your city council, that could be anyone who is overseeing a different type of system. So consider getting involved in sharing in that way.

Social media is a very important tool for advocacy where you feel comfortable sharing your story. Short-form video, very popular these days. It's really great to

leverage to your advantage. And where you feel comfortable. Your local news organization still allows people in the community to submit letters to the editor, submit op-eds, submit opinion pieces where you can share parts of your story and advocate for change. Not everyone's probably reading their local paper these days, but I can assure you your policymakers are. So use that to your advantage.

We've talked about a whole lot so far today. We're going to talk about some more when we get to the Q&A period in just a second. But just remember, changing systems, changing all of our communities isn't going to happen overnight. It's going to take patience and we can really persevere if we take our time, we use our voices, we share why things are so important, what our firsthand experiences are to people. We can ultimately create progress on behalf of everyone affected by mental health conditions in this country.

With that, here's an email that you can reach out with any additional questions after this. Please make sure to follow all of NAMI's social media accounts, but also NAMI Advocacy on Instagram where we do post some behind the scenes looks from Capitol Hill and other different engagements. And do sign up for federal advocacy alerts nami.org/takeaction.

With that, Stephanie, I will stop sharing my screen and I'm happy to take any questions.

Stephanie Rober...:

Thank you again. That was incredible. I know it was really only a high level overview of what you and your team are able to teach those who want to share their stories. I hope our audience is just as interested in learning more as I am and will get that contact information and reach out to their local NAMIs and really see they can begin to shape their stories and use them to affect change.

Now, we're going to go to Q&A and a and we'll take some questions. I'm going back and forth here. Take some questions from both the chat as well as questions that have been pre-submitted. Before we get to that though, I do want to say I tend to go super deep on many tangents when I tell my story. So that's why I was really impressed with how you said that you should shape it in a way where you're brief and your story should move and not overwhelm.

You touched on this briefly, but one of our pre-submitted questions asks, "How do we balance emotional safety with impact when telling our stories to influence policy?" Again, I can go really deep and real quick. So how do you balance that and how you're doing when you're telling your stories to influence policy?

Brandon Graham:

That is a fantastic question. I think it comes down to sharing what you feel most comfortable with. If you've seen one mental health story, you've seen one mental health story. There are lots of different commonalities that we, in our community, have faced, throughout the mental health community, but we don't have to share every detail of it. It's not just about being brief, but it's also sharing where you feel most comfortable in your experiences sharing in this setting.

There are different parts of my own personal story that I might feel differently sharing with all of you today on here versus friends versus maybe a small group meeting with staff. That is a different tier that I have done my own introspection to find where feels most comfortable. On the first part, it's making sure that you understand how you are feeling about different parts of your story in which setting and where you feel most comfortable.

Then there's a second piece, which is I think self-care is really important for any type of advocacy, storytelling. We meet with a lot of different storytellers one-on-one who have shared stories through our advocacy action center and we want to learn more. Something I personally ask every storyteller at the end of these calls is, "What are you going to do after we wrap up this call to take care of you? What's something you are going to do for yourself? Because we've talked about a lot of important emotional topics today. "What's one step you're going to do for you?"

Sometimes I need to ask myself that question sometimes, but I think it's really important that you don't just pour your entire self out and leave your cup empty. We have to refill our cups. This systems change doesn't happen overnight, like I said, and it's really important for us to do things that re-energize us, that give us comfort after doing something that is admittedly scary. I have been on both sides of the table. I've worked for elected officials, I have now helped a lot of people through this and I've shared my own story, and it's emotional all around. So do not feel bad about taking a moment when you're done sharing your story to just do something for you. That could be a walk outside. That could be a big chocolate chip cookie that I have here on my desk right now. It's whatever is going to be best for you to continue this effort and continue this journey we're all on.

Stephanie Rober...:

Thank you for that and I really appreciate you bringing up self-care. I actually have to write down beforehand what are different ways that I can take care of myself because I get so amped up or I'll get really excited or I'll be exhausted afterward and I don't do the self-care part. So being able to even just have a note to yourself saying, "Self-care, go outside, go for a walk." I like to do jogs, slightly like trotting, but still jogging for me is very important for my own self-care.

And so I know NAMI Next Gen panel is going to give some of their tips on self-care as well. So I really, really appreciate you sharing that and sharing some of your own ways to take care of yourself when you are sharing your story.

I'd love to go into, we have a few more minutes, another question that is from one of our audience members now, and it really touched me because I have felt very similarly about sharing your story and being hopeful. This audience member asks or says, "Hope is a beautiful thing, but happy endings often imply that everything is okay and there's already enough being done. How do we change things without making things hopeless or impossible?" As someone who has major depressive disorder, seasonal affective disorder, a number of things, that hope does feel hard sometimes and I do understand the importance of being

hopeful in sharing your stories. I don't know if you have any more tips on that as well.

Brandon Graham: I think that's what really comes down to some of the advocacy that we're doing at the systems level versus maybe the more immediate or personal level because I think we automatically think sometimes, and I'm guilty of this too, that all right, we have a happy ending here, but it's not a happy ending when we're talking about an entire community, when we're talking about our entire systems here. Just because we have one positive outcome, maybe it worked for you and that's why I'm here to advocate to change this for other people too.

