

CHALLENGING, SUSTAINING, AND EVOLVING:

An Anthology on Youth Mental Health Advocacy (and Hope)

A report from Mental Health America's 2022-2023 Young Leaders Council



ACKNOWLEDGEMENTS

Founded in 1909, Mental Health America (MHA) is the nation's leading national nonprofit dedicated to the promotion of mental health, well-being, and illness prevention. Our work is informed, designed, and led by the lived experience of those most affected. MHA's mission is to advance the mental health and well-being of all people living in the U.S. through public education, research, advocacy and public policy, and direct service.

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MENTAL HEALTH AMERICA'S YOUTH LEADERS COUNCIL

MHA's Young Leaders Council (YLC) identifies young people (18-25 years old) who have created resources to fill gaps in mental health support in their communities. Each year, members are selected from across the U.S. to participate in this six-month leadership development program.

Through the YLC, members are provided a platform to *connect*, *collaborate*, and *communicate* their ideas for improving *youth* and *young adult well-being* nationwide.

This report co-authored by the 2022-2023 YLC documents *youth* perspectives, provides recommendations, and offers inspiration for those seeking similar *change*. The report also includes highlights of YLC members' programs and leadership, with the goal of *expanding* and *replicating youth-led solutions* to the mental health crisis.

BACKGROUND

A transformational shift has occurred in the mental health movement. Young people, once relegated to the periphery of these crucial conversations, are now at the forefront. With growing attention to the youth mental health crisis, there is a newfound urgency to include the voices of young people in greater mental health activism.

Their unique *insight* and *perspective* is certainly needed. Global public health crises – physical and mental – have shaped this generation in their formative years. Young people are *embracing* their increasing *racial* and *ethnic diversity*, vibrant spectrum of *LGBTQ+ identities*, and the multitude of other intersections that shape their lives.

Young people today aren't just wrestling with the academic and social pressures familiar to most adults. They face a complex landscape of issues, from gun violence to economic inequality, from climate anxiety to a profound (and, at times, contested) exploration of their gender and sexual identity. They are reaching key milestones later in life than the generations before them, and the technology that defines their world continues to innovate relentlessly.

It should come as no surprise that youth mental health is declining.

Amid this youth mental health crisis, several young advocates have emerged to challenge the status quo, insisting that the world pay attention. Young people have mobilized, organized, and fought to usher in a new era of mental health advocacy, and they are finally being invited to the table.

Now what?

As these young advocates navigate institutionalized systems and entrenched hierarchies, they find themselves in a new dilemma, caught between **empowerment** and **disempowerment**.

On the one hand, they have **broken barriers** to serve in advisory roles, testify before legislators, and speak publicly about the need for mental health action. On the other, they grapple with the realization that **their battles are far from won**.

Established systems and power holders often **resist change**. Even the movements themselves, while ultimately well intentioned, can **perpetuate** rather than **resist stagnation**. When working toward social and systemic change, there will always be the **tug-of-war** between **idealism** and **pragmatism**, **optimism** and **pessimism**.

Progress comes slowly and incrementally within these unyielding systems; sometimes, it can feel like it won't ever be enough.

For young advocates striving to change the course of history, disillusionment is a natural byproduct. They rightfully demand more than hope; they demand tangible action, inclusive policies, and genuine support. Rather than shy away from this complexity, we should embrace it.

By their very nature, movements seek to unify under common frameworks and values, offering a shared vision to rally behind. But in that process, there is a **risk of flattening** the experiences of **young people** in a way that is, at best, **shallow** and, at worst, **violent**. We must remember that **not all young people share the same mental health journeys**, and **their advocacy efforts** are as **multifaceted** as the **individuals themselves**.

SUMMARY

This anthology is a reflection on the complexities that young people are confronted with in the world of mental health activism – as told firsthand by the members of MHA's YLC. In this report, you'll hear from six different YLC members about their own advocacy journeys, with their **lived experiences** and individual **voices** at the forefront.

We offer a candid exploration of what it means to be a young person in advocacy spaces and the truths that often go unspoken – the victories, defeats, hope, adversity, and everything in between. Our aim is to fill in the gaps and embrace the nuances of youth activism, driven ultimately by the belief in a just and compassionate future for all.

It is an **impossible** task for anyone to feel like a mouthpiece for an entire generation, so we remind you that this anthology is **inclusive** but **not exhaustive**, and while these experiences may be **relatable**, they are **not universal**.

These stories are not shared lightly – please listen closely, and find the larger critique and vision for the mental health movement within them. We invite readers to embrace the imperfection, sit comfortably in the gray areas, and allow challenges to established assumptions.

I. WE ALL HAVE THE CAPACITY TO MAKE A DIFFERENCE.

Mariama Bah

(Content warning: sexual assault)

In the journey of life, our identity often collides with the challenges of mental health, advocacy, and community. It is a path filled with feelings and emotions that we all experience. Let me share my story with you, a story of hope, connection, and the evolution of identity.



I have always cared about mental health, but it became personal during my college days. In my second year, during my third semester, life hit me hard. I felt depressed, anxious, and overwhelmed. College was tough, and my family's expectations weighed heavily on my shoulders. As the eldest child of immigrant parents, I carried the pressure to provide for my family. They often reminded me that America was the land of dreams, and I could not afford to waste time.

Amidst these struggles, relationship issues forced me to confront a dark part of my past. It had been buried deep within me. One day, I found a close friend, and as we talked, I could not hide my true feelings. I admitted that I was dealing with mental health issues, and that intimacy was challenging due to a past sexual assault when I was just 10 years old. My friend revealed she had faced a similar ordeal, a revelation that shocked me.

"I returned home troubled, wondering how many others in my circle carried their own burdens in silence."

I decided it was time to raise awareness and create a safe space for us girls to confide in each other. I organized small gatherings, painting sessions, and outings to foster connections. As I delved deeper, I realized that mental health was a common thread connecting us all. While advocating for mental health, I also immersed myself in community care. Volunteering at shelters and helping those experiencing homelessness allowed me to understand the importance of mental wellness. Many of the struggles that led to homelessness derived from untreated traumas, including sexual assault and abuse.

"My understanding of advocacy evolved over time. I realized that advocacy meant more than just awareness; it meant providing tangible solutions."

My journey led me to create safe spaces through art, where people could share, heal, and connect. I emphasized the importance of seeking help, finding your tribe, and taking care of physical and spiritual needs.

Since 2018, I have been on this journey of mental health advocacy. My vision has expanded to encompass ending homelessness and providing mental health resources to my community. I believe that one day, with the help of therapists, art therapists, advocates, and others, I will be closer to realizing this dream. In the land of opportunities, I hope to provide support to those in need and spread kindness wherever I go.

