## **OPENING REMARKS**

September 24, 2013 Paolo del Vecchio, M.S.W.

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I want to thank the National Technical Assistance Center for Children's Mental Health at Georgetown University and the Transitions Research and Training Center for convening this meeting. I want to thank, particularly, the National Institute on Disability and Rehabilitation Research, our partner for almost 30 years in supporting rehabilitation research training centers for people with mental health disabilities. I want to thank you, the presenters and participants contributing to this meeting, for taking your time. A special thanks to our Substance Abuse and Mental Health Services Administration staff as well who've joined us here today. Particularly, thanks to the leadership of Diane Sondheimer for her outstanding leadership. Thank you, Diane.

Topic of this meeting: State of the Science Education, and Employment Outcomes for Young Adults. It's one that certainly, for myself, hits home. And as my introduction notes, I'm a person who self-identifies as an individual in recovery. And for me, the young adult years were the most important times, frankly, in my life and a changing point in my life. And for many of us, after a childhood of trauma, of dealing with criminal justice, addictions, mental health disabilities, I found myself as a young adult in my early 20's in college in North Philadelphia and at my worst time in my life. A time where I couldn't get out of bed for days at a time, where I wouldn't interact with my peers. I would hide in the stairwells instead of talking to the students. Not saying a word during semesters at a time.

And my life, I thought at that point, wasn't worth living. So I made a decision that I was going to end it. I found myself on the Broad Street subway platform and ready to take that step. As I saw the light coming down the tunnel and the rumble of the trains, something pulled me back. And that was my mom, the thought of my mom, my heroine in my life. A woman who knew mental health issues very well, was institutionalized during younger parts of her life, subject to the evidence-based practices of the day, insulin-shock treatment. But went on to raise four kids in poverty, went on to get a masters degree in philosophy, was a nationally published poet and social activist in her own life. She passed away last year and God rest her soul.

But the thought of her pulled me from that platform and I made a decision there that I was going to try to get some help. So I went to the counseling center at the college campus. I

told them what was going on. They said, "Come back in a month. We have an opening then." But what I found there changed my life and that was a sign on the door for a job and it was for a work study job of manning an information and referral phone for a local mental health group. And frankly, I found my calling. I found what employment brings to people, a purpose in life and a life of purpose.

And through that experience, I also found two other things. One is that I wasn't alone with what I was going through and being able to talk to folks in the community who were experiencing what I was. And then secondly, I found that by helping other people, you help yourself and that concept of what that does to your own self worth and self esteem. And I went on and dedicated my life back to working in mental health. I want to say, again, particularly, the importance of jobs, importance of family supports is crucial for young adults as it is for all of us.

Just to note a couple of data points here. As we know, for people with psychiatric disabilities, some of the lowest rates of employment of any disability group. Those who are employed earn an average of \$16,000 less per year than their counterparts who do not have a diagnosis. I've heard it said that empowerment is a good paycheck at the end of the week. And in our report here that you all have, again, just to note a couple other data points here about the importance of the topic. And you folks know this data very well, but again, 30% of young adults have a mental health problem in the past year. Two-and-a-half million have an issue so serious that it impacts their ability to function. Young people are more likely to experience homelessness, be arrested, drop out of school, be unemployed. The greatest disability within this age group is mental health disorders. Almost a quarter have experienced four or more types of potential traumatic events. Four or more, one quarter. Almost a half felt they did not have an adult to whom they could talk about important things. A tenth, one in ten experienced a period of homelessness, 16% neither in school or employed, 10% have made a suicide attempt. A quarter have been arrested, 12% with a serious substance abuse problem.

See, just a word or two again about employment, and that is that we have it backwards when it comes to psychiatric disabilities and employment in this country. We don't have to become less symptomatic before returning to work, that work reduces our symptoms. It provides that sense of purpose and belonging, gives us the opportunity to contribute, to share in goals.

Along this line, I also want to say that our work is even more difficult today than it was a week ago. Experiences of the navy yard shootings just downtown D.C. here, just a few miles from us. Obviously, last December as well with the horrible shootings in Newtown,

Connecticut, the names of Adam Lanza and Aaron Alexis just give further burden to the lives of those of us with psychiatric disabilities and that scarlet letter has gotten even worse. What this means, particularly for social inclusion, what it means for us about employment opportunities, when the kind of fear that these kind of incidents can produce, and what can we do as a community to try to address those issues in the days, weeks, years to come. Frankly, it's a huge issue for us.

Part of this also is the culture of diminished expectations from people and young adults with mental health problems. We have to recognize that a diagnosis does not have to become a destiny, as my friend, Russell Pierce, has said. We are not doomed to a life of less health, less enjoyment, less money, less status. We have to break the Prozac ceiling when it comes to employment in mental health.

I'm gonna end my remarks by, again, just relaying my own personal experience. When I started at SAMHSA almost 20 years ago, the then special assistant to the director of the center, Bernie Aarons, told me this a few years later, that she was going to make it, as I started the job, her goal to take care of this mental patient that she saw coming to work at the agency. She expected, in her head, she told me, someone coming in drooling and shuffling, not really being able to function on the job. To make a long story short, three years later we were married and 16 years later, we take care of each other. We have three beautiful children and a home and a mortgage and two dogs. So it's about, again, recovery. It's about keeping that hope for all of us and particularly for young adults. So thank you. I wish you well in your meetings next day or so.