We are leveraging our stories, which are individual level experiences to try to create larger change and to do so, I think it's important to go to share wins where possible too. Because if I can say, "I was feeling really low and I contacted 988 and they sat on the phone and there was someone there to talk with me and I am so grateful that I got this and the next morning I woke up and I went to work even when I was at my lowest the night before." That's a win, yes, in a way. That's using the concept of hope, but once we follow that up with... And we need to make sure that we are investing in 988 so we can cut down on wait times or we can make sure that we have additional resources available for people in need. We're talking more about some of that systems change.

Ultimately, there's a lot of stalemate out there. There's a lot of frustration. There's a lot of just conversations that feel like they're spinning their wheels. That's why I think sometimes talking about those big ideas, those positive endings, and those positive concepts where possible can help break through because it shows that there are things that people agree on. There are things that work. There are things that help and there are areas that we can come together and say, "Look, this is a successful thing that we can continue supporting together."

When I'm feeling most hopeless in terms of the chaos or the day-to-day or just how big some problems are, it is hopeful to me to also remember that there are people who are being helped by these things, these progress that the work we've done to plug in and connect and we can continue to build on that to create some lasting change.

Stephanie Rober...: Thank you. I started feeling hopeful just listening to you right then. I do want to just give another plug to 988 as well. I have had to reach out and they were amazing. It was not just checking in on me or responding to how I was doing at that point in time, I ended up texting, but then asking if I wanted a follow-up. Really kind of trying to meet me where I was. At that moment in time, I did. I was like, "Yes, please do." And they followed up the next day. It's an amazing resource.

We do talk about how it's not just necessarily solely for a crisis. It's like if you aren't doing well, they do have ways to offer you resources and the people who are in these spaces are really super caring. So I applaud for 988 as well because it is a phenomenal resource and we need to keep funding and we need to keep making sure that it exists.

I think we have time for maybe one more question. They are wonderful and maybe it might take a little bit more than a few minutes, but I do want to try to see if you can get this one. So how do we condense many aspects of our stories when they affect a wide range of topics within mental health communities? So criminal justice, homelessness, stigma, identities. Do you have any quick tips in two minutes?

Brandon Graham: I do and I can make this super quick.

Stephanie Rober...: That is amazing. You're amazing.

Brandon Graham: Which is those seven steps that I shared, those seven steps that are in the core of NAMI Smarts, which again, if you're looking for a NAMI Smarts workshop, connect to your local NAMI state organization, your local NAMI affiliate, see if they are offering a NAMI Smarts workshop upcoming, plug into those local efforts. But that is a structure, that is a format that you can use and it doesn't need to be every part of your story.

If you are advocating on a particular topic. If you are advocating specifically about housing, maybe you lean in more about the experiences with housing. If you are talking about your story at the intersection of mental illness in the criminal justice system, which visit nami.org/overlooked to see some of our other campaigns around that topic, but leverage the parts of your story that really tie in there.

Like I said, we could write books on the things that have happened to us in life. That's what makes the NAMI community so amazing is the amount of lived experience and perseverance and just hope that comes through every person I've ever had a chance to work with or communicate with or help coach during this. You don't need to share everything all at once. You can write several different versions of your story and you can leverage that time and time again depending on your audience.

It can feel really overwhelming to pare down your story because there are so many different pieces you want to include. But trust me, you could instead write 10 stories. You could have a different story for every piece. You don't have to share every detail in there, but ultimately it sounds like you have a lot to advocate on and you can continue to advocate and create that change and raise your voice and make sure that the people who are making these decisions that are impacting your life, that are impacting the lives of everyone in your community, that are impacting the lives of everyone in our country, understand the impact of their decisions on people like you. I think that is just a great thing to take away. You can keep advocating. You don't need to do it in just one swoop.

Stephanie Rober...: I try not to get overwhelmed, but I just got a little bit overwhelmed with emotion just then because that is amazing. As someone who's constantly in so many thoughts and was like, "I want to go this way, that way." I mean, those are such wonderful tips and you were able to do it in two minutes. You are phenomenal.

I do want to just give you such a huge thanks for doing this, for being a part of this experience. There are so many other questions that we're unfortunately not going to be able to get to right now, but we are hopefully going to be able to follow up with folks and we do have access to the questions and I'll be bothering you for answers in order to continue to plug the work that we're doing, but also to just help people be able to craft their stories in just ways that truly move. I really can't thank you enough for being here and doing this session with us. So thank you again so much.

Brandon Graham: Thank you so much for having me, Stephanie. Thank you for everyone who joined and asked questions. I thank you in advance and just continuously for using your stories to try to make a difference in your community. Appreciate that so dearly and always here to cheer you on.

Stephanie Rober...: Well, with that, we're going to take a quick break, a few minutes. Don't sign off and just stay on because around 4:00, we're going to start our second half of our summit and that will be with our NAMI Next Gen and Elevating Youth Stories, Elevating Youth Voice: Stories and Strategies on Mental Health Equity. We'll be back at 4:00 and ready to begin the second half of our summit. Thank you so much.

PART 2 OF 4 ENDS [00:54:04]

Stephanie Rober...: Okay, it is 4:00. I'll give folks 30 more seconds and then we're going to go ahead and get started with our next session.

I hope everyone had enough time to go get coffee. I got my coffee. But we're going to begin our next session, which I'm excited about. It is our Elevating Youth Voice Stories and Strategies on Mental Health Equity. Again, I'm Stephanie Robertson, director of Mental Health Equity Innovation here at NAMI. Excited to moderate this conversation with members of NAMI Next Gen, our ten-member advisory group made up of incredible young adults who since 2022 have been bringing their voices and lived experiences to the mental health advocacy space.