In the tapestry of life, my story is just one thread. It is a story of struggles, connections, and the power of community care. Our identities may evolve, but our shared humanity remains constant. We all have the capacity to make a difference, to spread happiness and kindness, and to work toward a better world for ourselves and those around us.

II. EVEN WHEN WE ARE TOLD THERE'S NO HOPE, WE STILL MANAGE TO FIND IT.

Jose Caballero

(Content warning: homophobia, domestic abuse)

Nostalgia smells like the flowers my family uses to celebrate La Purísima every seventh of December. La Purísima is the biggest Catholic festival in Nicaragua and commemorates the Virgin Mary's immaculate conception.



It is somewhat similar to Halloween in the U.S. – children go to houses decorated with altars honoring the Virgin Mary. But instead of "Trick or Treat!" they ask, "What is the cause of so much joy?" The homeowner responds, "The conception of Mary," and distributes sweets.

Today, I'm with my 10-year-old-cousin Benji and my mother outside of St. John Bosco Church, where every year we gather with fellow Nicaraguan families to celebrate La Purísima.

"In front of the Nicaraguan flag that adorns the entrance of the church, kids line up for their sweets. When I was their age, I lived in Nicaragua, a country that felt like a prison."

Living under Ortega's dictatorship meant hearing frequent bombs from my porch window, observing people set fire to trees, studying by candlelight, and storing water in containers since it was always off in my neighborhood. Violence did not limit itself to the streets; my mother also experienced it domestically under my father's oppression. My father's alcoholism rendered him incapable of fulfilling his parental obligations. To financially support my younger sister and me, my mother made the difficult decision to emigrate to the U.S. alone, trusting us in the care of her sister.

I look down at my gold teddy bear chain, which has been with me since I was seven. Living in a Catholic and Latino household meant experiencing ostracism toward my sexuality and my family's attempts to "fix" me by making me go to church every Sunday. "You're a man – only girls do that," they would tell me as I listened to Taylor Swift songs or when I would write in my diary.

I spent my birthdays and holidays with a laptop, connecting with my mother in the U.S. via Skype. She was my only source of emotional support, aside from the teddy bear chain, a reminder of hope and freedom.

In 2018, I reunited with my mother in Miami. With this monumental transition came a stable home with electricity, water, and even a computer to do my homework. But this transition also brought the excruciating experience of a Latino, first-generation, low-income individual navigating complex systems in the U.S. – systems that felt like they were not built for people like me to succeed. My socioeconomic and language barriers made me feel inherently disadvantaged and hopeless.

I managed to find hope and energy to adapt to a new country and school system, and with no friends, by taking a retail job to help my mother. I learned English in two years, thanks to my thousands of listens of Taylor Swift, who ended up being my English instructor and helped me perfect native pronunciation. I was also pleasantly surprised that at Miami High, no one tried to "fix" me. I joined cheer, an activity that I enjoyed and brought out the best in me, and eventually became cheer co-captain.

As I see my mother and Benji distributing sweets as the fireworks reflect on their smiling faces, I think: What causes me so much joy? So much. My family, my future, my education.

"In navigating life, failure, transitions, and mistakes, I have learned that the human capacity for hope is strong. Even when you are told there is no hope, somehow you still manage to find it."

It is hard to believe that four years ago I was studying by candlelight, fearing for my life, and now I have the opportunity to study with some of the brightest minds in the world.

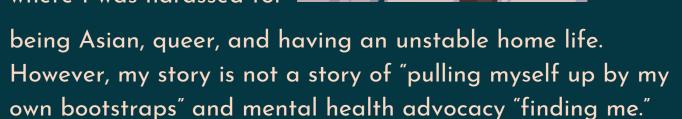
Dear reader, I wish hope and joy – especially in times of uncertainty, failure, heartache, and change. I hope each person reading this gives themself grace and self-compassion yesterday, today and always. In case no one has said this, allow me to be the first: I love you and I believe in your ability to persevere and light a fire under your dreams. You got this.

III. WE DO OURSELVES A DISSERVICE WHEN WE AVOID THE TRUTH.

Crystal Widado

(Content warning: suicide, self-harm, racism, homophobia)

Like an unfortunate amount of American seventh graders, I was deeply depressed and suicidal. At one point, I was calling the suicide hotline every other day for months. I had started using self-harm to cope with the stress of being bullied at school – where I was harassed for



"I got into mental health activism in middle school because I needed a reason to live. From here, there are two sides to my story."

By one account, I became a successful intersectional mental health activist. I ran my school's mental health club, directed two student-led organizations, and served on the state education department's board for mental health policy. I became the first-ever high schooler to win a prestigious award from the country's largest mental health nonprofit. I landed a seat on MHA's Young Leaders Council. I learned how to be an effective and compassionate leader in all of my organizing efforts. I gave speeches to more than 3,000 people. I could talk all day about critical psychiatry, mental health in Black, Indigenous, and people of color (BIPOC) communities, and issues with how we currently study and approach suicidality.

This version of events is all true. It is an accurate description of my work in the mental health movement. But my story, in its entirety, is not quite so simple.

Told from a different perspective, I am a walking hypocrite and nihilistic failure. Despite my successes, my personal experience in the mental health movement is entangled with cynicism, discouragement, and feelings of futility. Suicide rates continue to skyrocket in youth, and counselors continue to be spread thin at public schools like the one I attended.

We are dangerously failing on almost every level possible. Between the nature of the nonprofit industrial complex and the marketing of mental health as an easy, uncontroversial form of social justice, I am disgusted to be participating in a field that suddenly felt so meaningless.

"My experience with this movement is complex, not because I am weak, but because I truly care about the work I do. We do ourselves and our cause a disservice when we avoid the truth."

My story does not follow the traditional path of some advocacy stories – ones with happy endings, large and profitable success, and a resounding belief in one's work. I will be the first to admit that I am still unsure of what to do next within this movement. But amidst the uncertainty, I still cling onto radical hope.

"As pessimistic as my concerns are, I know that nihilism will not lead to social change. Movements will always depend on hope."

It does not matter to me whether I apply this back into mental health activism specifically – at least for now. While I need time off to think critically about my role in the movements that I participate in, I will be forever thankful for the seven years I spent trying my absolute best to create a world people would want to live in.

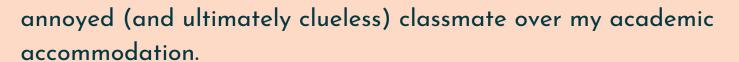
IV. WE ARE SURE OF OURSELVES, EVEN IN THE SYSTEMS THAT WERE NOT MEANT FOR US.

Jill King

(Content warning: ableism)

"I had to keep myself from saying, 'Go blind and then you can get the PowerPoint," I joked.

