

Dan Gillison:

Good afternoon, everyone. I'm Dan Gillison, CEO of NAMI. And it's great to be with you for our virtual town hall, hosted in partnership with The Steve Fund.

For nearly 50 years, NAMI has been a trusted voice for people affected by mental health conditions. We've worked to build understanding, expand access to care, and create a sense of community and hope. That same mission is driving us today as we face a growing youth mental health crisis. Too many young people are struggling right now. Nearly one in three adolescents is affected. They deserve care that's timely, accessible, and compassionate, so help reaches them early and reminds them they're not alone.

At NAMI, we also know this can't be done alone, community collaboration is key, reducing stigma, ensuring continuity of care, and building bridges across schools, health systems, and community organizations. When we show up together in classrooms, faith communities, and neighborhood spaces we meet people where they are in ways that feel real and trusted.

Today is a moment to come together, families and caregivers, educators, community leaders, youth advocates, and mental health professionals for an open and honest dialogue about what's driving the need for awareness, connection, and culturally responsive care, especially for young people from Black and other underserved communities.

We are privileged to be doing this alongside one of our partners, The Steve Fund, a nonprofit dedicated to promoting the mental health and emotional wellbeing of young people, particularly those from underserved and under-resourced communities.

Our theme, It Takes a Village - Supportive Communities for Young Adults is about just that, community. None of us, I repeat, none of us can do this work alone. The idea behind the proverb, It Takes a Village, is simple but powerful. When families, schools, faith groups, and neighbors all play a part, young people have a better chance to grow strong and find hope.

We see that truth every day in our work. Change happens when communities come together with compassion and purpose. Now take a moment just to come back to that word hope that I mentioned earlier. Let's think about that word. If you are hopeful, then there is connection. If you're hopeless, where do you start?

So a supportive community offers belonging, purpose, and connection. It's about being present, listening without judgment, and showing up when it matters most, so every young person knows they're not alone. That's the spirit behind today's town hall. It's about moving beyond words to action. And building a true village that dares to care. We don't just talk about caring, we show it. Through our Community Health Equity Alliance or CHEA, we work hand in hand with our NAMI state organizations and affiliates, community organizers, faith leaders, and national partners to make sure help is available in ways that feel safe, inclusive, and grounded in trust.

Through Seize the Awkward, our national awareness campaign with the AD Council and the American Foundation for Suicide Prevention, we help young people feel confident, checking in on friends and talking about mental health. Reminding them that it's okay to not be okay.

We also are reaching college students through NAMI on campus chapters across the country, creating peer-led spaces for education, connection, and support that make a difference every day.

And through NAMI Next Gen, we're lifting up young people and young mental health leaders whose energy and lived experience are already shaping what comes next. More than 700 young people applied for just 10 spots in our first year. And their passion has inspired us to create two voting positions for young adults on NAMI's national board. Ensuring youth voices are part of every decision we make.

That spirit of youth leadership and community partnership is what today's town hall is all about. It's time to learn, share, and keep building the kind of connections that help every young person to feel seen, supported, and valued.

Now it's my pleasure to introduce Stephanie Robertson, director, Mental Health Equity Innovation at NAMI, who will kick off the rest of the town hall. Stephanie?

Stephanie Robertson:

Thank you so much, Dan, for being here today and for welcoming everyone to what is going to be an amazing panel and discussion. My name is Stephanie, director of Mental Health Equity Innovation here at NAMI, and really grateful that you all are here today to join us for this.

This session is a part of a continued partnership, as Dan said earlier, between NAMI and The Steve Fund, which began several years ago with a shared commitment to supporting the mental health and emotional wellbeing of young people in underserved and under-resourced communities. We are grateful to build on that partnership today and to continue strengthening it through ongoing learning, collaboration, and community connection.

So for today's session, It Takes a Village - Supportive Communities for Young Adults, one of our main goals is to think together about what it looks like for communities to truly show up for young people in ways that are meaningful, supportive, and sustained.

Before we begin, I do 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 may contain 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 care for your mental and emotional wellbeing. Please feel free to step away at any time. And remember that you are not alone. For more help and more resources, you can contact NAMI's helpline if you're in a crisis call or text 988. And nami.org is also an available resource for you.

At NAMI, we are committed to mental health equity, which is the work interwoven into everything we do. And at the heart of one of the initiatives I've been fortunate to lead, the Community Health Equity Alliance, the goals are to expand culturally responsive care and build a sustainable model for equitable mental healthcare in Black African ancestry and other minoritized communities. Aligning with NAMI's overall mission to ensure that people prioritize their mental health, get help early, and receive the best possible care.

We are committed to working alongside our over 650 state organizations and affiliates to expand our reach, raise awareness, and ensure that communities facing the greatest systemic barriers have the support they need and deserve.

So throughout today's session, we're going to discuss practical, culturally responsive strategies that help us better respond to the needs of youth while centering the real life experiences of young people and their families as the foundation for meaningful change in mental health care and advocacy. And so we are honored to be joined again by an incredible group of speakers and panelists today. Dr. Annelle Primm, Dr. Laklieshia Izzard, Sara Taylor, Dylan Keith Humphrey, and Vernon Jones III, along with our moderator, Dr. Gina Duncan. Each brings a unique perspective grounded in research, clinical practice, community leadership and lived experience.

In just a bit, you'll hear from each of them about who they are and why this conversation is so meaningful to them. We are also, again, deeply grateful to The Steve Fund for their partnership and continued leadership in advancing the mental health and emotional wellbeing of young people, particularly those in under-resourced and underserved communities.

The research and data have helped elevate the urgent need for mental health care and supports that are responsive to the experiences of young people and families who are living with mental illness. You can

learn more about their work at stevefung.org. And we'll also save time at the end of today's session to review resources and present those resources and contact information again.

So thank you all again for being here. We're so glad you've joined us for this important conversation about community, connection, and collective care.

The Community Health Equity Alliance, which has been mentioned a few times already, envisions a world where minoritized and resource-limited communities have equitable access to mental health care, grounded in empathy, compassion, and understanding. In 2025, CHEA's efforts have centered on ACE, or Amplify, Convene and Expand, which is delivering culturally responsive resources, focusing on bringing together stakeholders, fostering collaboration and strengthening partnerships to drive lasting change in mental health equity.

CHEA also leads initiatives like the Crisis Can't Wait campaign, which will be one of the resources we talk about at the end, a toolkit designed to help communities navigate mental health crises and recognize signs before they escalate.

And now, it is my sincere pleasure to go ahead and get started with the panel and introduce Dr. Annelle Primm, Senior Medical Director with The Steve Fund. Dr. Primm is a Baltimore, Maryland based community psychiatrist who currently serves as a senior medical director for The Steve Fund. And has been engaged as an advisor to the organization since 2014. Dr. Primm was previously Deputy Medical Director of the American Psychiatric Association and led its Office of Minority and National Affairs from 2004 to 2015. She received her undergraduate degree from Harvard, her medical degree from Howard, and psychiatric training and master of public health from Johns Hopkins. Dr. Primm is a distinguished life fellow of the APA and a fellow of the American College of Psychiatrists. Dr. Primm is not only impressive on paper, she's compassionate, thoughtful, and has been truly wonderful to get to know. I'm going to go ahead and hand it over to Dr. Primm now, who will begin by sharing research from the studies conducted by The Steve Fund and their partners.

