

Seán Collins (host) ([00:05](#)):

The Surgeon General makes the argument for helping one another.

Vivek Murthy, M.D. (Surgeon General) ([00:09](#)):

As human beings, we can sustain so much challenge and face down such tough odds when we're together, when we feel like they're people who have our back and when we have support. But when you're alone, gosh, even what seem like everyday challenges can feel utterly overwhelming.

Seán Collins (host) ([00:33](#)):

Before the pandemic one in five children in America faced a challenge with their mental, emotional, or behavioral health. Since the pandemic began, symptoms of depression and anxiety among young people have doubled worldwide. We all have a role in protecting the mental health of kids. And we can start by making it something it's okay to talk about. On today's program, two youth advocates for mental health, Billie and Kaiya, in conversation with one another, talking about what they've experienced and how they've worked to make things better for other young people. Stay with us.

([01:30](#)):

You're with the Hear Me Now podcast that comes to you from the Providence Institute for Human Caring. I'm Sean Collins. I'm glad you're listening. Since the pandemic began, there has been increased focus on the mental health of young people across the globe, and we've learned that talking about mental health makes it easier to seek and get help. Today, we wanted to present a model, not in any prescriptive way, but as a way of simply saying, here are two people talking with one another about their own mental health and about the ways they've been able to work at helping others. Billie Henderson is a college student and an activist. She's an advocate for mental and behavioral health, and so is Kaiya Bates. She's a high school student who's worked at getting people the help that they need. What you're about to hear is Billie and Kaiya's conversation, getting to know one another, sharing their experiences, talking about the challenges that they face and how they're finding ways to connect with and help others.

([02:41](#)):

Letting you know that there is talk about self harm and suicidality. If you are struggling, please reach out today. There are people who can listen and can help. Call 9-8-8 to reach the Suicide and Crisis Lifeline. You'll also find other resources on our website. HearMeNowPodcast.org. Thanks again for listening. Now here are Kaiya and Billie.

Billie Henderson ([03:12](#)):

Hi my name's Billie Henderson. I am 20 years old currently going to Willamette University in Salem Oregon. And God, what else should I say about myself? Oh, I'm a politics major. A horrible thing to major in. It's like so goddamn stressful. But yeah, I'm also a part-time activist, so I participate in a lot of protests and events grown by different organizations that are around here, and my pronouns are Sheba.

Kaiya Bates ([03:53](#)):

Okay, so I guess my turn. My name is Kaiya Bates. I am 18 years old. I'm a senior in high school here at Chiana, and I am a mental health advocate and I recently got into doing a lot of work with mental health when I was Miss Tri-Cities Outstanding Teen. So I also do pageants, <laugh>, which has been really great experience. Really fun. Very unique too. Yeah, so I'm just a high school student. I also teach piano and mental health advocates, so that's pretty much me.

Billie Henderson (04:32):

I'm glad to hear that your pageantry experience has been a good one since I don't often hear two totally good things about pageants, like modeling and anything like that.

Kaiya Bates (04:47):

Right, Yeah, I think a lot of people have misconceptions about pageants especially a lot of people think that they're beauty pageants, but the organization that I'm with of misser organization, it's all about service and serving others, so

Billie Henderson (05:02):

<affirmative>. Oh, okay. That's cool. Then what type of stuff have you, I guess, done in service of others? I guess, what would you say for that question at a pageant?

Kaiya Bates (05:16):

So throughout my entire year, so you have your, I guess, reign for a year and so we each have a social impact initiative, which is something that you have that's important to you and you use that to help the community. And so my social impact initiative was staying calm, overcoming mental health issues and stereotypes. So my community service was all about mental health and raising awareness for that. And where I live come from over 70% of students in my hometown come from low income families. They don't have the resources to help get mental health help for them. And I recognized that and I realized that especially after covid, because I felt like after Covid, that really sparked a whole new conversation and raised awareness for mental health because everybody was struggling <affirmative>. And so something that, a few things that I did so the main thing that I actually did with mental health throughout my year was make fidget tool kits for elementary school students to have in their classrooms. And I called them regulation kits because that's really personal to me because I had that was a healthy coping strategy for me when I was feeling anxious. And so I wanted to share that with everyone. And so I was able to raise over \$23,000 actually, I think 2000 or 3000 of which was donated from Providence Health towards my initiative. And so I was able to make over 600 regulation kits to every single elementary school in the

Billie Henderson (06:57):

District. Wow, that's really amazing. <laugh>, Thank you. No, I know. Definitely when I was in elementary school, I would've wished to have one of those kids instead of developing a habit of skin picking or something.

Kaiya Bates (07:10):

Right. And I feel like that needs to be addressed in schools because school, we are at school majority of the time, and so I feel like mental health awareness and normalizing that conversation, especially at a young age, I think that is super important.