The sun was shining through the classroom's window, blocking my peers from my sight as I heard their laughs echo. I was recounting a confrontation I had earlier that week with an



"I still think you should've," Grey affirmed.

"I would have," Madeline quipped.

I snorted in my returning laughter. Grey and I would sit in Madeline's living room later that night as she told us about each time she did not hesitate to snap back.

Truth is, it only makes sense that our friendships continue to pour into our advocacy. The Students with Disabilities Advocacy Group (SDAG) was born out of a shared labor of love for our community.

Madeline and I started SDAG out of frustration, tired of the lack of community for disabled students on our campus. Yet at this time in my life, disability was still a word I used with hesitation. As I met more of my community and continued to see myself in my peers, becoming an advocate for my community felt inevitable.

These friendships have been some of the most powerful and endearing bonds I have experienced, boosted by our shared identity.

"We share a passion for rights over wrongs. We yell side by side at rallies. We believe in one another and in what we can achieve while joined at the hip."

Proudly created by and for disabled students, SDAG amplifies a philosophy valued in both peer support and disability justice: nothing about us without us. My friendships, as well as the community built by them, are fueled by compassion and solidarity.

I was sure of this in the heat of July when our members rallied following the reversal of Roe v. Wade – no faith in our Supreme Court, yet assured of one another's unity.

I became certain of my community when I lost my vision six months after founding SDAG. My vision loss had been quick, forcing me to adjust to a new disability and take inventory. Madeline, as an older and blinder voice of reason, assured me of the community we had built the year before.

"My community helped fill in the gaps my withering vision created – everything from lively carpools to instinctive and compassionate accommodations."

In education, accommodations are fought for, granted only after significant documentation and negotiation. They are still subject to the interpretation of our non-disabled peers and professors, meant to be kept under wraps. In my friendships, accommodating our own is second nature, a dear act shared among people who care for one another. It is within this community that I take up space, sure of what we can do in spite of systems never meant for us.

V. WE SHOULD HAVE A SEAT AT THE TABLE SO WE DON'T END UP ON THE MENU.

Savannah Frye

(Content warning: substance use, sexual assault)

I had experience in peer support long before I ever became a peer recovery specialist. After dropping out of college my freshman year due to my worsening mental health, one of the support avenues I explored was a local support group. My first meeting was located in the same church where I played basketball growing

up, and I was terrified of being vulnerable.

"I did not know how I could possibly be authentic with strangers when I could not even do that with my own friends and family."

After attending weekly meetings for a couple of months, I began to get to know each of my group members and they me. I was opening up about my struggles with mental health, beginning to dive into how my substance use played off of my mental health. I started to view the meeting as one of the few safe spaces I had. One of the most pivotal moments in my recovery journey happened in the group, where I was first able to begin unpacking my trauma around multiple sexual assaults.

"The people in the group became my friends, my confidants, my mentors, and my heroes. They were open about their own recovery journeys, and that, in turn, made me feel safe enough to be open about mine."

Along with the mutual support from the group, I also received recommendations for community resources that I never got during one of my inpatient hospital stays or partial hospitalization programs. I remember thinking that none of those things were advertised (or at least accessible) while I was in undergrad.

A big reason for that, I know now, is because many of the professionals working in those different settings did not have the lived experience of navigating mental health and substance use challenges.

"My group and I made up the community who could provide the support we needed, something that many of the professionals I had encountered could not identify with."

This is why part of who I am and a big part of my advocacy work is uplifting the voices of lived experience. There are many types of lived experiences going beyond mental health and substance use (e.g., military service, trauma, physical disability, suicide, justice-involvement, etc.). People with these lived experiences should at the very least have a seat at the table and not on the menu. We add value to the system, providing another form of valid qualitative data through sharing our collective lived experiences, often as past or current consumers of behavioral health services.

VI. BEING TRUE TO OURSELVES IS AN ACT OF RESILIENCE.

Faria Tavacoli

Four years ago, I was embattled with my individual and societal challenges to access mental health resources. At that time, I realized that the state of Nevada did not truly know the extent of how us youth struggled day to day.



While I was shocked, I wasn't surprised. I had faced backlash when seeking assistance for unusual sensitivity issues. I had begged for six months for someone to finally accept my decision to seek mental health aid. I wanted someone to hear me out for the first time in my life. I wanted someone to recognize that housing insecurity and isolation exacerbated my extinguishing hope. All of this felt wrong.

My deep despair made me feel like I had to run away from home, abandon everything I worked hard for, and go by a pseudonym so people could never contact me again. I felt ashamed of the label that was put upon me, and I thought that this uneasiness would remain forever.

"Young people are often stigmatized for their attempts to voice their hopelessness, inaccurately portrayed as 'lazy' or even 'attention-seeking."

In a time where cynicism controls what we see on the news and in discussions of our futures, many young people resent the pressure they feel to find meaning in their experiences. They question whether they even want to amid global challenges like climate change, gun violence, and hate.

Trying to understand how I felt made it hard to find a way forward. When I did receive help, I was told by professionals to embrace my faults but not allow them to define who I was. More importantly, I was told that my state of mind is something temporary and that conventional forms of recovery could serve as healing. But as I returned home, the definition of "recovery" turned 180 degrees.

At home, voices told me resiliency meant evading emotion completely. It seemed the adult mentors in my life imagined I could transform into an emotionless robot, memorizing facts and figures from my textbooks and acting like everything in my life was just peachy.

As these unhealthy words continued, my body winced and my blood boiled. The generational disconnect on recovery and resilience was dictating my discussion on mental health treatment. And it was hurting me beyond extremes. It was not the gaslighting that bothered me. It was how normalized it all was – how their words were not considered poisonous but instead necessary, keeping me in what they saw as stability.

"But isn't being true to oneself an act of resilience and hope?"

Many from my low-income community, especially teens and young adults, choose not to express their emotions or concerns. In a money-driven culture, we dream of stability, chasing the ever-changing perception of what it means to be "normal." It does not leave much time for hopeless thinking, yet it still remains in the psyche.

I never expected I would become part of such a toxic culture, and I certainly never predicted I would find myself battling it. It was suffocating to realize that my vibrant city of Las Vegas could contribute to my own downfall. Its transience permeated the conversation about what it meant to build community and how recovery can look on an individual level.

It is not an exaggeration to say that I had it tougher than most people. On one hand, I wanted to give the adults in my life the benefit of the doubt. On the other hand, I knew that sooner or later rumors would spread, labeling me as an inherently troubled kid. In a worse case scenario, I thought that I would be outcast by a community culture that I sincerely appreciate.