This work focuses on understanding mental health challenges and wellbeing among young adults, families, caregivers, and providers, and on identifying what effective support currently looks like and where we can strengthen it. I will go ahead and hand it over to you, Dr. Primm.

Dr. Annelle Primm:

Thank you so much, Stephanie, for your kind introduction. And good day, everyone. I'm going to start by telling you about The Steve Fund, a little bit about our mission and vision. So next slide, please.

So The Steve Fund's mission is to promote mental health and emotional wellbeing of all young people, particularly young people from underserved and under-resourced communities by equipping them, their families, educators, and mental health professionals with the knowledge, skills, and community support needed to achieve their full potential.

And in the next slide, our vision, which is that every young person is fully supported by peers, families, communities, and institutional cultures that value and contribute to their emotional mental health and wellbeing. And all of this leads to them reaching a healthy and productive adulthood so that they can thrive and be vital contributors to their family, community, and society.

I'd like to now share with you in the next slide some of what our research that we have been undertaking. And in the next slide, would first like to highlight the three different surveys that we have undertaken with our colleagues, College Student Mental Health on Campus Survey that we undertook in collaboration with the Harris Poll. The HBCU Student Mental Health Survey in conjunction with the United Negro College Fund and the Healthy Minds Network. And the Mental Health Support for Black Families Survey that we conducted in collaboration with the Child Mind Institute.

And what the research from these studies has shown us in terms of mental health challenges is that our college students, 51% of them, rate their mental health as fair, poor, or terrible. And among the HBCU

students, nearly 60% experience a mental health problem, 40% with depression, 32% with anxiety. And in our Mental Health Support for Black Families Survey, which included a cohort of Black young adults, they reported two out of three mental health episodes being treated, which means that one-third of those episodes were going with unmet needs.

Next slide, please. In addition, academic and social stressors drive mental health concern. And we see this from our college students, given that they experience threats, cyber bullying, policing and racial profiling, and these represent significant environmental stressors that have an impact on their mental health.

Among HBCU students, some of the top mental health stressors that were reported include academic pressure at 45%, family and social relationships at 42%, and grief at 26%. And for our Black young adults and parents, they experience multiple stress-inducing experiences.

Next slide, please. There is a growing awareness and openness to mental health support, and this is good news. We found this with our college students who said that they are more aware of and likely to seek mental health services than in 2017, when we did our first survey of college students in collaboration with The Jed Foundation. And our HBCU students, while utilization may be lower than national averages, there is a growing culture of help-seeking. And then among young Black adults and parents, we find that they are expressing positive attitudes towards mental healthcare despite some of the persistent concerns surrounding this.

Next slide. Families and friends are primary sources of support. We saw this reflected throughout all three surveys. With the college students reporting being more likely to turn to family mentors before they turn to mental health professionals. And among the HBCU students, they reported friends and family as being the top choice for non-clinical help-seeking. And then with our Black families and young adults, friends and family topped the list for young adults seeking mental health information.

And so next slide, please. I think that concludes my comments. But I think with what I shared, you will all agree that indeed it will take a village to support the mental health needs of our young people. So back over to you, Stephanie. And thank you all so much for your attention.

Stephanie Robertson:

Thank you so much, Dr. Primm. We're going to now shift to our panel, which is going to bring this research to life by helping ... those with lived experience, family members, professionals share their own perspectives. You're going to hear from them and hear their stories. And together they will help us reflect on how community belonging and care can make a meaningful difference in the lives of young people.

So I'd like to go ahead and introduce our moderator for today's conversation, Dr. Gina Newsome Duncan. Dr. Duncan is a board certified adult psychiatrist in private practice. And serves as the lead mental health expert for The Steve Fund's family coroner. She earned her BS in chemistry from Hampton University, her MD from the University of North Carolina School of Medicine, and completed her residency in the NGH McLean adult psychiatry program at Harvard. In her practice, she uses a strengths-based approach to treating adult mood and anxiety disorders as well as ADHD through both medication, management and psychotherapy. She also regularly presents and consults with community, faith-based, academic and professional organizations. We are so grateful to have her guiding our conversation today. And so I'll now turn it over to Dr. Duncan to introduce our panelists and lead us into this important discussion.

Gina Duncan:

Okay. Wonderful. Thank you so much, Stephanie. It is my just honor and pleasure and privilege to be with you all today. Really, really looking forward to the discussion that we are going to have this afternoon. These are such important topics.

And when it comes to the mental health and wellbeing of young people and families, I can say that I am both professionally very invested in this, but also personally as a parent myself. And so very, very much looking forward to the discussion that we are going to have.

And so it is now my privilege to introduce our panelists. I would like to first introduce Dr. Laklieshia Izzard. Dr. Izzard is the second vice president of the NAMI board of directors and previously served as a director, board member for NAMI, Georgia, and a program leader and trainer for multiple programs and initiatives for her local NAMI affiliate in Rockdale and Newton Counties, Georgia.

She advocates on federal and state legislative levels for those with mental health conditions to remain out of the criminal legal system. And spreads awareness on diversity, equity, and inclusion to support underserved communities. Dr. Izzard currently serves on the Georgia Department of Behavioral Health and Developmental Disabilities Advisory Council. And developed the first counselor connection support group as a NAMI Georgia program.

To focus on diversity and mental health in the BIPOC community, she established NAMI Georgia's Diversity, Equity and Inclusion Committee, and moderated their first courageous conversation series on diversity and mental health, which led to hosting their first African-American male mental health symposium. She is trained in the NAMI Connection Support Group, NAMI Smarts, and NAMI Ending the Silence. Dr. Izzard has written several faith-based therapeutic publications, is the recipient of multiple awards and recognitions within her local NAMI community. And holds a master's in mental health counseling from North Carolina A&T State University. A bachelor's degree in psychology from Fayetteville State University and a doctorate in counselor education and supervision from Argosy University, Sarasota. So thank you, Dr. Izzard, for being with us.

I will introduce our next panelist, Sara J. Taylor. Sara Taylor is the founding president and chief executive officer of Positive Steps. In addition, she is employed as a training specialist and community liaison in western New York, where she focuses on social justice and diversity, equity, and inclusion initiatives.

Sara's over 20-year career across multiple industries ranges from direct care frontline social work to senior level administrator. Her entire career has focused on empowering and motivating vulnerable populations, including individuals with disabilities, homeless and low income populations who often face barriers related to obtaining employment and career advancement. Sara's influence and credibility are also seen in her work as a community leader, working on boards with policymakers, philanthropists, and other stakeholders who are collectively dedicated to improving outcomes for vulnerable populations and advancing racial equity strategies.