NAMI Next Gen has really embodied one of our guiding principles, "Nothing about us without us." So each year, 10 new members join bringing fresh ideas and perspectives that help NAMI find new and creative ways to reach and support young people. Today we're lucky to have four of these amazing leaders with us. We'll be talking about how identity, culture, and belonging connect to mental health and how youth-led ideas are breaking stigma and driving real change in communities across the country.

So if our NAMI Next Gen members can go ahead and come on camera and we can begin. We're going to start with some quick introductions. I'd like you to share a couple of things. Your name, what you're doing professionally right now, where you call home, in about 30 seconds or less, why mental health advocacy matters to you. I know that's a lot to do in just 30 seconds, but for the sake of time, 30 seconds or less, why mental advocacy matters to you.

And we can go ahead. Sorry, go ahead. Go ahead. Yes, yes.

Video: Can you guys see me? I feel like I'm having some struggles with this camera. Oh, there I am.

Stephanie Rober...: We see you now, yes. There you go.

Video: Thank you.

Stephanie Rober...: Great to see you.

Video: Hello. Hello, everyone. I am Areli Rosales. I am 21 years old and I am from Texas. Specifically corner of Texas is home, El Paso. I am currently a case manager at a behavioral clinic. I am also the founder and executive director of a youth-led nonprofit dedicated to mental health called Keep in Mind, and also serving as a NAMI Next Gen member. Mental health advocacy is important to me because of my lived experience with trauma that eventually manifested into depression, anxiety, and PTSD. And so now it's important for me to give other young people the language and the knowledge and safe spaces to seek the help that they need. Thank you for having me.

Stephanie Rober...: Yeah.

Caitlin: Hi, everyone. My name is Caitlin. I am living in Potomac, Maryland and I work both with NAMI and with my local parks' inclusion department. As an inclusion support specialist, mental health advocacy really matters to me because I have lived experience with Bipolar II depression and anxiety. I was diagnosed pretty late and I hope to advocate for other youth and young adults, and I hope to push for earlier diagnosis and treatment and just breaking down barriers, breaking down stigma, and creating educational resources for youth are all things that are of great importance to me.

Ernesto Isaac L...: Hello, my name is Ernesto Isaac Lara. My pronouns are he/him/his. I am based in Boston, Massachusetts, but originally born and raised in California. I currently work full-time at the Mental Health for All Lab at Harvard Medical School doing lived experience and peer support research and program development. And that goes into also why mental health advocacy matters to me. I'm also a person with lived experience with PTSD. And a lot of my early advocacy began as a peer supporter. I'm also trained in peer support and really a lot of my early advocacy has been wanting to expand access to peer support training and services on a global level. Yeah, thank you all for having me. I look forward to our chat today.

Srihitha Dasari: Hi, everyone. Rounding out the introductions, my name is Srihitha Dasari. I use she/her pronouns, and I'm currently 21 years old. I'm a senior at MIT studying neuroscience and anthropology, and I also lead various global health research, social innovation, and advocacy initiatives across the US, Argentina, and South Asia. I would call both Atlanta, Georgia and Boston home, having been born and brought up in one of them and living in the other for the past four years.

And I would say that mental health advocacy matters to me because I, one, have lived experience with anxiety and eating disorders, but I also grew up in a community where conversations about mental health were often silenced or misunderstood. And losing my grandfather to suicide and realizing how stigma really shaped that silence taught me how urgent it is to create spaces where care feels both cultural but also accessible. And that's really what drives everything I do today. So super excited to be here.

Stephanie Rober...: Thank you all so much. Every time I hear about what you are doing, each time I'm just incredibly impressed and thankful that we have people like you in the world to help do this work. And so I'm excited to do this panel with you and really talk more about the work you are doing and the whys behind it and sharing your own stories, which I also am very thankful that you're doing in this space with us today.

So we're going to start off with some kind of foundational questions to really just get us grounded. So I'm going to start with Areli. Sorry, I can't roll Rs at all. I'll say I'm from the South and we do some weird things with our Rs, so I apologize, Areli. What are some of the biggest mental challenges you see or experience among young people in your community?

Video: Thank you, Stephanie. I just want to quickly express gratitude for this space. I feel like these conversations are really important, so thank you everyone for being here.

So like I said earlier, I am a case manager, so I work directly with young people from ages seven to 18, so I can really directly see what's happening in my community that is also reflected in other communities. So I'm speaking not just from a provider lens, but also as a young person myself going through similar challenges.

I noted five major challenges that I have seen. One of the biggest ones is substance use as a coping mechanism. In this day and age, access to substances has increased young people getting their hands on them, and I have seen how many young people are using it as a form of escape, as a way to numb their emotions when it feels too heavy or just when things feel really overwhelming. I personally myself really struggled staying grounded in sobriety at the end of my high school years and beginning of my college years. So I've been able to see how accessibility and normalization really make it an easy go-to outlet just to feel better.

Another major trend, as we can probably guess when we think of young people, is a complicated relationship with social media and technology, digital spaces. It's like two ends of the coin. One side is served as an outlet to connect with people and community and another side of just pure chaos. And it's really hard when one moment you see a global tragedy and then you scroll, the next you're seeing a puppy chase a hyena or something. How do we even process that? It's really emotionally disorienting. And not to mention social media itself creates cycles of comparison, overstimulation, and self-doubts.