I found respite from these challenges when I started associating myself online with survivors of similar suffering. Whether they came from Europe or Asia, I found peer support through their positive words, warm motivation, and advocacy for those in desperate situations. They made me feel that I could finally be free of familial and cultural pressures prominent in my environment.

What does it mean to have hope and to recover? I define it as finding the soul of the world. For me, that was human relationships that taught me how even incremental change and care can make a big impact. Today, I am moving a step forward, taking my health and well-being more proactively, and being transparent about how I struggle with something invisible to the naked eye.

"I might not be 100% hopeful, but connecting with those who have had the same experiences as mine gets me closer to tranquility."

For me, hope and resilience are derived from connection with community, and it is central to my experience and mission. As I continue my undergraduate education, I am using my positions as a community health worker and a student official to provide resources to communities where mental disorders are perpetually stigmatized and quality care is hard to access. In my free time, I make little "therapy bags," which contain handmade crochet hearts, educational pamphlets, personalized notes, and a full list of centers and hotlines. Resiliency became my personal and community care, and community care became my ultimate form of recovery.

Mental health conditions do not discriminate. They victimize all races and ethnicities, all genders and sexualities, from talented prodigies and celebrities, to an average person working a nine-to-five job.

"It is past time for all generations of people and all communities to accept that reality and do something to change their current mindset and the mental health infrastructure."

Adults may cringe when I advocate under the words "mental health." I choose to say it anyway. My friends may flinch when I call them out for glamorizing mental disorders and diseases. I plan to correct them anyway. As I go forward, institutions and corporate executives may question my current recovery process and if it will hinder my chance at completing a merciless academic or job schedule. I plan to be transparent anyway. That is the only way to show that my practices to build hope can still drive community efficacy.

I stand up tall as a believer of resilience. These moments cannot be defined through struggle or guilt. I am a community advocate. I am a young person. I am everything they tried to erase – I am alive. I will claim it and use my power to change the world and my community for the best.

CONCLUSION

There exists a **tension** within mental health activism — as with any kind of movement for social or systemic change — between **hope** and **pessimism**. We believe in our abilities, the people we care about, and the causes we champion. At the same time, we harbor distrust in our systems and in the bad actors who poison our progress. This anthology aims to not only recognize this nuance, but **confront** it head on. Two things can be simultaneously true: There are very **real threats** to our mental health, and there are very **real sources** of **support** and **strength**.

Particularly for minoritized and marginalized groups, there is a lot to be **critical** of when it comes to how we are **addressing** (or **failing** to **address**) youth mental health. The systems that oppress us count on us to lose hope. When we stop believing that we can, we **stop taking action** to **disrupt their injustices**.

At the same time, we cannot indiscriminately **hope** for a better future. Our hope is only revolutionary when we translate it into **direct action**: mutual aid, community-building, peer support, accountability for those in power, and genuine investment in one another. These will form the path to a **mentally healthier generation**, as evidenced in this anthology and the personal experiences that it represents.

As we come to this conclusion, remember that our experiences are not merely vehicles from which we extract meaning. These are firsthand accounts of the material reality that young people face each and every day. In order to build a better world for youth mental health, we must be empowered to share our stories and design our own solutions – even if that requires disruption or abolition of the status quo.



APPENDIX

Program Spotlights

Mariama Bah: Nation of Diversity

Abdullah Elahi: Memphis University School Mental Health Club

Jill King: Students with Disabilities

Advocacy Group

Rei Scott: Students With Psychosis

Advocate Spotlights

Savannah Frye

Faria Tavacoli

Crystal Widado

Maya Nitoor

Jose Caballero

MARIAMA BAH

Nation of Diversity



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Summary

My nonprofit organization, Nation of Diversity, focuses on reducing homelessness and raising awareness about mental health through creative arts. We believe that mental health and homelessness are interconnected, and we prioritize addressing mental health issues as a primary step toward combating homelessness. Our program, "The Circle Speaks," aims to fill the gaps in supporting mental health on campuses and in the broader community in various impactful ways.

Through the creative arts, our program provides a unique approach to mental health support. Art has the power to create stillness in the mind, promoting mindfulness and allowing individuals to organize their thoughts. It becomes a powerful tool for expressing emotions without the need for verbalization. Moreover, engaging in art brings people together, fostering a sense of connection and empowerment.

"The Circle Speaks" encompasses diverse forms of art and welcomes individuals from all walks of life, including kids, those experiencing homelessness, and adults. This inclusivity ensures that participants can relate to one another, recognizing that shared struggles and anxieties transcend social and economic backgrounds. We incorporate professional therapists into the group to provide expert guidance and support in mental health matters.

Peer support plays a vital role in "The Circle Speaks." By bringing together people facing similar challenges, we create a strong sense of community. Participants can lean on one another for emotional support, share experiences, and exchange valuable resources to overcome their difficulties. This peer support cultivates a nurturing environment where individuals feel understood, valued, and encouraged in their mental health journeys.

Moreover, "The Circle Speaks" not only addresses immediate mental health needs but also has a lasting impact on participants' lives. By engaging in creative arts, individuals can develop skills that can open up opportunities for employment in the future. Additionally, our program emphasizes the importance of education and encourages participants to pursue further learning and training in the arts or related fields.

Statistics on homelessness and mental health underscore the urgency of our mission. Studies consistently show that a significant percentage of homeless individuals experience mental health issues, highlighting the crucial link between these two problems. By targeting mental health support, we aim to break the cycle of homelessness and create a more compassionate and resilient society.

"The Circle Speaks" fills critical gaps in mental health support and services. By leveraging the power of creative arts, peer support, and professional guidance, we strive to promote mental well-being, prevent homelessness, and empower individuals to lead fulfilling lives. Our inclusive approach ensures that everyone, regardless of their background, finds a sense of belonging and receives the support they need to thrive mentally, physically, and spiritually.



Getting Started

Before leaving Africa at the age of 11, I made a promise to myself that one day I would return to give back to my people, particularly the women in Guinea Conakry. In my home country, when you reach secondary school, you have to pay for classes. It becomes a challenge to continue your education if you cannot afford it. As a result, many young adults and women remain illiterate and often feel pressured to marry at an early age.

During my time in Africa, I noticed that, despite the lack of education, many of the women were remarkably talented artists. When I moved to the U.S. and experienced the issues of homelessness, unequal access to educational resources, and mental health challenges, I turned to the arts as a way to express my frustration. Unfortunately, I could not openly discuss my feelings with my family, as they saw it as disrespectful, which created a lack of communication about these important issues. I realized that my African American friends faced similar challenges receiving support and finding open communication.

I started a club in college where foreign students could come together, learn about each other's cultures, and form connections. During an interactive art project, I bravely opened up about my own experiences with sexual assault and trauma, and to my surprise, multiple women in the group shared their own stories.