In 2019, Sara found herself frustrated while navigating the complex mental health system trying to access services for her child. And convened a group of parents and caregivers of color who decided to elevate their voices and address the inequities across the mental health system and develop peer support and resource groups for Black and brown parents with similar experiences. And together they birthed the vision for the Black indigenous people of color, BIPOC PEEEEEEK mental health, a parent mental health project. The website is bipocparentvoice.org in upstate New York. She obtained her master's degree in human service administration from St. John Fisher College, Rochester, New York, and has received various certificates in leadership, development, family, peer advocacy, and ministry.

And then for our two student panelists. We are so excited to have joining us as well. Vernon Jones III, who is a graduating senior from Hampton University, my alma mater. Vernon Jones III is a dedicated psychology major at Hampton University pursuing double minors in sociology and leadership studies. Guided by a passion for mental health advocacy he strives to create spaces where individuals within the African-American community can access the care, understanding, and empowerment they deserve.

His experiences have blended academic study with hands-on service, including his internship at Purposed Healing, LLC, where he works under the mentorship of a licensed clinical social worker. And his role at River City Comprehensive Counseling Services in the Veteran Employment Program, supporting veterans as they reenter the workforce.

At Hampton, Vernon leads with integrity and purpose. As president of the Hampton Man Initiative, he helps foster brotherhood and personal growth, encouraging young men to embody excellence in every aspect of their lives. He has also served as Mr. Peer Counselor, collaborating on campus-wide mental health initiatives that promote open dialogue and self-awareness among students.

Beyond campus leadership, Vernon remains deeply motivated by his long-term goal of becoming a licensed clinical social worker or psychologist. He envisions a future where more Black professionals are represented in mental health spaces and communities and have greater access to compassionate, culturally competent care.

And then last but not least, Dylan Humphrey, who is an advisor with NAMI Next Gen and a student at Emerson College. Dylan Keith Humphrey is a passionate storyteller and advocate in his sophomore year at Emerson College as the Norman Lear Scholar. In his advocacy, he emphasizes the importance of listening to listen rather than merely waiting to respond.

Dylan's journey is rooted in a commitment to empowering youth and dismantling stigmas around mental health, particularly within communities of color. As the co-founder of Fourddo, he and his sister have served thousands by raising awareness for causes that affect today's youth. Their previous partnerships include No Kid Hungry, UNICEF USA, the Bezos Foundation, and Nike.

Their latest initiative is Duology, Days of Mindfulness Tour, a nationwide initiative dedicated to fostering mental wellbeing for youth through creativity and collaboration. Recognized as a social impact entrepreneur, he advised Young Futures Org's Under Pressure Review Fund powered by the Melinda French-Gates Pivotal Ventures, Susan Crown Exchange, the Goodness Web, and in collaboration with Harvard's Center for Digital Thriving. He is involved in the Foundation for Social Connections Youth Voice working group in collaboration with Pinterest. He will ensure that the youth voice is involved in the Made By Us Youth 250 Bureau with the 250th commemoration of the United States.

As a member of NAMI Next Gen, Dylan contributes a perspective rooted in understanding and collaboration to address the diverse needs of people affected by mental health. He is unwavering in his dedication to connecting and continuing his work in advocacy with his love of storytelling. In his free time, he is a foodie, loves a solid horror movie and is an avid reader.

So I thank you all for listening as I introduced each of our panelists. Just so excited to have this conversation with all of you. And just to give you a sense of how we have our time structured, there are several categories or topics that I thought we could go through. And we'll just go ahead and dive right in and then have time to open up for questions from our audience.

So to kick us off, I think that the first area that it would be helpful for us to address is just understanding the landscape. And so I would love to hear from each of you, from your vantage point, whether that's as a mental health professional, a parent, or a young person, what are the most pressing mental health concerns facing young people today?

And I'll open that up to all of you, but perhaps Dylan and then Vernon, maybe you can kick us off. And then we'll go to Sara and Dr. Izzard.

Dylan Humphrey:

Yes. Well, it's such a joy to be here with you all and to share this space, I'm very honored. To answer your question, Dr. Duncan, I believe it's important to think about time right now. And when you ask, what is the most pressing mental health concerns? Well, they all are right now.

And young people don't have the time to think about their mental health, think about their wellbeing. And it's because it's difficult to curate your own safety right now. School, these various social media platforms that are running rampant, home, I mean, home can be a safe space, but it's not a guarantee. And all of these spaces that aren't safe are further exacerbating our loneliness, our isolation, our apathy towards one

another and emphasizing our disconnect. And so I think we need to support those safe spaces so that they can be safe for our young people.

Gina Duncan:

Absolutely. We'll go on to Vernon now. But Dylan, I was just making a note of what you said, difficult to curate our own safe spaces, our own safety right now. And that's definitely a term I think would be great to come back to. Let's see, Vernon, what are your thoughts about this?

Vernon Jones III:

Yes. Piggyback off what Dylan said. I do feel like a lot of students in my community worry about their next steps. Having to go into this world with a lot of different things happening at the same time. And trying to figure out where they can fit into this new and constantly changing landscape. So just being able to understand what next steps can be taken, how we can be able to be ourselves while also taking those steps as well. I think it's something that's been a pretty big concern.

Gina Duncan:

Sara, what would you say about this in terms of these greater challenges that we're facing right now?

Sara Taylor:

We're up against a number of challenges, that were mentioned, particularly things that are glamorized on social media, that are glamorized and not necessarily healthy for our young people, but it's glamorized. And that's what they know, that's what they see, that's what is popular to them. I think we also, still where we are today, have not figured out how to create those non-clinical spaces that are welcoming to our youth in underserved communities. That we know may not engage in traditional care or even understand how to engage in it. So have we created clubhouses and models where youth in underserved communities can go and be met where they are, not things forced on them, but met where they are and educated in that way? So creating spaces, given our current environment and where we're at, that really meets the needs of youth as it relates to mental health.

Gina Duncan:

Great. Thank you. And then Dr. Izzard, how about you?

Dr. Laklieshia Izzard:

Well said all of my esteemed panelists before me. But first, let me give a big thank you to NAMI National as well as The Steve Fund for inviting me to be a part of, I think, this dynamic and truly impactful discussion on today.

But I do, I agree with what Mr. Dylan said, that many of these challenges are all pressing, but of course, there are specific areas that we want to key in on. And one that I have seen frequently in my practice in serving young adults and young people is the amount of trauma that they have experienced and that they have witnessed. And when I say trauma, I'm talking about mounds, I mean, just so much trauma that this generation has seen. And I do firmly believe that this generation has seen more trauma than any generation in history. And so we're looking at from school shootings, to natural disasters, to community violence, to political unrest, I mean, to racial inequities, health disparities, I mean, you name it, this generation is experiencing it.

And I think for many of them it's overload. And so as a young person, your brain is still developing. And so then trying to combat all of this trauma all at once definitely will compromise your mental health. So I think that's one of the key areas that I have seen in my practice that is really, really pressing.

But then also in my work with HBCU students on their campus, I have seen a lot of anxiety, a lot of depression. I think some of that also is due to a lot of the trauma that they have seen as well. And then also looking at the suicide rates, that have truly, truly rapidly increased for many of our young people. To piggyback on what Sara was saying, looking at social media, looking at lifestyle comparison, also looking at body image, body image challenges.