Another challenge I've seen, which was really surprising at first, was insomnia. Young people are struggling to rest. And I've been able to correlate this to phone usage, to academic pressure, social worries, future worries, that our brains are just not shutting off. One that we most commonly know for young people to struggle with is anxiety. I think especially I have seen social anxiety on the rise. Especially after the pandemic, it has been harder for us to learn how to reconnect and have those positive social interactions. And just anxiety in general. It's hard to feel grounded and safe in a world that feels really unstable right now.

And finally, when we think of all of these things, this is a very understandable response of depression and hopelessness on the rise as well. When we're constantly consuming distressing news and juggling trying to figure out who we are, what we're going to do with our lives, what the future holds, it makes a lot of sense. But on top of that, each of us are part of our own culture and community that presents their own unique challenges with cultural barriers and stigma, which Srihitha is going to bring light to later on.

But one major challenge that I have noticed among these, not that they're just individual struggles, but they're part of a reflection of the systems and environments that we're trying to survive in right now. So I hope that we can also bring light to just the overall arching picture of why we're struggling in this way.

Stephanie Rober...:

Thank you so much for having those points laid out so wonderfully, but also for being open about your own experiences. I truly appreciate that because I also struggled with alcohol use up until my early thirties, to be honest, and no one talked about it. And so you doing that now in this space to my younger self, I thank you. I would've loved to have someone like you to be open about this, I think. And this is, why is this so important to continue to share stories so people understand that they're not alone in this. So thank you. And I actually I'd love to see those five points written down. I tried to write them down, but I was like, I need to listen to you as well, because they were pretty phenomenal and helpful. It would be helpful to me as well. So thank you for sharing.

And actually, one of the things you just said does lead to the next question for Srihitha about how factors like culture and identity and environment shape the way you or your peers think about mental health.

Srihitha Dasari:

Yeah, thank you for the question. And Areli really beautifully touched on some of these pieces. Speaking from personal experience, I grew up in a kind of conservative South Asian family and community where mental health really wasn't named, it really wasn't a thing. And pain specifically was something that you worked through pretty quietly, which meant that care often started way too late or not at all in the first place.

And I still remember a conversation where my mother finally told me how her father had passed away many, many years ago. Throughout the years, our family publicly named it as a heart attack, even though his cause of death was actually suicide. And I think that silence really shaped how I understood mental health not as something purely clinical, but as something deeply cultural. And over time, I

realized how much our identities really shape who feels allowed to struggle or who feels allowed to seek help.

In many immigrant or collectivist families, for example, conversations about mental health are often filtered through the language, the values, and even the stigma of what you consider home. And you might hear, "Just be strong," instead of, "Let's actually talk about how you're feeling." I've seen how expectations around gender, success, or even family reputation can make people internalize pain rather than actually name it. And how that makes healing that much more harder.

And I think that's why mental health equity can't just mean access, but it has to mean belonging. Services have to reflect the languages, the faiths, the lived experiences of people that they're meant to serve. And when young people like us don't see ourselves represented in care spaces, we're less likely to trust or to return to them. And that's really a systems failure, not a personal one.

Through my own advocacy and grassroots work, both inside and outside of NAMI, I've learned that culture doesn't just shape stigma, but it can also shape healing. And when people are able to reclaim these conversations about mental health and about their struggles and their backgrounds in ways that feel authentic to them, that silence in the first place is transforming into solidarity. And that to me is where the real equity begins.

Stephanie Rober...: Yes to everything. So I think that just this piece about family, and I grew up as a black woman, a black girl in South Carolina, and struggled. And I felt the same way. It's like, "I don't feel I can talk about this with my family." You just kind of push through. And I love the statement about, "Stigma hurts..." Wait, say it one more time because I wanted to write it down because I thought it was just so on point. Stigma hurts but can also shape healing.

Srihitha Dasari: Yeah. It's that culture doesn't just shape stigma, but it can also shape healing.

Stephanie Rober...: Yes. And so I think I love that because on my journey as well, talking to my parents, I can see that they're now like, "Oh, wait, I haven't thought through this as well." And so we're healing together. And so thank you for saying that. And I love that. I want to take that with me as well.

We're going to move on to... I just want to make sure, because I find myself wanting to just go into everything y'all are saying and go even deeper. We do have some time. I want to make sure everyone has a moment to talk. But, Caitlin, let's go into this concept of belonging. Srihitha just talked about it as well and how it's important to your own healing. And I want to hear from you about what does belonging mean to you and how does it connect to mental wellbeing?

Caitlin: Yeah. So I think for me, belonging really means two things. First, it means being able to be my authentic self. So just going into the spaces that I'm already a part of, whether from childhood, like looking way back into faith-based communities such as my church choir or even swimming. I swam in high school, so just as

club. But just really finding that the spaces that you've already chosen, you can be authentic in, whether that's in having authentic conversations with groups as a whole, or even finding one or two people where you feel like you can truly be your authentic self around. Authenticity and belonging go hand-in-hand.

And I also think another important aspect of belonging is community. So I talked about being involved in previous communities, but I also think it's important to intentionally pursue communities where you do belong, because finding those spaces where you truly feel as though you can be yourself has an exponentially positive effect on mental health overall.

I know for me, coming out of the pandemic, like Areli said, it was very hard to figure out, "How do I connect with people? What was that social thing I used to do? How do I do it again?" I really felt as though I forgot how to engage with people my own age. My family took the pandemic really seriously, and so we really bubbled up as a family unit, which was great.

But my sister's four years younger, so I had her and I had my parents, but I didn't really have any peers I could connect to. And during that time, I really missed that sense of belonging. And that also happens to be for me when a lot of my mental health systems started really showing. And so I really do think there's a strong correlation between finding a sense of belonging, hopefully in more than one space, and having positive mental health.

