

It was the third night in a row that I had put myself to bed while my mom languished on the phone coaching my brother through an anxiety attack. As he remained stuck on the floor, immovable, I wondered why so much attention was given to my 26 year old brother rather than to eight year old me. But, these were the circumstances that fostered my independence.

Naturally, I was unaware of how his Obsessive Compulsive Personality Disorder (OCPD) interfered with his daily life and stunted his exceedingly high potential. Yet, I was aware of the unspoken ways in which it affected our family dynamic. When my brother's illness did come up, the conversations quickly degraded into sighs of helplessness and unconstructive criticism.

Fast forward to when I was 15, and the fallout of mental illness returned yet again. This time, in the form of my friend Ronen's suicide. There were whispers of whether Ronen, as a suicide victim, would be allowed a Jewish burial. Yet on the one conversation that mattered, the devastating choice made by a passionate young man, everyone was silent. Though his death created an unfamiliar grief and shock, it was accompanied by that familiar silence. Once again, I remained on the sidelines, watching, because mental health was something to be "dealt with by the adults". That independence that allowed me to thrive all my life had simultaneously isolated me from the problems of those I cared about most. I needed my personal drive to become interdependent with my humanity. Realizing that it wasn't just my family suffering from unspoken feelings of helplessness and confusion forced me to address mental health issues: the shards of broken glass that everyone tip toes on but is unwilling to clean up.

So how does a 15 year old tackle the epidemic of mental health stigma? My agenda was simple: create dialogue that would turn unease into an awareness and comfort with conversations around mental health and suicide. I immersed myself in the basics: mental health education and fundraising. I became certified in suicide prevention through ASIST training. I then joined a teen grantmaking organization that allocated thousands of dollars to mental health initiatives. I became involved with one of those initiatives, U-Matter, and found my vehicle to amplify positive dialogue around mental health. U-Matter facilitated speaking events, SafeTalk suicide prevention trainings, and mental health awareness weeks at schools. Most schools jumped at the program, but a select few declined, fearing topics like suicide.

Even after those setbacks, I addressed a crowd at a U-Matter event with optimism. But, in the midst of discussing mental health stigma and necessary courses of action, it dawned on me. Though hundreds met my eyes with nods and claps, what about those who were not in that room? It was the discomfort of those school administrators who said no, those religious gossipers, and those families hiding from diagnosis and treatment who needed to be there.

As I stepped off that podium, I decided that to be a true agent of change, I had to create conversations that would embrace resistance and grief rather than running from them. My work since then has been less about making conversations comfortable and more about pushing discourse beyond people's comfort zones. This means getting parents and teachers SafeTalk trained, using the emotional language of suicide to persuade

objectors of discourse, and insisting that difficult mental health topics are addressed within school curricula.

Although there remains no clear-cut solution, it is those demanding conversations that will get an 8 year old the answers to her questions about her mentally ill brother. Moreover, it is the forward-thinking mental health education that will teach a 15 year old to be aware of the signs of depression in a friend. And, it will take everyone sitting squarely in their discomfort before we can say we have made lasting changes in mental health.