So quite a few of these areas I have seen working with young adults in my area that are truly pressing. Sara also mentioned learning how to create some of these safe spaces that are non-clinical for our young adults. I was blessed to develop and create my own Black Men's Mental Health Symposium. And absolutely, I love for young Black males to attend that because suicide is the third leading cause of death for young Black males. And so again, when we're talking about creating these safe spaces, we do want to meet them where they are. We want to go into the community where they are at, where they feel safe. And then absolutely sharing with them great resources like NAMI. So I always have NAMI present at that particular symposium.

Gina Duncan:

All right. So well said, Dr. Izzard. And I'm hoping that you all can hear me clearly, I will try to adjust my microphone more if need be, let me know. But yes, so very well said, Dr. Izzard. And that really is a nice segue into this next section of the conversation.

And Dr. Izzard, I was going to come to you first for this question, so perfect timing. Which is having to do with professional mental healthcare and access. As you have identified, this generation of young people is probably experiencing a greater degree of trauma than perhaps any before. And just trauma layered on top of trauma. So the need is great.

But yet when it comes to being connected with the mental health community, being able to access care, we know there are challenges. Now, as Dr. Primm already presented, the research says that students are more likely to turn to trusted family members, friends, and mentors first instead of mental health professionals.

So I guess the question that I wanted to pose to you is, what does this reveal about trust in professional care and how professionals should structure support and systems for young people and families with this information in mind?

Dr. Laklieshia Izzard:

Thank you for that loaded question, Dr. Gina. But absolutely, and I think we're going to get to this a little bit later, but when you talk about the approach with young people, realizing that there may be strong mistrust. And absolutely we can understand that there may be distrust to mental health professionals because of things that we've seen in the past. Such as when we look at the Black community, we can go all the way back to the Tuskegee experiment. That lets us know again that there's been generational trauma and mistrust as it relates to medical professionals, even stemming all the way back to that experiment, working with Black males that had syphilis at that time.

Actually, President Bill Clinton was the first president to apologize for that experiment and the things that happened. And that wasn't until 1997 when that apology was made. That experiment started back in the 1930s and went all the way to the 1970s.

So again, we can understand the history of where mistrust has come within our communities, especially our Black community. And so some of this has been passed down from generation to generation. So it's understandable that our young adults within our communities of color may have mistrust toward medical professionals and the clinical process.

Again, speaking about some of my HBCU student work, many of them, they are not willing to go to the counseling center even on campus, even though they know that it's there. Because again, they're not sure

what they can share that they can be trusted as far as these professionals can be trusted. So many of them are not even considering going to the counseling center.

So looking at that really as a whole and looking at other ways that we can develop a unique approach in addressing our young adults is we got to become very creative. And we do have to become very innovative as we look at partnership programming. And so I'll give an example of that.

One of our partnership events that we did with NAMI national, as well as my alma mater, North Carolina A&T State University, Aggie Pride, but that particular event, what we did was we had a panel discussion. And this panel discussion included a NAMI ambassador, it included a North Carolina A&T student, it included an elected official, and it included a professor. So that we could get perspectives from all of these particular roles. But not only did we do that a part of the discussion, we had resources that were readily available for these students that attended that discussion.

We had NAMI North Carolina, we had our local NAMI affiliate, NAMI Gilford, we had our counseling center for North Carolina A&T, and we had the counseling department that educates counselors such as myself. So again, we wanted to give them a variety of resources that they knew was available to them. And then give them the option to choose what they felt was safe and who they felt they could trust. And I'll stop there.

Gina Duncan:

Such great points. You've said so much there. And I think, just thinking in my own practice, one of the things that I do, whether I'm working directly with patients in practice or in the community is to do what you just did at the very beginning, was just to acknowledge. Yes, there's been good reason to not trust this community. Yes, there have been historic challenges and even present day. And then being able to go from there and just to start with that conversation.

Dylan, would love to ... maybe if you have a quick thought about this as well?

Dylan Humphrey:

Yeah. Well, one, Dr. Izzard hit the nail immediately. I think that communal mistrust, I also would add distrust because there's just so much information. And I think with that distrust/mistrust comes fear. And I think in moments of strife we turn inwards and we just close off everything else outside. And because of that, young people and people in general are just hard to access and hard to get to. And so how can we look in our bubble and see who can we reach immediately and try to work and, I guess, move just quickly, but a little bit more slower steps to be more intentional to reach everybody. But I think Dr. Izzard just really hit on the nail. It's about safety and fear right now. And what can you trust? There's just so much content.

Gina Duncan:

Yes, yes. Well, that kind of thing goes into our next section, which is on how we can bridge families and professionals. So we know that many young people reach out to their families and trusted people in their communities before reaching out to the mental health field or to mental health professionals.

One of the things that we are very, very passionate about at The Steve Fund, and a primary role that I play in our work at The Steve Fund, is trying to equip families with support strategies and tools and information so that families can then be prepared to help their young people and assist them when they come to them.

So Sara, I'd love to get your thoughts on this next question, which is how can families, educators and mental health professionals work together to better equip other families and their young people with the knowledge, confidence, and resources that they need even before they come into care with a mental health professional or between professional interventions? Because we know that there can be a lot that goes on

even when you are engaged with a mental health professional, in care with a therapist or a psychiatrist, there are things that go on in between visits. And so do you have some thoughts on how we can better work together?

Sara Taylor:

Absolutely. Thank you for that question. I'm very passionate in this space. We need to amplify peer advocacy more, particularly in Black and brown communities, diverse communities. I'll give you an example. In upstate New York where I reside, we recognize after two years of research that we had less than 2% credentialed family peer advocates of color. Versus who is being served.

And so we weren't going to sit and just not do anything about it. We were going to be intentional. And so when we think about trusted, credible messengers, representation matters. And we have to stop saying from a systems perspective, they don't want to get involved or we offered it to them.

What we found when we went out to educate low income communities about peer advocacy, 85% knew nothing about family peer advocacy, 85%. And when we introduced them to the career model and support services, they're like, "Why didn't I hear about this? I'm advocating for my child at school around special education with a pediatrician. How come I did not know about family support services?"

And we know that peer services is an evidence-based model, it is a proven evidence-based model, whether you're talking about youth peer advocacy or family peer advocacy. So we need to amplify that model in our communities.

And we were fortunate enough to receive some funding to really implement cohorts in underserved communities. We went out to the schools, the pediatrician offices, the community mental health centers, PTA groups, and start educating parents about peer advocacy. And said are you interested in becoming a peer to help another family?

And sure enough, after a year and a half, we have successfully through the credentialing process 35 parents and caregivers in Rochester and Buffalo are credentialed. And about 50% are actually working. So when we are talking about working in a space of community mental health centers or non-clinical spaces, we need to amplify peer advocacy. And really diversify the pool of youth peer advocates that are credentialed as well as family peer advocates, exposing them to the career pathways.

Gina Duncan:

Wonderful. That is so helpful, Sara. And you are so right in terms of highlighting the fact that peer advocacy, that is evidence-based. So glad that you shared that.