Stephanie Rober...: I appreciate that. What was that social thing that you used to be able to do? I never was able to do it, so I'm impressed that you were. So yes, going to social distancing was difficult, even for us introverts. I was like, "Oh, wait, we don't have this connection to each other and realize how important it is to be near each other."

And just to go back to the social media piece. I understand that there are so many downsides, and I know there are studies about that, but honestly there's such validation as well, and seeing that there are communities and there are people that are very similar to me. Just how about wading through that? And I think that is the thing that we're all kind of struggling with. But I love that. Thank you so much for sharing and especially this faith-based piece and how important that is to you as well.

So the whole conversation has been amazing. I just want to make sure we're also giving tangible ideas to folks as well. So I appreciate y'all doing that too. And, Isaac, I'm going to come to you now. And I just want to really learn more about examples of youth-led solutions that you've been a part of or have witnessed that have made an impact.

Ernesto Isaac L...: Yeah, no, thank you for that. And I feel like there's so many things that are touched on already from what my other Next Geners have said. But how I describe youth-led solutions is on this continuum, in a way, where on one end of the continuum where young people are less directly engaged with in a supportive relationship is in destigmatization and education. At my college campus, we were able to become peer health educators where our main role was to provide mental

health hygiene education. So what even is mental health? What are factors that influence it?

So at my campus sleep was actually a huge one that we constantly educated on. And other things as well, because many of us in the mental health community may take for granted things that might seem obvious, but of course for other communities, especially those who are not engaged in health professions or spaces, this is a very foreign world to them. I'm reminded of that when I go back to my own family and talk about my job.

And as we continue from the spectrum of just general education and destigmatization, we also get into more direct support providing. This can include things like health coaching or mentorship, where in some spaces young people are able to become community health coaches or community health workers and provide direct mental health support in a more clinical way.

Or my personal favorite is the youth peer support model. Of course, a lot of my background is in peer support and looking at how do we train young people to provide non-clinical recovery oriented support to one another. Not as dominant in the US, but there are a few states that do have formalized statewide youth specialized peer support training where young people, like those of us here, could be trained in our own lived experience of recovery and figure out how do we mentor and help other people who are earlier in that journey navigate it and walk alongside them as they're also trying to figure out, "How do I recover?" or, "What does recovery even mean to me as well?"

So those are a few of the ways I've seen across multiple different spaces young people directly lead and support one another.

Stephanie Rober...:

Thank you for sharing. The peer support framework is incredibly important. NAMI really does focus on this peer support framework as well, but focusing on really getting young adults trained and understanding what mental health means, difference between mental health and mental conditions, and just really being able to provide that education is extremely important. So I'm so thankful that you are a part of that and making that happen for people within your schools, within your work, within your community. So thank you for sharing.

And again, I am getting really into this conversation and I'm just checking out the time. So I want to make sure we get to these questions and get to the questions. We have a number of questions already coming in from the audience.

But I'm going to come back to you, Areli. I am so sorry. Areli. I'm going to say it the way a Southerner does, and then we can work on... I'm practicing my Rs together, okay? But you've spoken about confronting cultural stigma and generational cycles that often frame mental health as a weakness. What kinds of messages did you hear growing up and how have you worked to challenge them?

Video:

Of course. Yeah. So growing up in a border city, my Hispanic culture of course shaped me in many different ways that had a heavy influence in who I am. But

I've noticed a few things. Just for context, so before I get into that, I am the youngest of four siblings and also a proud daughter of an immigrant mother from Praxedis Guerrero, Mexico. So during my childhood, my dad was incarcerated, and during that time I became a survivor of sexual assault.

And I just remember always hearing the broken record of my mom saying, [Spanish 01:18:23], like Srihitha mentioned earlier of saying, "Be strong." When I was younger, though, I didn't really know what being strong meant, especially when I knew I felt weak. And I also grew up hearing phrases like [Spanish 01:18:38], meaning "Put on your batteries," whenever I was struggling with depression, but from the outside can be perceived as laziness or lack of motivation. I have also heard, [Spanish 01:18:51], so "Putting on a brave face," even when it's very hard to do. And this one really impacted me the most, [Spanish 01:19:01], meaning "Dirty laundry is washed at home." And that really taught me to keep my pain private and not really let anybody know what was going on internally or within my family.

And it was interesting for me at that age because I saw my mental health challenges reflected in my sisters and my mom, and I couldn't understand why we weren't talking about it. But now since I have gotten the help that I needed, I work in the mental health space, I've learned to understand where these beliefs came from. And now I know that they weren't born from a lack of care, but they were survival mechanisms at some point, that these sayings were passed down through generations and generations that endured trauma and hardship.

And so I recognize now that they were for self-preservation, for the perception of strength and dignity, because that's what kept the older generations of my culture alive. So now in the position that I am in, it's really important for me to teach my generation and the younger generation that strength can take on many different forms. And asking for help is strong, being vulnerable is strong, and leaning on others is strong.

And as I do this, I highlight that it's not a rejection of my cultural beliefs and the systems that I grew up in, but to honor it while evolving it at the same time. Because in my culture, not in many others, we look up to our ancestors and our elders for guidance. But I've learned that it's possible to hold respect for their resilience, but still making space for our unique challenges as a generation and those that come after us.