Highlights

- We have made a significant impact on the lives of more than 500 individuals experiencing homelessness. Thanks to the dedication of over 30 volunteers, we have been able to provide crucial resources and support to those in need.
- Our efforts have resulted in distributing over 3,000 hygiene kits and hot meals to homeless individuals, addressing their immediate needs and offering them a sense of dignity and care. Additionally, we are connecting these individuals with the necessary resources and support systems.

This powerful moment made me realize the importance of peer support in my community.

Alongside the peer support group, I established a program called "Young Entrepreneurship" to empower high school students to explore their creative skills. The program not only helps them realize their potential, but it also encourages parents to support their children's artistic aspirations. Just as talking about mental health requires understanding and acceptance from adults, giving young individuals the space to pursue their chosen paths is vital for their growth and well-being.

My journey from Africa to a different country shaped my passion for giving back to my community and promoting mental health awareness through the creative arts. By establishing peer support groups and providing educational opportunities, I aim to break barriers, destignatize important issues, and foster a more supportive and inclusive society for all.

Potential Barriers

Building a similar nonprofit can come with numerous challenges, such as questioning whether you are the right advocate for the cause, facing people who doubt your dreams, and struggling with limited funds and resources to reach those in need. However, confronting these challenges requires certain key approaches.

Firstly, having a mentor can provide valuable guidance and support, helping to navigate the path with confidence.

Additionally, it is essential to prioritize your own mental wellness, seeking the necessary help and support in whatever form it may take. Believing in yourself and staying committed to the cause are crucial elements that will drive your efforts forward.

Highlights

We have helped lift three individuals out of homelessness so far. We provided them with job opportunities within the art world, harnessing their talents and passions to help them build sustainable futures. We have taken a holistic approach to their well-being by providing access to professional therapists, ensuring they receive the emotional support they need to thrive.

Trust that the resources and assistance needed will come, and as you progress, you will find your own like-minded community on this journey.

To those embarking on similar paths, my advice is to take that first step, no matter how small, and keep moving forward. Speak up passionately about your cause, even if progress seems slow or you feel you could do more. Remember, making a difference in just one person's life can be significant, so do not underestimate the impact you can have. Persevere and never give up, but also be mindful of taking the time you need for self-care to avoid burning out in the process. By combining dedication with self-care, you can effectively overcome challenges and make a lasting impact on the lives of those you seek to help.



ABDULLAH ELAHI

Memphis University School Mental Health Club





Summary

In my junior year at Memphis University School (MUS), an all-boys private school ranging from grades 7 through 12 in Memphis, Tennessee, I started the Mental Health Club. Our mission is to bring awareness to mental health while educating and providing resources to the greater student body at MUS. Because MUS is an all-boys school, the topic of mental health was not discussed as much as it should have been, especially before the COVID-19 pandemic. It was rather a difficult subject to address, especially from the teachers and faculty.

The Mental Health Club is led by students who have lived experience with the same trials and conditions the younger students are going through. We try to advocate for mental health and well-being through different fun activities.

Overall, we seek to educate the student body. We try to explain the importance of their mental health and taking care of themselves. For instance, we created an interactive presentation for the seventh and eighth graders at our school, teaching them about mental health and its significance in their academic and daily lives.

The club is made up of students helping and teaching other students. We get our guidance and knowledge from the school counselor, but it is us who do the talking. We do this to have a sense of relatability with our peers, both in our grade and especially the ones below.

Getting Started

I started the Mental Health Club in the 2021-2022 school year, one year after the start of the COVID-19 pandemic. Everyone was starting to have more "normal" lives, and my school was returning back to what it was before the pandemic.

At school, I noticed that many of my peers were struggling in their studies, sleep, and overall well-being. Mental health is an extremely important topic that every person needs to know about, but it was not discussed much at my all-boys school, where many do not expect students to struggle.

Having learned about mental health and its importance during the pandemic, I decided to start this club for those students who needed the proper advice and resources for taking care of their mental state. Students need to know that their grades, physical health, social life, and more are at stake when mental health is not good. Teaching about well-being will prepare them for other stages in their life, like moving on to college.

Before the pandemic, I never had this type of guidance regarding mental health at my school, so I decided it was only right to be the one to step up and give it. Upon starting this club, some of my friends who shared the same passion wanted to work with me on this mission. I made them officers, and they helped me with everything.

Highlights

- We created a detailed, anonymous survey for students in the high school to complete regarding their mental health, how they cope, and what they think about the resources at school. This was an outlet for them to voice their true thoughts.
- We started a Phone Detox Challenge, where we encouraged students to gradually reduce their phone screen time week by week and to do more healthy, alternative activities instead.

 We gave a presentation about mental health and its importance to the seventh and eighth graders at our school, which included important advice for the next years at MUS.

Potential Barriers

Because mental health is a stigmatized topic, I faced some backlash from students, teachers, faculty, and people I knew. Mental health is especially stigmatized among boys and men, making it somewhat challenging for me to advocate at my all-boys school. To overcome this, I made more connections and a support network of officers. I was more confident with them as we worked toward our mission.

Another challenge was how to create the support network of officers. When choosing leadership in a mental health club or program, one needs to find the right people who have the same passion and believe in the same idea. Being more outgoing and open is helpful. Once I had my officers, I tried not to do all the work but instead shared it among all of us and trusted them. I tried to stay away from micromanaging.

Finally, one prominent issue I noticed in myself was not practicing what I preached. I was telling people to take care of themselves mentally and to live a better lifestyle while I was doing the complete opposite. I was not getting enough sleep and taking on too much stress. Although starting a mental health initiative requires work, try to balance it with your overall physical and mental well-being. I decided that I will try to teach good mental well-being by practicing it more and leading by example.



JILL KING

Students with Disabilities Advocacy Group



https://sdagusa.org/

Instagram: @sdag_gsu

Facebook: @SDAG.GSU

Twitter: @sdag_usa



Overview

The Students with Disabilities Advocacy Group (SDAG) is a grassroots peer support-based nonprofit organization. While we are not peer support specialists, our programming is based on the power of shared community and lived experiences.

SDAG has a primary goal to offer a safe haven and community for disabled students. We welcome and support students and community members with all kinds of disabilities, including physical, invisible, and learning disabilities. We work to support those with neurodivergent conditions and mental illnesses, seeing as these can often be disabling. Our secondary goal is educating and advocating for disabilities, neurodivergent conditions, and mental illnesses.

We are filling gaps for disabled students trying to navigate higher education, which is wrought with barriers and unwritten rules. We do this through community building and open conversations about disability issues, which often looks like informal gatherings, community events, and group dinners. This is also done through our "Disabilities After Dark" events that are discussion-based. Previous topics include chronic pain and the intersection of disability and LGBTQ+ pride.