Thinking about what has already been said, about the fact that our young people are facing a crisis when it comes to mental health, we have two outstanding young people on this panel with us. And so Vernon and Dylan, I wanted to have you all share a bit if you could now about as a young person and thinking about yourself, maybe also thinking about your peers, but what makes you feel most seen, understood, and supported when adults try to engage you around mental health? Because as adults, we can come up with all the ideas that we want. But if it's not landing, it's not what you need, if it's not relevant. And again, speaking for you, whether it's personally or thinking about your peers, your generation.

And so yes, what are some ways in which you feel most supported around your mental health? And then maybe you can also incorporate how your campus environment has shaped your experience? I know, Vernon, you are at an HBCU, Dylan, you're at a NFPWY, perhaps you could incorporate that as well.

Vernon Jones III:

Yes. So I will say that a lot of students feel like when an adult does try to talk to them about mental health, they don't really listen to what they're talking about or what they're saying. And I feel like in a lot

of cases when it becomes parent and child, it's hard to bridge that gap between when you're just talking to the student, but we're not really listening to them. And I feel like a lot of my peers feel that way as well.

I will say here at Hampton, we do have a program called Peer Counselors, where students are able to work almost directly with the student counseling center. And the students who are part of the organization go through multiple trainings to be able to understand how to interact with their peers and how to deal with different conversations they might have.

And students here on campus, we've gotten lots of reports of students even having heard about peer counselors and seeing the things that we do on campus when it comes to talking about mental health or being more aware about things in regards to mental health. And students have come to us saying they really appreciate the practice. And they also, from having seen their peers talk about mental health, they want to go to the counseling center and get that help that they need.

So I feel like by entrusting the students with being able to be mandated reporters and go through trainings to talk to their peers, I think it's important that they show that student face and be that bridge from the student body to the faculty. That way everybody's able to communicate effectively.

Gina Duncan:

It sounds like that really helps to normalize things, that it's okay to reach out for help. So love that as an example. Dylan?

Dylan Humphrey:

Yeah. I'd say that, to bounce off what Vernon said, I think that right now it's important to be mindful of how much strife there is in general. And I think I want to do a quick story time. I remember I was at an event, and I had a older gentleman just point at me and he came directly towards me. And I was just sitting down trying to focus. And he just was like, "Are you good? Are you okay?" And I was like, "Yeah, I'm all right. Are you good?" And he was like, "I'm just checking in on you. I'm just checking in to see how you are." And he was an older adult. But I also think he was very aware of the social instability going on right now. And he was like, "I want to make a point to check in on the youngest person in this space just to make sure that you're good. And if you're good, I'm good."

And so I think we're a very vulnerable generation because there's been so much. So I think we respond to vulnerability that we see from older generations. I think that's what truly makes us feel engaged, supported, seen. And on campus, it's a very frenetic environment as well. And so any chance you can get to sit down with an adult or an adult sits you down to just give you that little bit of peace, I think we just need more of that. More moments of peace that adults are facilitating. It's less of a sit down, it's more of just like a, "How are you and how can I support you?" Yeah.

Gina Duncan:

Yeah, that's great. That is great. So moments of peace, sitting down, safe space. I feel like that keeps coming back.

Well, another question, and I'm going to turn back to Dr. Izzard on this. Now talking about trust and safe space and so on. Building trust and partnership, how can we ensure that care feels collaborative rather than directive, especially for families and young people who have experienced stigma, systemic inequity or marginalization? And are there some ways that shared decision-making can serve as a strategy for this process? I think we've already acknowledged that acknowledging the fact that, yes, systemic inequity and historic marginalization exists, that's a part of it. But what are some thoughts about some more active ways that we can build trust and partnership?

Dr. Laklieshia Izzard:

Thank you so much again, Dr. Gina, for that wonderful question. I think another area that we have to consider is whether or not many of our families of color are knowledgeable about some of these resources and some of these programs. I think that's always something for us to keep in the back of our mind. Even though many of us that are in the mental health field, in the helping profession, in the space, we know about many of these organizations.

I was sending out some information for the webinar and someone said, "Oh, I've never heard of The Steve Fund." So again, many times I think we take for granted that many individuals within our communities, they just don't know. There's a lack of knowledge. And so because of that, then we have to be intentional about creating spaces, creating events where we are partnering with other organizations that we know that are supporting young adults that are doing this work, just as Ms. Sara was saying. We have to make sure that we're doing our part and being intentional. And ensuring that if something is missing here, let's see if we can add this piece to it.

And so I'll give an example. I went through our county's leadership program, and when I went through our county's leadership program, one of the assignments that we were given was to do something that we felt would impact our community greatly.

My adult peers in the program, they overheard me talking about mental health, as I do so passionately. And they said, "Oh, we think that that would be a great class project." Oh, how wonderful I was for them it was to hear them say that. So what I did, I was the lead in the outreach. And so we decided that we would bring together all of the multiple mental health resource programs, nonprofits that were serving young adults, that were serving families, that were just serving the community, and to bring them all together in our downtown area. And invite everyone in our county so that they would know that these resources, that they exist. And we even had the high school jazz band to come out, the high school step team. So we did whatever we could to make sure that we were engaging our young people. And to make sure that they felt like, again, this was a safe space for them to come and learn, for them to come enjoy themselves, and for them to identify what resources was there.

Something that NAMI has taught me very, very well, and that is partnership, partnership, partnership. That is the way for us to collaborate, all hands on deck. None of us can do this work alone. And in my community, they are still talking about that mental health awareness resource conference that helped so many of our families.

Gina Duncan:

That's just so inspiring frankly. And I love the idea of what you shared about pulling in the jazz band, the high school step team, make it a community event. And I think that that's very culturally relevant in many communities of color in particular and just communities in general, to involve the entire community, involve the arts, involve other aspects. So yes, love that.

In the interest of time, I think we're going to move on to getting some closing thoughts. We've got some wonderful questions in our ... I think already that folks have been putting in the chat. So I'm eager to make sure we get to those. If we could take a few minutes now just for some closing reflection. And would love to hear from each of you just briefly on a practical, maybe one practical action item that anyone listening today could take to help them strengthen their own village of support.

And if you could incorporate just briefly, because hope is something that's so important to me, and I think I'm sure for all of us on this call today, what is something that gives you hope about the future of youth mental health? So an action item and then something that gives you hope.

And Dr. Izzard, if you want to start, that would be fine and we can go to Sara and Vernon and Dylan.

Dr. Laklieshia Izzard:

Absolutely. Thank you, Dr. Gina, again. But the first action item, practical item I would say, which is something I've learned from NAMI as well, is support, support, support. NAMI does support so well. So what I do is I try to encourage as many of my clients, as many young adults as possible to give support groups a chance. Give it a try. I've volunteered with so many support groups. Within my faith-based community we're now doing what we call life groups because of the education that I've been able to bring to them as well and the value and the importance of peer-to-peer work, as Ms. Sara was speaking about, knowing that this is evidenced-based work. So that is my one practical action, is encouraging more young adults to give it a try, at least try a support group. There are all different types of support groups that are out there. So there are many that they can take part in.