So I'm trying to now dismantle those beliefs by doing exactly this, telling my story. That has also looked for me like doing it through social media, podcast interviews. Also, in conversations when I hear these beliefs coming-

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Video: ... views also in conversations when I hear these beliefs coming up, not only just in my culture, but in other cultures as well, even at the dinner table, even though that's very controversial, my family still but must hold my ground. But most importantly, and I hope this is the piece that we all go away with from this summit, is embodying the change that we want to see. We have to be honest

about our emotions when they come up and not putting up a face anymore. It's okay to not be okay. Checking in on your people. Strangers as well, if you see that they're in a low mood, mood or their journey is changing, and an important one for me, I've also learned is meeting people where they're at, understanding that we all have our own mental programming to keep us safe. It's about starting small and starting within those personal conversations and interactions.

Stephanie Rober...: I want to just say you're not just affecting and all of you are not just affecting or moving younger people. Your messages and your stories are incredibly important to everybody. You move me, so thank you for sharing and thank you for being so open. We find similarities in these conversations. I'm used to... My parents used to say, "Go pray or go take a nap." The nap is important, the sleeping part, but naps are important, rest is important, but you sharing that and people are going to be able to see themselves in you no matter what age. Thank you so much. I didn't mean to mute myself. I was just so moved. Sorry.

We're going to go to the next question with Isaac. How can organizations like NAMI and the World Health Organization better integrate the voices of those who with lived experiences into designing programs that truly, truly reach and serve youth?

Ernesto Isaac L...: Yeah, no, that's a great question. Thank you, Stephanie. I think that two immediate things come to mind. The first one is creating more opportunities for young people to engage in mental health advocacy, both on a global, national and local level. With the World Health Organization opportunity, it's been very eye-opening as I'm one of the only people from the US and also one of the only people under 30 that's in that space. Getting to hear from leaders and other continents and other national contexts and how they think about mental health has been great. This is a continued conversation of the current system is not working in how we are including people with lived experience. It's the same actors in every space and it's the same nations represented in every space.

Other national organizations like the Global Mental Health Peer Network that I've been a part of, I've really appreciated because of their intentionality with recruiting from spaces like the Global South for example, where there is a lack of representation or leadership from young people with lived experience where being the global majority there is very little representation for these communities. I think that as organizational leaders or if you are a leader in your space, there's a need to work to actively create opportunities, not just advisory boards, but I think that is another great one. Of course, the four of us here have this platform because we're members of NAMI NextGen, but I think it's also been great to see ways that other young people have created platforms for themselves.

For example, some of the members of our community of practice, which is another professional development program we have here at NAMI NextGen. One of our members in the last year created a NAMI NextGen for their state in New York, and that was so that people within New York state themselves could also have that NextGen experience, if not on a national, but more on a state specific level. I think that's one great way.

Another one I think, and this is more related to leadership skills, especially for those who are not young people, is building up an understanding of what authentic engagement actually looks like. I think oftentimes, and I'm sure the other young people in this panel may have experienced as well, there's a lot of tokenization of lived experience in youth voices, especially as it becomes a more popular practice for organizations. There is also, seemingly from adult allies in certain spaces, I've noticed a distaste for when young people do voice their opinion and it doesn't match what the adults wanted to hear originally.

That's all to say that if you do create a youth advisory board, don't be prepared just to ask for questions, but be prepared to be told no or that you're wrong and no one likes to be told no or that they're wrong, but also, you were partially asking for that when you created an advisory board. I think it would be great to create a culture of humility and really trying to understand young people and where they are and why they do have that contrasting opinion at times. But those are some immediate thoughts I have in terms of how can you authentically integrate people with lived experience and young people in these spaces.

Stephanie Rober...: I really appreciate that. Thank you so much. This cultural humility piece that's just being open to the advice... Not even just advice because you are an expert in this area, so just listening to what you have to offer is incredibly important and especially for those of lived experience. You have both and I really appreciate you sharing that with us.

I'm going to now go to Srihitha. You've spoken at the United Nations and led initiatives in multiple countries. What keeps you grounded in the communities you've serve?

Srihitha Dasari: Yeah. I would say that it's very easy to get caught up in the vastness and often the quote glamour of global conversations and big policy spaces. But what really keeps me grounded is remembering who I'm speaking because of and who I'm speaking with. I think that every stage I've been on traces back to somebody real, not just a statistic. Whether it's a classmate who once told me that she didn't think her counted because she wasn't having panic attacks, or whether it was a mother that I met in rural Nepal who had to walk two hours just to give birth safely. Or even a fellow youth advocate who messaged me about stigma in their own community. These are real people who remind me why this work matters. I've never really seen myself as this voice of anybody, but more of as a bridge.

I think the work really only matters if it's looping back to the communities that shaped it in the first place. In every space and in every country I've worked in, listening has been far more powerful than leading. I would say the most innovative solutions usually start with the quietest voices and those that are most often overlooked. For example, at NAMI NextGen specifically, and with many youth-led works and projects, we design initiatives rooted in lived experience as we've been talking about. But as Isaac was saying, making sure that young people are leading the work rather than being tokenized in it.

In my other global health work, for example, I co-founded an initiative called PuntoSalud in rural Argentina where we co-developed with local communities

and AI-powered WhatsApp chatbot to share health information throughout the health systems. But every single feature we built came from community interviews and focus groups, not our own in-house assumptions.