Billie Henderson (07:26):

Yeah, I definitely agree with that. I actually had the opportunity God, I think it was three or four years ago I had the opportunity to be a part of this documentary that talks about youth mental illness called Hiding in Plain Sight. And that actually just premiered this year so it's very freshly out. You can find on Amazon Prime pbs, it'll be going to Netflix soon. That was a really, really cool opportunity cuz it was the

first time that I'd really told my story in such a big way I guess that would be available to see for the entire country. And one of the really fascinating things now that they're working on with this documentary is a four hour, two part documentary and it's kind of sliced up into these little 30 minute vis that talk about different aspects of mental illness. And now they're currently working on taking these little vis and molding them into a curriculum about mental health that would then be put into public schools all over the country.

[\(08:55\)](#):

So they'll be able to show this and they're trying to at least have it be able to be shown in middle schools and high schools and also at the college level for a lot of the much more heavy hitting stuff. But I just think that that's, that's really cool because I never learned about anything involving mental illness as a kid in a young age. Even in high school my learning about mental illness just came from my own lived experience with my own mental health issues. So I'm really, really excited that they're actually able to now pursue that and that it's something that, at least from what we've seen from most public schools is that it's being widely accepted.

Kaiya Bates [\(09:47\)](#):

Right. Yeah, no, I've definitely seen that and I feel the same way when I was in elementary school, middle school and I'm still in high school. It is become a lot better, especially the past couple years. And I feel like that's a great step towards destigmatizing the topic of mental health and help normalize that conversation because there's so many people out there suffering with a mental health condition and I think I'm so passionate about that subject, especially with sharing your story. So I guess I just have a question for you. So what made you want to share your story or what motivated you?

Billie Henderson [\(10:24\)](#):

Yeah honestly, it was really just the thought that someone might get help against some insight through my story because it's something that since it is my life, my own lived experience I don't often think about my story in such an introspective way, I guess. And so when I heard about the opportunity to tell my story in this very public fashion, I just figured that if there's any chance that my experience and my story and everything that I've been through in telling that I may be able to help someone else who might be going through something similar, then that's all I need. Even if it, out of the millions of people that we've had now see this documentary, there's only two people that I help through my story, then that's okay with me.

Kaiya Bates [\(11:30\)](#):

I really like that. Yeah, I agree. Just helping other people.

Billie Henderson [\(11:35\)](#):

Yeah, I kind of saw it in the way I just hosted in a screening of the documentary on my college campus recently. And the analogy that I used there for where I told it was kind of like when you're in class and the teacher asks a question to the whole class and there's no one who is raising their hand, there's no one who wants to be the first one to answer. That's kind of how I saw it. I guess if I'm able to just give my answer, raise my hand, and that can help to start a conversation going, then it's worth it.

Kaiya Bates [\(12:24\)](#):

No, I actually really like that analogy. I hadn't really thought of it like that and I've definitely seen that in my own life because I was one of those kids too. I never felt like I could share about my mental health struggles because I constantly felt ashamed because nobody ever talked about it. So I just thought it was something that you had to keep to yourself, <affirmative>. But I've seen especially recently that now that I've shared my story through my mental health journey, it's just been so amazing to see all the other people that are willing to speak up after you do it first. And it's been so cool to see people being willing to be vulnerable and share that vulnerable side of themselves because I know that it's not a comfortable thing. I mean, it's never going to be a comfortable thing because it's something super personal to you, but I've seen the benefits from it and it's been such an amazing experience for me, especially with sharing with a bunch of elementary school kids because I feel like they needed an example that, I wanted an example when I was younger of someone that was a teenager that was sharing about something that was important to them and something that a lot of people struggle with.

(13:45):

And so that's been a very rewarding experience for me.

Billie Henderson (13:50):

And I mean, at that young age, people don't often think about that young age. It's like, Oh, you can't have a mental illness. You're a child. Exactly. You, what have you been through? And that of, how do I phrase it? That sort of narrative I feel like gets carried when it's a conversation of younger people and mental illness. But in the documentary, we had kids who were 10, 11 years old who were talking about their experience with suicidality, with depression with going to inpatient treatment and so ages. I don't see age as a factor when it comes to mental illness. Anyone can be having these issues and we often see the onset of them at those very young ages.

Kaiya Bates (14:46):

Exactly, yeah. And in my personal experience I was diagnosed with selective mutism when I was two. So yeah, that's really personal to me. And I agree. I don't feel like there is a certain age where you can develop a mental health condition, something that people just have that are just born with. And in my case, yes, that was my

Billie Henderson (15:13):

Case. Absolutely. Is there anything else that you are on working on pursuing in your mental health advocacy goals?

Kaiya Bates (15:25):

Yes yes. So I did a bunch of work with my regulation kits. I was able to be on I think nine news channels including Morning in America,

Billie Henderson (15:36):

God damn

Kaiya Bates (15:38):

<laugh>

Billie Henderson (15:38):

Oh damn. Ok, I see you.