And there was a second part to your question?

Gina Duncan:

Just what gives you hope about the-

Dr. Laklieshia Izzard:

What gives me hope? I think what gives me hope is the fact that we are partnering more, that we are collaborating more with nonprofits and organizations that provide youth services, that provide, again, support to young adults. And because we are actually partnering on college campuses. Concurrently right now, NAMI national, our program, Sharing Hope, we are partnering on HBCU campuses to bring discussions around mental wellness and mental advocacy and all of those great things. So again, I think that partnership and that coming together and having these discussions, creating these safe spaces for our young adults, that is what has given me hope.

Gina Duncan:

Wonderful, wonderful. Sara, how about you, an action item and something that gives you hope?

Sara Taylor:

Thank you. The action item around partnership, being authentic in this space, beyond performative, beyond checking the box. Organization stakeholders wanting to partner with youth and families, being intentional, not just coming around when a grant is being written or a focus group, but you're around partnership.

I often say when we are asked our groups to participate in focus groups, we are more than a \$10 gift card and pizza and wings. Be authentic in this space and value us as experts, lived experienced experts, and partner year round. Not just when you want something, you're coming with your agenda already in place, with your model all ready. Allow us.

I'll give you an example. After the horrific massacre in Buffalo, the community received RECAST dollars, and that really, that massacre impacted the Black community. And so what that funding did was non-traditional, non-traditional, karate, boxing, fishing, not just clinical service access, but non-traditional led by grassroots organizations.

So allowing us to drive what our needs are and to implement through the lens of authenticity. Not coming in and saying, "Here's a pot of money, do this." But allowing us to have the flexibility to know what works for our community.

And what gives me hope? What gives me hope is hearing from philanthropy and foundations that are still committed to equity, equity, and not just equity, amplifying the parent voice and caregiver voice, allowing us to drive strategy, allowing us to review applications and decide is this parent-centered? Is this truly a equity-centered application? So partnering with private philanthropy that gets it, that continues to

amplify and understands the inherent power dynamics and really allows parents and caregivers to drive strategy and programming, that gives me hope.

Gina Duncan:

Wonderful, wonderful. Vernon and then Dylan. And then we'll go to our Q&A, we've got some great questions.

Vernon Jones III:

Yes. So I'm clear, it's the practical application and my hope for the future?

Gina Duncan:

Yes.

Vernon Jones III:

So I'd say for the practical application, I just ask all the youth in the town hall just take the opportunity to go to those events that your school might host when it comes to mental health. Go to the panels, really listen because there are times where you might go there and learn something about yourself or something about your situation that you might be in. And that might be able to help you in getting out of that situation or being able to understand yourself a little bit better.

I do feel like a lot of students see mental health or counseling or therapy and automatically think it's going to be you laying in the couch and spilling your feelings. But at times it can be something that's going to really help you internally. And don't shrug something off just off of how it sounds.

One thing that does give me hope is I believe that we're in a generation of stigma breakers. Just having seen the stats from earlier with the college students seeking help a lot more, especially at HBCUs, seeking help a lot more. We're at a time where students are starting to understand, be able to take more account into their mental health and mental wellbeing.

And at my school specifically, at Hampton University, there have been a lot of organizations that have taken that upon themselves to either host mental health events or create organizations just for mental health. And being able to see that and see people that look like me host and open their own practices, it just inspires me to want to open my own practice as well. So I just appreciate all those things I've been able to see and be able to help facilitate some of those things as well.

Gina Duncan:

Wonderful, wonderful. And Dylan?

Dylan Humphrey:

Yes. So practical action, I'd say you will never know if you don't ask. And I think that, I had a really good conversation with a student from my own Black student union on campus, and weirdly enough, we could feel the room get bigger during the conversation. And I think when you have deep questions, deep answers, deep conversations, the space just expands. And in there are various possibilities, but also room for other people. And that itself is what creating a safe space can look and can feel like.

And so being able to ask those deep questions and also make space for mess, enjoy in big emotions, little emotions, play. I think when we can just give young people and all people of all ages that open space, I think so much possibility can come from that.

And in terms of hope, to bounce off what Vernon said, as vulnerable as a generation as we are right now, we're also the most outspoken. And I think with that, as long as we keep speaking and keep having spaces

such as this where we can share what we're feeling, I think only good can come from that. And that makes me hopeful.

Gina Duncan:

Wonderful, wonderful. So we're going to move into our Q&A. We have some amazing questions that have been asked. There are quite a few of them, so we'll try to answer as many as we can. They haven't been assigned to anyone in particular, so maybe one of you could answer each of the questions as I pose them.

But before we do that, I do want to just note that we have received some very, very glowing compliments for Dylan and for Vernon. And just I think all of us on this panel are so proud to be serving on this panel with you. And just that your voices matter. And that's what's being shared by participants. For sharing your experiences and helping to understand in particular that we so often may feel like older individuals don't understand or can't understand. And so I think sharing that it does make a difference to have this collaboration and these sorts of spaces are important because your voices are so important.

So let's see. The first question that has come up talks about social health and young people and some tangible ways that communities can support young people's social health such as reducing loneliness and isolation. Those are two things we hear so much, loneliness and isolation. Would one of you like to maybe speak to that briefly and then we've got some others?

Vernon Jones III:

I can speak to that a little bit. I would say when it does come to youth loneliness and isolation, I do think that in some cases, like I said, with people being afraid to step out and go to those events and talk to people. I know at Hampton University during our new student orientation, the school hosts a lot of events where students can go out and then get to know each other.

But I also feel like it can also be something that you do as a student. If you feel like you're more extroverted, maybe go and speak to that student who might be by themselves or alone or not speaking with anybody else. But also allowing schools to take it upon themselves to host those events and maybe meet students where they're at as well.

If a student likes to be in their dorm a lot, maybe go to the dorms, have dorm chats. All the organizations here at HU go to the dorms, talk to the students about whatever might be a prevalent issue or a prevalent topic.

I do believe by going to those events, students can see that students are interested in their wellbeing, also maybe faculty are interested in their wellbeing as well. So just being able to go there where they're at, meet them. And hopefully from those events they're ready to step outside of their comfort zone and make some of those connections.

Gina Duncan:

Great. Thank you, Vernon. This next question, it says third spaces used to be a safe option for youth, but many have closed due to systemic issues and fear of young people gathering. Do you see this changing at the local level if mental health partners advocate with young people to reopen third spaces while ensuring they remain safe? Who'd like to perhaps speak to that?

Dylan Humphrey:

I could touch on that. I think that when we think about third spaces, even accessing them is hard. If you are a 16-year-old in a city, you might take public transit or ask your parents for a lift. It's a challenge to even access them. And so I think we might need to even rethink what third spaces look like for young people.

And to also bounce off what Vernon said earlier. How can we build bridges for young people? I know a friend who plays one game and my other friend plays this game. How can I connect those bridges and build a tree of interconnection in some way.

But in terms of third spaces, can there be virtual third spaces? Can we use platforms like Zoom, like the ones that we're very familiar with right now to preserve those? So things like that.