In Nepal as well, I've conducted community needs assessments around maternal health. That work began with conversations with mothers and local health workers and health admin about what care even looks like when hospitals are miles and miles away from homes and communities. Really staying close to people's lived realities, their stories, their fears, their hopes, keeps my own advocacy more human and more accountable. For me, that grounded piece means remembering that advocacy in no way is about being the loudest in the room, but again, making sure that those who have been historically unheard, finally have those spaces to be a part of the conversation in the first place.

Stephanie Rober...: As someone who is a huge introvert, I thank you, but I love that the voice of the people you're working with and it's the validation piece and meeting people where they are is just so incredibly important in this work. This piece about it, I have anxiety, it's not as bad as, but if it's debilitating, if it is affecting your life, then that is important. Being that bridge, is so vital and you doing this work is... I want to say vital again, but it's just incredibly important. Thank you again for sharing that.

Then Caitlyn, I'd love to talk to you about how you've worked across so many platforms, writing, mentoring, volunteering, music, and faith-based work. How do you stay grounded and maintain balance while leading in so many spaces? I think we talked about this before, we hear the term self-care a lot. Self-care and I'm like, "What does that mean? Give me some tips." I'd love for you to talk a little bit more about how you personally stay grounded with all this that you're doing.

Caitlin: Yeah. I think staying grounded for me can really fall into two buckets. The first bucket being leading with intentionality. What I mean by that is, I am lucky to be in a position where I can really pick and choose what I want to focus on. For example, NAMI NextGen, the advisory board had an incredibly competitive application process, and I'm not normally someone who applies to incredibly competitive things, but I really did feel like the mission behind NAMI NextGen, what they were hoping to accomplish in 2025 was something that really aligned with who I am at its core. Rather than apply to 10 different internship opportunities hoping I landed on one, I really just applied to NAMI and I threw my entire heart into set application.

I really do think that was a more grounded way of going about figuring out how I wanted to spend the next year, because rather than just throwing balls into a bunch of buckets and hoping one would stick, I really did pick something that aligned with who I am at my core, and I really do think that's helped me actually do well within the opportunity because every time I take on a project with NAMI, it's something that I'm interested in. It's something that I'm passionate about and it's something that I feel like I can actually contribute and make a big difference.

Another important aspect of that for me is self-care. I'm not a big self-care person in the traditional go meditate sense, that's never stuck with me. Whenever I'm in like a DBT skills group or a therapy class or whatever and they're talking to me about self-care, I usually don't relate to a lot of the self-care methods that are thrown my way just because I'm not someone whose brain shuts down easily. A meditative app has never spoken to me, but I do very specific things that I find grounding.

I go on really long walks in the morning with my mom and just taking an hour out of my day to talk to her, see how she's doing and just be in nature is really nice, and it's a flashback to childhood because we used to go on nature walks together, and that's one of my favorite childhood memories. Just being very intentional in what activities I choose to pursue in the first place, and then being very intentional in self-care activities is really what helps me stay grounded.

Stephanie Rober...:

Yes. I just learned some tips from you as well, so thank you. The meditation piece is real. I've been told often to meditate. I'm like, "Do you know how many thoughts are going on in my head at one time? There's too many fighting priorities and there's music sometimes, and it's just that whole like there are 10 tabs open in my head and then there's some music coming from somewhere." I think there was a TikTok on that. I'm like, "That's true." That's not just self-care. It's not just sitting in silence. And by the way, meditation is not just sitting in silence. That's a whole other session that we could do later on. Up in nature, getting grounded again at all, so that's very important as well. Thank you so much for sharing that. We have a few minutes and we have a lot of questions, and so I'm just going to look through them real quick.

I do have one other question, but I think I'll say that to the very end. I want to get to a couple of the questions that our audience members are asking. There was one that I really appreciated about, I guess going back to this concept of belonging and being understood, and this can go for anyone who is open to answering it. If there's something that someone did or said that made you feel understood through their actions, what is that? Can you think of a time where someone made you feel understood through their actions or through their questions or just through talking with you?

Ernesto Isaac L...:

One that immediately comes to my mind and Caitlyn, I'm going to go to your point of thinking, "I'm not someone who applies to competitive things a lot," that was me about two years ago. The best piece of advice I got was when I first started my role here at Harvard, which was already an OMG moment and my early professional career, I remember I started networking with other young professionals, and it is one of those one where I actually don't think the other person realizes how much of an impact it had on me.

But I remember I kept asking people, specifically young advocates of color, how do you comfortably take up space, especially when you grow up in a family where this is never talked about. You're never supposed to take up space. The best use of advice I got was, "No one is going to make that space for you unless you do it yourself. You should let the people in power tell you no." For example,

people who read my application, they can tell me no if I don't qualify or not, but why would I tell myself no before they do?

That one tiny advice has pushed me through so many applications where I doubted should I even apply to this, including NAMI NextGen actually. I went, "You know what? I'll just let them tell me no," and they didn't tell me no, and now I'm here. I think that's one thing that's really stuck with me and become a bit more comfortable with taking up space, especially growing up in a family where mental health and myself, I'm told not to take up space at all. That's definitely stuck with me up to this day.

Srihitha Dasari: I 100% mirror everything that Isaac was saying. I will also say a little add-on piece to that is during my own and very early advocacy work, a mentor once told me, "Your story is powerful, but you don't owe it to anyone," and I think that really stayed with me. It was the first time that someone recognized that mental health storytelling and the space should come from your own choice, but not any source of pressure. It made me feel deeply understood as both an advocate, but also as a person, and reminded me that this aspect of compassion also means protecting people's boundaries, and that's especially important in this space.