Throughout my leadership of SDAG, I have aimed to fill gaps and build bridges between disability and mental health.

Getting Started

SDAG was started in June 2021 by and for disabled students at Georgia Southern University in Statesboro. As a disabled student, I was incredibly familiar with the barriers and struggles the disabled community faces on campus. Higher education was not made with disabled students in mind. Our presence is in spite of academia at large, ensured by decades of advocacy from our disabled elders. SDAG was established to continue the advocacy work of our disabled elders, ensuring an equitable and accessible education.

Our advocacy started with community connection and building a homebase for the disabled community on campus, which opened the door for shared access and adaptation. As we worked to foster this sense of belonging on campus, we found our efforts could not be limited to our university. Local community members also craved this kind of space and wanted to adapt together. As more people embraced SDAG, I understood why Statesboro had been my family's home for generations.

SDAG became an official nonprofit in July 2023. SDAG as a nonprofit was established to start chapters at other universities, empowering and mentoring disabled students to advocate on their campuses and build their own communities. Through our campus chapter program and community outreach efforts, SDAG continues to advocate to bring more disabled perspectives into organizations, classrooms, and their respective fields.

Fast Facts

• SDAG has hosted multiple workshops to educate Georgia Southern faculty and staff on acknowledging and empowering neurodiversity in their classrooms. Learning disabilities and neurodivergent conditions are the most common disabilities in higher education, with many not registered for formal accommodations.

Fast Facts

- At Georgia Southern, SDAG earned a position on the President Student Advisory Committee, which meets with the university president and other senior leadership. This opportunity brings disability issues directly to university administration.
- Community outreach has included fundraising for local disabled community members and other nonprofits that serve the disabled community, sharing resources, attending events, and connecting with other advocates, such as the Georgia Council on Developmental Disabilities, Synergies Work, Uniting for Change, New Disabled South's Southern Disability Justice Coalition, and the American Association of People with Disabilities RevUp campaign.



Potential Barriers

The disabled community has a history of being underestimated, and higher education is no exception. In starting advocacy work on my campus, we encountered infantilization and othering. I have seen this everywhere from university administration to ignorant (yet well-meaning) classmates. I feel this is an experience that the disabled community sees repeatedly, even if we do not pursue advocacy. We have shifted perspectives through open discussion and continuing dialogues around the issues closest to the disabled community. Sharing our lived experiences as disabled students has both strengthened our community and established SDAG as a genuine, trustworthy local resource on disability.

Physical accessibility on our campus also creates a barrier. The majority of Georgia Southern's campus is cobblestone, which has forced us as a community to find ways to best adapt. As a blind student and white cane user, I share tips on how to best navigate on cobblestone without self-injury. For my peers who are wheelchair users, it means everything from locating different routes around campus to finding friends to travel to class with.

The lack of physical accessibility on campus disallows disabled students from attending or participating in events in the same manner as non-disabled students. Social exclusion increases the already higher risk for mental health issues for disabled students, including depression and anxiety from isolation and lack of community. With this in mind, SDAG has prioritized hybrid meetings and events to ensure access for all students.

REI SCOTT

Students with Psychosis



https://sws.ngo/



Summary

Students With Psychosis (SWP) is a 501(c)(3) nonprofit that empowers student leaders and advocates worldwide through community building and collaboration. Psychosis is not often discussed, especially on campus. We envision a world where no student or advocate living with psychosis goes without community and access to education.

SWP provides more than 160 hours of virtual programming every month through daily audio hangouts and live chats, as well as weekly and monthly meetings. We also have additional opportunities to get involved, such as our internship program and community groups. SWP has been working on expanding in-person programming through hubs in New York, Boston, San Francisco, Columbus (Ohio), and more. Other outreach initiatives include in-person and virtual panels, where we have discussed intersectionality, accommodations, and empowerment, among other topics.

Peer support is an important piece to recovery for many. Peer support does not replace professional support, but professional support also does not replace peer support. While peer support has been recognized as an evidence-based practice, we still have a long way to go for peer support to receive the recognition and funding that it deserves.

We recognized a need that was not being met for students living with psychosis, and SWP is an example of how peer support can be successfully implemented. SWP strives to not only meet the need on an individual level, but also change the conversation around psychosis worldwide. Too often the view of psychosis is limited and damaging to those with lived experience. Through our advocacy, we hope to change that.

Getting Started

We recognized a need that was not being met for students living with psychosis, and SWP is an example of how peer support can be successfully implemented. SWP strives to not only meet the need on an individual level, but also change the conversation around psychosis worldwide. Too often the view of psychosis is limited and damaging to those with lived experience. Through our advocacy, we hope to change that.

Highlights

- SWP held its first conference in August 2023 in New York City.
- Our executive board is 100% from the lived experience perspective.
- SWP videos have gained over 35 million views on multiple platforms combined. Videos include collaborations with TEDx, a three-time feature on SBSK, Barcroft TV, Anthony Padilla, and CBS This Morning national news.



Potential Barriers

Some barriers that students and advocates might face when looking to implement a similar idea are a lack of funding, a lack of clear direction, and burnout.

It can be difficult, especially for youth, to find funding for their ideas and organizations. This is something that needs to be addressed on a larger level with support from those in power; however, your advocacy in this area is not wasted. Continue to use your voice.

Additionally, it is crucial that you examine why you want to implement the idea that you are working toward. What needs are you looking to meet? What can you provide that other spaces cannot?

In the words of our Executive Director Cecilia McGough: "My advice is to look at what needs are not being met. Do not reinvent the wheel; however, do your research on what works and what does not work in your space and learn from it."

We also must recognize that we cannot achieve success on our own. Too often do advocates burn themselves out by trying to accomplish their goals without help. Learn to lean on others when needed, ask for advice, and accept the assistance that others offer. Your health is just as important as the goals that you strive for.

McGough offers these words of advice: "Lastly, collaboration is key. My favorite quote is an African proverb that highlights the importance of teamwork, collaboration, and partnership. The proverb goes 'If you want to go fast, go alone; if you want to go far, go together."

SAVANNAH FYRE

In her own words.



Instagram: @_sabbyll https://www.linkedin.c om/in/savannah-fryema-r-cprs-b6a6421a4/



Overview

The most important word in my advocacy, in my recovery, and in my life is balance. I am a strong believer that there are many types of lived experiences and each person has their own that makes them who they are. We become more informed, humble, and understanding when we are able to be in and create spaces where we can share these lived experiences with others.