Gina Duncan:

Okay, great, great thoughts. Let's see. Okay. How can young people find therapy if they are unable to afford it? Where can they find sliding scale or free counseling services? And what steps can help them connect to those resources? This is particularly, this has been an issue, but even more, we're paying attention to what's going on with healthcare, with many people facing job loss. Dr. Izzard, would you like to perhaps speak to that?

Dr. Laklieshia Izzard:

Absolutely, absolutely. There are programs that are out there. Again, like we were speaking about before, sometimes there's just a lack of knowledge about certain things that are out there, resources that are offered and that are offered for free. There are resources that are out there that are offered for free. So there are some nonprofits that offer free therapy in communities of color, even for young people.

There are some that contract with college campuses, such as one is Uwill. They actually have contracts with different college campuses across the nation where they are offering free therapy, which is telehealth therapy though, to young people.

And then it's important to know that if the young person, for whatever reason, is being curated maybe on their parents' insurance or if they have insurance of their own, to look into seeing specifically what type of mental healthcare is covered. Many individuals forget to do that and come to find out they had coverage all along and had coverage for unlimited sessions. So that is something that is critical and important to understand.

And then the other aspect of it is for whatever reason, if this person is still having difficulty finding therapy, then please identifying the other resources out there that can support their mental health as well too. Such as what we were talking about, such as support groups, identifying a self-care plan, techniques like that that you are able to use until you can get to therapy.

We also encourage that many times for communities of color just because they're more support driven, and so they may not consider therapy first, so then it's important for them to at least consider support first until they get to therapy.

But absolutely, there are resources out there, whether it's insurance based, and then there are some that are out there too that are free. It's just a matter, again, of getting those resources and knowing where they are.

Gina Duncan:

Yes. Thank you so much for sharing that, Dr. Izzard. Sara, I'd love to ask your thoughts on this next question. One of our participants said that one of the most limited resources for Black youth is access to Black mental health professionals in residential treatment centers. I experienced this with my daughter during her hospitalizations and residential care. Now at 19 and not in college, we're trying to find where she can safely build community with other youth of color managing similar challenges. Where can she do that?

Sara Taylor:

I think every community is different. And what we learned from the pandemic was that there are some amazing virtual options. While I often encourage youth to engage with youth in therapy or alternative

non-traditional support in person, there are those that have to go outside of their community, specifically when they're looking for a clinician of color. So if there's none in your community, and you're able to engage with insurance-wide or financially, a virtual option is an option for you. There are many credible clinicians of color across the country that provide virtual support.

And one of the things that I love to see that happened came out of, again, the massacre in Buffalo unfortunately. When it happened, they deployed crisis counselors that were all white. And again, I'm not saying that someone that is not a person of color could not help. However, this was a hate-based crime that re-traumatized those in the community. So what came out of this was developing a pipeline of clinicians of color, building capacity. And it has been amazing watching Kelly Dumas and Dumas R.I.S.E. develop this process. And clinicians of color that are getting help getting through the licensing project, getting through their clinical license, setting up private practices, helping them build capacity in this space.

And I know we are not the only model in this region looking for communities that are building capacity for clinicians of color. They are out there. It's a matter of finding what are the credible, what are ones that are licensed that can meet your child's needs.

Gina Duncan:

Absolutely.

Dr. Laklieshia Izzard:

I'll add to that really quickly, Dr. Gina. Psychology Today is a great resource for many individuals to go on so that they can research therapists within their area. And also on Psychology Today, it lets you know specifically what insurances they do take. And it also will let you know if they accept a sliding scale, a fee scale. So Psychology Today is a great resource for individuals to research and identify therapists of color.

Gina Duncan:

Yeah. And actually, Dr. Izzard, I'll stay with you for this next question because I have a feeling that Psychology Today will be a resource that you would recommend with this question, but then there may be some others as well. The question is, what are your thoughts and approaches regarding cultural competency, specifically in understanding the importance of indigenous youth, staying connected to their cultural practices for their whole health and wellness? So thinking about cultural competency, connecting with indigenous youth resources, what are your thoughts there?

Dr. Laklieshia Izzard:

Again, and it goes back to something that I had mentioned earlier and that Dylan mentioned, again, looking at specific programming and events and activities that have innovatively been created specifically for young people of color. For example, we have a nonprofit here in Georgia called Fathers Matter ATL. And it's for fathers of color with children, with children of color.

And so there are multiple resources that are offered to these single fathers that are of color that have custody of their children. And they have multiple events. I'm talking about they'll do a breakfast, they do conferences, they do all sorts of things.

So again, being able to identify these nonprofit organizations many times that are right there within your local community that are targeting doing services, providing services and events for communities of color, for specifically the Black community. So again, many of them are out there, but many times individuals, they just don't have the knowledge. They don't know that they are out there. So being willing to do some research.

And sometimes it takes sometimes maybe going to a faith-based entity, maybe sometimes going to your Department of Behavioral Health that is in your local community, so that you can find out where these resources are.

I was really, really privileged this week to find out that our school system had their first conference just for special ed teachers and parents to learn how to better support our young people. And so what did I do? I offered to present. And I presented on youth suicide prevention. So again, there are all different types of events that are happening sometimes in our community that we may not be privy to, that if we're not connected to certain nonprofits, you're not going to know about it. So please, please, please make sure you are finding out about the nonprofits that are right there in your community that is doing great work to support communities of color.

Gina Duncan:

Yes. Thank you so much for that. And we talked earlier about action items or things that people can do. There's a question, Sara, about what kind of credentialing do peer advocates need to do or training that they need to receive. And I wanted to make sure we could get to this question because that represents action. That sounds like that we've got folks that are interested in getting involved as peer advocates. And so knowing the steps to take. Could you maybe share about that briefly?

Sara Taylor:

Absolutely, absolutely. Thank you. And I want to be very clear, this is a national webinar, and every state credentialing process or certification process is different. I would encourage the individual that asked the question to find out in their particular state what is the process to become credentialed as a family peer advocate.

I also know that through the National Federation of Families, there is an opportunity for training and credentialing at the national level. But it's typically when you are credentialed at the state level, you build on it to become a national, obtain your national credentialing. And again, every state is different so I can't speak in general. Some will put you through a class, some are online modules, some you sit for a quiz, some it may be writing a statement of lived experience. But every state is different as it relates to their credentialing process.

Gina Duncan:

Wonderful, wonderful. This has been just such a wealth of information. We still have some other questions and just a few minutes. I think what I'd like to do is to address these last couple of questions to Vernon and to Dylan. And then I will turn it back over.

I'm just so grateful, incredibly grateful to all of our participants and to our panelists for this time today. We've received so many just positive comments and compliments. But there was a question that, again, I wanted to address to both Dylan and to Vernon briefly. Which I think at the heart of ... speaking for myself as a parent and then also as a professional, the concern about when a young person is struggling, how do we help them?

So this question ... Actually, before I go to the actual question, I'm going to bring up a comment that came up about, one of the participants talked about being a college student volunteering with NAMI, meeting people with similar lived experiences and how that's helped them to not feel alone. And advice that you may have on holding events centered on sharing lived experiences and how to help make sure those are safe spaces.