Stephanie Rober...: Does anyone else want to respond to that? I was realizing I'm writing everything down because oh my goodness, you all are just saying such phenomenal things. I'm like, "We had this recorded. I can look at it later on." Did you have a question? No. Okay. Well, I am looking at the time and I'm going to ask this question that I want all of you to try to answer. Again, this has been phenomenal and I'm glad I just remembered it's reported, so I can go back and look at it again, and everyone who registered is going to access to this as well. But what gives you the most hope when you think about the future of mental health in your community? We can try and do the alphabetical order again if you all want to.

Video: Yes. What has been giving me the most hope is spaces like this where young people perspectives are being invited and embraced and embrace, and also, just organizations like NAMI that have these boards not as a form of tokenization, but also as using our ideas and implementing them and allowing us to also make the change that we want to see. Yeah. You guys are my hope.

Caitlin: Yeah. I agree with everything Areli just said. I also think that what gives me the most hope is that when I was first starting out my mental health journey, I had a family member who was very supportive. I think she's on here now listening, but she shared with me her therapy materials. She had been in a DBT type program and I was about to enter one myself, and she just really showed me everything she had learned and how it impacted her. To this day, that's probably the nicest thing anyone has ever done for me. But additionally, that was maybe a year before I found NAMI. When I found NAMI, I realized how many more types of those connections I had had back to back to back. Everyone who goes to NAMI, even at the local level to find support is so open, so willing to share what's helped them.

If you stay on these groups long enough, you'll find out that a lot of the themes may be the same, but you can talk about the same mental health topic with 10

different people and get 10 different answers. Really just local NAMIs bring me hope. NAMI at the grassroots level brings me hope. I started off with NAMI at NAMI County Maryland, and I really found a lot of hope there. I don't think I would've even known about this position or applied for it if I hadn't gotten the confidence from by local NAMI, so grassroots advocacy really continues to bring me hope.

Ernesto Isaac L...: You all are so wholesome. For me, whenever this question comes up, I always bring up my younger nieces. I am an uncle. I feel old every time now. One is 16, one is 12, in my head, they're both under 10, and they always give me a lot of hope because a weekend or 2 weekends ago, I got to be in California and see them in person. They're just so comfortable talking about their mental health with me. Talking about anxiety or belonging or friendships at their age is so natural when they talk to me, and it's a huge contrast.

I think of when I was their age, I didn't have a family member who was that for me, but for them, I am the uncle that they do go to say like, "I had a lot of anxiety about this," and they'll just rant about it. Or, "I did this random achievement and they wanted to share it with you." Sharing their joys as well. That continues to give me hope because it reminds me that, "I am a role model for my nieces and that it is breaking intergenerational traumas even if I don't think it's at times." They always remind me and reground me and remind me of the hope that is there.

Srihitha Dasari: In addition to everyone on this call, you all are my role models and everything that you've been saying has been so resonant with everything I've come into contact within this space. But I would also say, for me, hope also comes from shifts in culture, so more youth speaking up, more communities listening differently, more systems starting to meet people where they are. I think there's also hope with probably what we've seen throughout today in how mental health is becoming more intersectional and people recognizing that aspects like race, culture, gender, and policy are all very powerfully shaping well-being in their own ways.

Stephanie Rober...: Thank you all. I will say that you all give me hope. To be completely transparent, and I told this group right before this that I was having an anxiety attack. I don't feel that now, because listening to you all, just being in a space with you all has been amazing. I'm privileged to be in a space to share it with so many other people. Thank you. I am going to go to bed after this though. I have calmed down a lot, but I'm exhausted. You all are phenomenal and you give me hope. Thank you. I think Dan wants to talk about the hope as well.

Daniel Gillison: I do. Thank you. Yeah. You read my non-verbals. What gives me hope is you, Stephanie, you Brandon, and NAMI NextGen leaders here. That's what gives me hope. You guys are the future. Stephanie, no one would've known that you navigated anxiety... We're all perfectionists. We're all type A, so it goes with the territory and what you got into in the conversation was very fluid, organic and caring. It put you in a situation where let's roll and let's talk.

To NAMI NextGens, Ernesto Isaac, you talking about you feeling old? Well, I feel like the old, old uncle when I listened to you all. You are my nieces and nephews, quite frankly. I'm very proud of the voices that you bring to the work. This is not about tokenism with NAMI, and you all recognize that, and we appreciate that and we appreciate what you do, how you are sharing and how you're changing the conversation and looking at systems differently than they have been for the legacy of what I call the mental health industrial complex. It needs to change. You are the change makers. That's what gives me hope. What gives me hope is all of you all and Stephanie and Brandon and some of the younger people than the more tenured person that I am. That's what gives me hope and sessions like this.

Stephanie Rober...: Thank you all again, and thank you, Dan, for being here. I know we are a little over time, but that hope piece, we definitely needed to spend some time with. Thank you, and thank you all for joining us today for our mental health summit and to just Brandon and to NAMI NextGen, this commitment to equity and improving access to mental health care as never been greater. We know that together we can make a positive difference in the lives of millions, and we want to do that with you all.

To learn more about our work on CHEA and focus on equity, you can visit nami.org/chea. I think it's been put in the chat a couple of times. We'll make sure that you all have access to it afterward as well. With that, we'll be wrapping up today's session. Again, thank you all so much. Thank you for being here, for being a part of this, and I hope you all have a wonderful day. Get some rest. Self-care in whatever way you define self-care. Again, I'm going to go take a nap, and then thank you so much.

PART 4 OF 4 ENDS [01:44:21]