My advocacy with peer support initially stemmed from my own lived experiences and has evolved into empowerment for others to share their own experiences. Peer support has opened a healing space, a community of mutuality, and a career path that I never imagined could exist. However, part of my journey has been recognizing that my advocacy work and career must be balanced with the other tools in my wellness box. It has become very important for me in my almost four years of peer work and six years of recovery to make sure I am an individual, just Savannah, with interests, hobbies, and relationships outside of my role as regional coordinator for peer support.

One of the best and sometimes most challenging things about my position and peer support work is that the field is emerging, and in some areas, exploding within the Commonwealth of Virginia.

There are so many new paths, professional development opportunities, and resources integrating and revolving around peers. However, because it is a relatively new profession to the state, part of the peer support informal job description is advocating for the value of lived experience within the behavioral health continuum. This highlights another important part of my advocacy and one of my favorite things to do: building community connections. A significant part of my role as a regional peer support and family support coordinator is to create relationships with community stakeholders who are either utilizing peer support or interested in bringing peer support to their organization. The best thing is when you can build a connection with a like-minded recovery champion and exchange resources, connections, and ideas. Building those and other connections are essential to spreading the word about peer support, but also essential in breaking down the stigma that exists around professionals with lived experience of mental health, substance use, suicide, self-injury, trauma, disability, etc.

Advice for Advocates

One of the biggest lessons I have learned and continue to grow in is defining and maintaining boundaries around my advocacy and caring for myself. I want to define what I mean by "boundaries" and "self-care," terms often not clearly explained. Boundaries are not just a list of red flags that we assign to others' behaviors or certain situations. Rather, in essence, boundaries are what happens when you can sense yourself, what you want and need, and are able to speak on those wants and needs.

Understanding my wants and needs has been powerful in my advocacy work because it has alleviated a lot of the guilt that I initially felt when saying no. There are only so many hours in the day and so many things I can accomplish while also taking care of myself and working to the best of my abilities. All of those hours can't be dedicated to advocacy. Understanding what healthy boundaries are has allowed me to prioritize projects, turn down more work, and take time to indulge in my hobbies. These boundaries are not a reflection of how much I care about others and my community, but how I model what I hope for others to achieve.

When looking at self-care, I break it down into two types: indulgent and introspective. Examples of indulgent self-care for me would be taking a bubble bath, binge-watching my favorite show or movie series, hanging out with family and friends, reading, etc. Examples of my introspective self-care are yoga and meditation, journaling, working on my wellness plan, attending a support group, etc. Both are important at different times. Indulgent activities are moments to pamper, distract, and engage in other focuses, whereas introspective activities ask us to be challenged, sometimes sit in discomfort, and really explore our dimensions of wellness to seek areas of improvement.

The notion that I am always in recovery and never recovered is something that is very important to me. My lived experiences are just that, mine, and someone else has their own lived experiences that are just as valid. Understanding this and the idea that our strength derives from a number of shared lived experiences reminds me to remain humble and open-minded in my advocacy work. Just as there are lived experiences that I have not face, there are cultures and subcultures that I am not a part of that greatly affect someone and their recovery path. Recognizing this and admitting "I don't know" is not weak, as I once may have thought, but instead is one of the most genuine spaces you can share with someone.

Advocating for diversity within your organization, elevating marginalized voices, and taking the time to educate oneself on various topics from different perspectives are just a few ways we can expand our own knowledge and reach a greater number of people within our communities.





Recovery and finding community and well-being are important in a time when many young people feel hopeless, confused, and defeated. As a young person, my mission has been toward entering community health worker spaces that involve young people – especially in marginalized groups – to target root problems and address solutions made for and by youth.

In my senior year of high school, I started creating little "therapy bags," which included a crochet heart, candy, tissues, lists of vital youth-centered hotlines and information, and a personalized message to support teens during difficult times. I distributed the bags by mailing them out of state or handing them out through youth-centered organizations that support BIPOC-focused mental health programming.

The idea came during my own time of need, finding that community care was crucial for my self-healing and recovery. The need was there, especially considering that my state of Nevada was <u>ranked last</u> in access to mental health care by Mental Health America in 2021. W

Since 2019, I have created and handed out over 800 bags – not only in my city, but also internationally. I have provided insight and advice for others across the globe on starting their own mental health projects.

I find that this experience is one derived through collectivism. None of my work could be done without my friends and mentors who supported, volunteered, and even funded my passion projects toward fruition. Organizations that came to support my work through youth-based grants allowed me to facilitate the demand of my project while providing me the stability to learn and grow as an advocate without worrying about needing to shut down the project. As a low-income student, organizational support and funding saved my advocacy journey and allowed me to flourish into the person I am today.

In college, I solidified my mental health advocacy through not only continuing my passion project during the pandemic, but also receiving Mental Health First Aid certification and leading mental health-based events on my college campus and greater community. I designed support discussions for different identities (e.g., BIPOC, LGBTQ+, justice-impacted, individuals with low educational achievement, and low-household income) about the institutional and cultural stigmas that prevent mental health well-being. These discussions acted as a method for members to share and heal. Additionally, these groups allowed me to connect with community members and find ways to continue the fight for social issues that had left many in despair.

This past year, after hearing about the living difficulties of families who struggled with anxiety and depression, I advocated and promoted policy that would promote housing relief and tax credit expansions. Additionally, I promised that funding would be dispersed through collective funds and groups for people needing to access mental health treatment and services. Oftentimes this is done through collective efforts to gather funding and handle direct cash transfers. I continue to listen, engage, and act on the needs of my community through resilience and faith in the now.

Advice for Advocates

Here are three questions to consider in order to evolve your idea or project and make sure you shine as a community health advocate in your focus area.

- Is the plan sustainable? Projects may come and go, but having the capacity to continue one takes a lot of work. If you get burnt out, the project may halt and never take off again. Consider realistic goals for yourself. Track your progress to ensure that you are not biting more than you can chew. Taking a break is normal, and starting small is totally fine.
- Who can I rely on? Oftentimes it may be difficult to start a project without knowledge of who can help you expand your project or figure out what resources are available. Be proactive. Start reaching out to mentors, parents, peers, and even organizations in your community (whether you know them or not) and let them know about your idea. A lot of my materials were donated by groups and organizations that I had cold-emailed, even if they had a faint or no connection with mental well-being.
- Am I being culturally conscious? It is very, very easy to get into our comfort spots. Sometimes we fail to consider that our resources may not be helpful for all people in our target area. It is important to consider what you do not know and cannot relate to (e.g., identity differences, income levels, lack of resource access, cultural stigma, etc.). Then, take the time to educate yourself on diversity and inclusion. This can be done through taking diversity, equity, and inclusion (DEI) courses or creating a committee that focuses on reviewing project materials or content before it is dispersed. Consider upholding a mindset of humility, learning, and open-mindedness.

I hope your journey in advocacy within your own community takes you far. Always know that you are never alone.