Perhaps, as you can see, I'm trying to squeeze a lot of information into our last couple of minutes here, but perhaps you can think about that as each of you answer this question briefly, which comes to what is the best way that we could encourage young adults to seek mental health support when, particularly as family

members, as adults, we see signs of challenge, but they are denying or refusing help? I know that I made that broad, but perhaps you could each speak to that. And then I will pass it back to our moderators.

Dylan Humphrey:

I can go first and then pass it on to Vernon. I would say that, with struggling right now and being a young person, I think we need to lean in more into what's familiar versus what's relatable. And I think because there's just so much strife right now, I think you have to meet them, physically meet them at their level. Whether it is sitting down with them or sharing what you've experienced. I think just know that they're not alone honestly. Be there, text, send that email or send that DM or that video on Instagram. I think say it without saying it. And every young person is different. They might not be ready to have that conversation just yet. You can absolutely prep them for it by just reminding them that you're there, you're seeing it, and that they're not alone. And I think that's what I would say would be the best advice to best support the young person in your life who's struggling.

Vernon Jones III:

I would say in my experience, my parents have both been instituting within me that I can always go to them when I need to speak with them. And I think just that having been the basis for me, having been raised with them, them letting me know that I can always come to them and talk to them if I need to. If I need the space, they'll give me the space.

And I think that's one thing that's really important too is that our generation, there's a lot of things that we want to do, want to try and do, we tend to get really busy and a lot of things are on our minds. So they're not going to always be in the space to want to talk about that thing right at that moment. And I think if adults try not to speak with their kids or their adolescents, being able to allow them to have that space, to come back to them. Because if you try to press and talk to them in that moment, that might have the opposite effect and they just will close up, shut up, and not want to talk about it. So I think giving them that healthy space, letting them come to you is really important when it comes to trying to help us when we need that help.

Gina Duncan:

Excellent. Thank you all so much. I'm going to turn it back over to Stephanie. But I have to say that, this was shared from one of our participants, is that I will be quoting ... Actually, I'm just turning it over to Parastoo now. I will be quoting Vernon and Dylan in particular going forth from this webinar, "We are the stigma breaker generation." That is amazing. This entire panel has been one of the best and most hopeful panels I've ever listened to. So thank you all so much. It's been a privilege for me to be with you all. And I will turn it over to Stephanie.

Stephanie Robertson:

I also want to echo that and just thank you all for just being thoughtful and sharing your experiences, sharing tips, sharing ways to be able to help support young adults. I used to work actually in higher education. And one of the things I did do was create spaces where young adults could show up fully as themselves. So it's affirming to hear how important that sense of belonging still remains.

And for adults that create that space, you could join in too. I was a part of the conversations as well. It's about role modeling and really being able to be yourself. And so I appreciate everyone, again, especially our young adults sharing their stories, but also our family members, our experts for providing tips and just being here with us today.

And so with that ... And also I'm going to take a step back too though. I do want to thank Dr. Duncan, who was a phenomenal moderator. Sent her some questions, so there were a lot going on there, and she's just amazing. And it's been a pleasure working with The Steve Fund. So thank you all.

Before we close though, we do want to share a few resources. I know a few questions came up. But we're going to share some resources now and upcoming opportunities. And there will be a follow-up email in about a couple of weeks when the recording is up and available on the website that also has even more resources. But for now we wanted to share some of the more immediate resources.

And I will turn it over first to Parastoo, who is from The Steve Fund, and will be able to talk about some of The Steve Fund's resources and upcoming events.

Parastoo Massoumi:

Thank you, Stephanie, so much. And this has been such a beautiful, beautiful panel. And we're so grateful at The Steve Fund to be working with NAMI on this amazing event, so thank you. Yes, I'm Parastoo Massoumi. I lead our Family Support Initiative at The Steve Fund.

And on the next slide, you will see our QR code to scan, and it takes you directly to our Family Corner. Our Family Corner site has articles and guides and toolkits and journals and so many resources to equip you as a parent or a caregiver in supporting the mental health of your young people.

We also provide resources that focus on your wellbeing as your mental health matters too. We cover topics like how to recognize mental health warning signs, how to find the right therapist that meets your child's needs, and where to access mental health resources and care at your child's college campus, which refers to some of the questions that actually were in the chat.

And if you scroll down to our Family Corner page, you can sign up for our monthly family newsletter to receive articles and resources and upcoming events that also speak to your needs and your young people's needs.

We've placed the link in the chat as well so that you can access our Family Corner site there or scan the QR code. We also placed a link in the chat for one of our other sites called My Digital Sanctuary. And this site has amazing resources specifically for young people. There's videos on there, again, there's guides, there's journals that we would love for you to check out.

On our next slide, we have our Steve Fund Crisis Text Line, where your young person can access a counselor 24/7 by texting Steve to 741741. The number is in the chat as well. We really encourage you to have your children actually save this number on their phones so they can access a counselor whenever they need any time of the day.

We also have our contact information here. You can reach us at info@stevefund.org. And if you're an organization, K-12 school or district, a college, medical or mental health center or company, you can also request our wonderful workshops and webinars led by our renowned mental health experts like Dr. Duncan, for students, for families, and for your staff.

And please follow us on social media at The Steve Fund. All of our information is in the chat about that.

On the next slide, we have an amazing upcoming event. I think it's two slides from now actually. And this event comes out at a perfect timing around the holidays. It's going to be on December 3rd from 5:00 to 6:30 PM. And the event is designed to support youth and families during the holiday season. It can be a joyous season, but for some the holidays may also bring about feelings of loneliness and grief and stress and uncertainty.

So we will be featuring a really dynamic panel of mental health experts and young people from our Steve Fund Youth Advisory Board. And they're going to be sharing best practices, tools, and resources as you navigate this time of year. And you can scan the QR code to register or click the link in the chat. And yes, this event is called Hope, Healing and Wellbeing: Peer Support Strategies for the Holiday Season. Thank you for putting it back up.

Thank you all so much for having us. And now Stephanie will cover some of NAMI's resources.

Stephanie Robertson:

I know we're at almost 4:30, so I will just talk a little bit about one of the resources of the Community Health Equity Alliance. And it's actually open to all folks, but it's called the Crisis Can't Wait Campaign. And so hopefully you'll pull up that next slide. But really it's dedicated to making mental health care navigation easier, especially during a crisis. And so through this campaign, and we will be able to provide all these resources and links to them when we do email everybody who has registered, but can provide accessible pathways for care, treatment, and recovery. And really giving people and their support networks essential resources to be able to get better and find recovery.

To find out more, you can go to nami.org/chea. And again, we'll include all of this. I know it's been ... and I'm so happy that all of you stayed with us because it has been amazing. But we will follow up with the information, all the resources that you've heard today.

So thank you all again for joining us today and for being a part of this amazing panel. Thank you, Steve Fund for being wonderful partners. And I hope everyone has a great day, great evening, great morning. And thank you again for joining us.