Overview

Crystal Widado is a student journalist, public speaker, and intersectional advocate for systems-based change. After dealing with personal struggles with suicide in middle school, they became extremely passionate about teen mental health and intersectional approaches to their generation's conversations surrounding mental health justice. Widado combines the power of storytelling through journalism and public speaking in her work for multiple youth-led organizations.

They have served as a student director for Mind Out Loud, the chief operating director and writing director for Each Mind, and the leader of their former high school's mental health club. They were the 2022 recipient of the JED Foundation's Student Voice of Mental Health Award.

Widado has also advocated for change on a state level by serving as one of six students in the California Department of Education's Student Mental Health Policy Workgroup. Outside of their mental health advocacy, they served as the editor-inchief of their high school's newspaper and captain of the debate team.

Currently, Widado is a student at Claremont McKenna College, where they are continuing to explore their passion for journalism, public speaking, and advocacy.

MAYA NITOOR



Overview

Maya Nitoor is a youth liberationist and intersectional mental health advocate. Growing up in Camden County, New Jersey, mental health issues have been interwoven with Nitoor's life experiences from a young age.

At 16, they volunteered for over 200 hours as a peer supporter, having more than 900 conversations with 150 youth and helping connect an additional 250 people to peer support. The ability to foster a positive mental health community with other teens reinforced their understanding that youth-led approaches are necessary to tackle youth issues.

At 17, they became a youth ambassador for Telosity, an investment management company that funds digital youth mental health and well-being startups. They have also collaborated with the nonprofit YouthRoots to develop a policy initiative at the New Jersey Department of Child and Family Services.

Currently, Nitoor is majoring in psychology at Temple University and is an intern at Samaritans Southcoast, a crisis center that takes calls from the 988 Suicide and Crisis Lifeline. As they stated in an interview with the nonprofit All Tech is Human, "Communities built on empathy and knowledge make for a promising future."

JOSE CABALLERO



https://www.getin touchblog.com



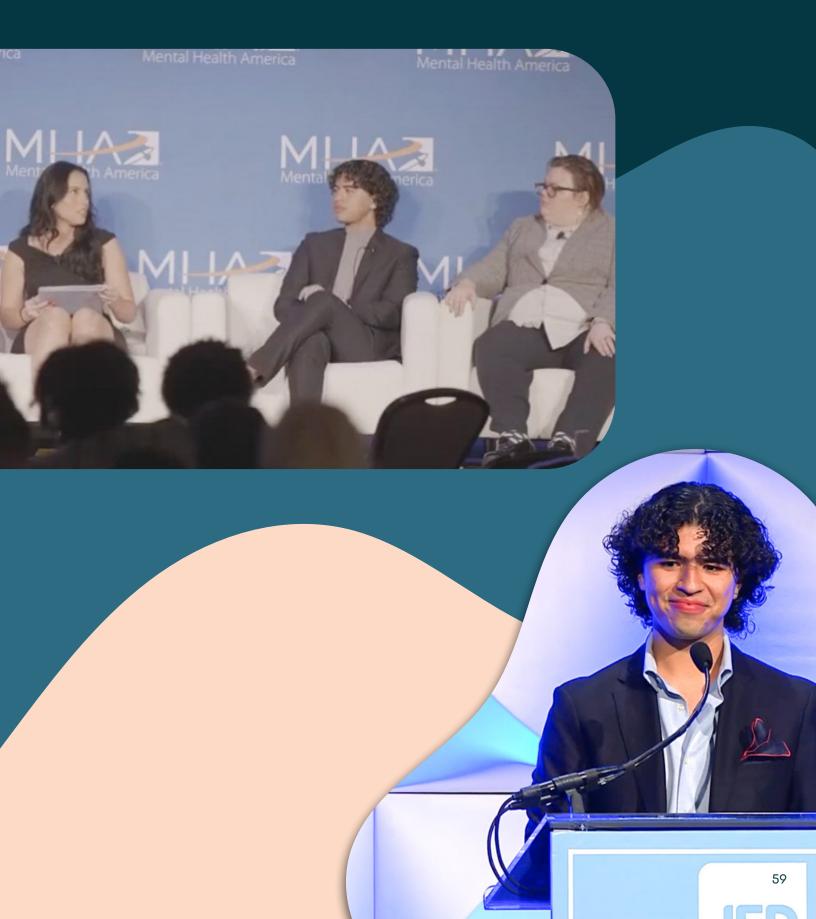
Overview

Acknowledged by esteemed figures such as Gov. Phil Murphy of New Jersey and CVS President of Behavioral Health and Well-being Cara McNulty, Jose Caballero's lived experience is the guiding compass of his advocacy. His profound insights, perspectives, and lived experiences have been echoed at various conferences – each instance leaving an impact on the audience through his authentic and heartfelt speeches.

Caballero has dedicated himself to giving everyone in his community a chance to talk openly about their journeys with mental health. In high school, he founded In Touch, the school's first mental health awareness nonprofit, created to give students a place to connect and share their mental health stories. In Touch currently has over 400 members dedicated to expanding its mission. Inspired by his passion for storytelling, Caballero later started Get In Touch, a blog where young people submit stories on a variety of mental health topics. His efforts and dedication have been recognized by the Miami Herald, applauded by The Jed Foundation, and seen on ABC News. This year, he was invited to speak on the main stage with fellow council members at Mental Health America's Annual Conference in Washington, D.C.

A sophomore at Columbia University, Caballero is majoring in psychology with concentrations in public health and business management and hopes to pursue a Ph.D. in clinical psychology.

Caballero's passion for multicultural intersectionality and enriching mental health journeys for first-generation students gives him a unique point of view and a powerful voice leading the way for a new generation of advocates.



CITATIONS

- I. The Annie E. Casey Foundation. (2023) "Population by Birth Cohort Generation and Race and Ethnicity in the United States." Kids Count Data Center. Retrieved from:

 https://datacenter.aecf.org/data/tables/11504-

 population-by-birth-cohort-generation-and-race-and-ethnicity
- II. Pew Research Center. (2023). "Young adults in the U.S. are reaching key life milestones later than in the past."

 Retrieved from: https://www.pewresearch.org/short-reads/2023/05/23/young-adults-in-the-u-s-are-reaching-key-life-milestones-later-than-in-the-past/
 - III. National Center for Education Statistics. (2023).

 "Students With Disabilities." Condition of Education. U.S.

 Department of Education, Institute of Education Sciences.

 Retrieved from:

https://nces.ed.gov/programs/coe/indicator/cgg.

IV. Mental Health America. (2021) "The State of Mental Health in America." Retrieved from: https://mhanational.org/sites/default/files/2021%20State%20of%20Mental%20Health%20in%20America_0.pdf