Kaiya Bates ([15:41](#)):

Thank you. <laugh>. But it was so cool being able to share my story to many people across the nation. But the work that I'm focusing on right now is making mental health modules to make curriculum to share in schools, and I'm trying to make a mental health club at my school right now. And then once we pair up, I want to work with I'm part of the National Student Advisory Council on Work2BeWell, so

Billie Henderson ([16:11](#)):

Oh, nice.

Kaiya Bates ([16:12](#)):

<laugh>. So I want to align my school and I want to make my school Work2BeWell school and so we can train other schools to raise mental health advocacy. So that's one thing that I wanna do. And another thing that I've been really interested in pursuing is starting Youth coalitions in my hometown. So that's something that I've been working on.

Seán Collins (host) ([16:43](#)):

Billie and Kaiya, can I ask you to explain what Work2BeWell is for people who are listening who don't know?

Kaiya Bates ([16:52](#)):

Oh, yes, yes.

Billie Henderson ([16:54](#)):

I'm let Kaiya do that. <laugh>, it's been like four, five years since I was in Work2BeWell. So

Kaiya Bates ([17:01](#)):

Yes, I can totally explain. So Work2BeWell is a nonprofit organization through Providence Health. It's all about raising mental health advocacy. And they have a social media page on Instagram and Facebook and they do a lot of things from pairing up with schools to making curriculum. And they have an awesome website filled with a lot of resources, and they also make podcasts too. And so yeah,

Billie Henderson ([17:31](#)):

Talk to be. Well,

Kaiya Bates ([17:32](#)):

Yes, I've been on one, so it was

Billie Henderson ([17:35](#)):

A really cool Hey gang. I

Kaiya Bates ([17:36](#)):

Know. But yeah, so it's such an amazing organization and I'm very happy to be a part of it.

Billie Henderson ([17:47](#)):

I love it when I can get other organizations I've talked to partner with Work2BeWell because they really do have so many amazing tools and resources available for free for anyone to access. And yet I feel like they don't get in as much credit as they deserve.

Kaiya Bates ([18:11](#)):

I agree. So I just, sorry, I hate to change the subject <laugh>, but I felt like I should address this. So I've seen a lot, especially in my community, there's such a negative stigma around getting medication for your mental health. And I'm very passionate about the subject. I've been taking medication for four or five years. Why do you think there's such a negative stigma around that, and what would you say to a teenager who thinks that it isn't for them?

Billie Henderson ([18:46](#)):

Yeah I feel like a lot of the negative stigma that I see surrounding medication for mental health is I guess one thing would be the mistrust between the patient and the provider. This mistrust about what the medication is, what is it due How is it going to affect me? Will this make me different? And I see a lot of that. And I especially see a lot of this mistrust among bipo communities who have historically been mistreated by medical institutions. And so lot of, I feel like there is a lot of animosity between patient and provider. And I think also because there's so many people and cultures who don't really they don't really address mental health, they don't want to see as a serious problem. And so typically what most people think of, if they go to a doctor and get a medication, it's to fight an infection, fight a disease, a fight pain, or this physical, tangible thing. Whereas with mental health, it's not physically tangible. And so I think some people can just see mental health is not that big of an issue because it's not like you have an infection or disease. And for other people, I think it's also it could be that getting medicated would essentially mean admitting that they have a problem that they need medication for.

([20:49](#)):

And so for what I tell young people who are having doubts about whether or not they should go on medication is that medication is always weird because it works for some people and it doesn't work for others. I've been on just about every single type of antidepressant that there is, ssri, Sri tricyclic. And none of them had helped me before but then when I started taking medication to specifically target the anxiety portion, that helped a lot. And I was able to actually be functional and stable for a long time. And so, well, yes, medication is hit or miss, it's rarely ever. Is it something that you're going to take one pill and then it's done, it's gone. No, it's a trial and error process. I'm a trans woman and it was the same thing with my hormones. There's a trial and error process of we're gonna try, we're gonna see if this works, and if it doesn't, we'll adjust it a little and if not, we'll try something else. And you just go on like that until you find out what works for you. And so there may even be law of cases where someone doesn't, like, they may function better without medication than on medication but that doesn't mean that someone else will have the same experience. So talk to your doctor, please. If you think you need medication, talk to your doctor. It's not something you wanna put off. It just causes more problems for future you to be mad at past you for

Kaiya Bates ([22:50](#)):

Exactly. No, I really liked that, especially with the hit or miss type of thing. Because yes, there, it's different for everybody. And I've seen in my own life, I see a lot of people feeling ashamed and guilty for needing to take medication for their mental health. I feel like a lot of people feel the need to hide it. And

I think people think that it's a sign of weakness, which is totally a misconception because giving help for your mental health is just as important as physical health, just like what you said, because it's not a tangible thing. It's something that's an invisible struggle. And so that's why a lot of people don't think that they one need it or that they can function better with it. But I, I've seen how much of a difference it's made in my own life. It's made such a positive impact. It's worked for me. I've taken antidepressants, yes, and anxiety medication. And I do believe that medication can be life saving. And in some cases, not all cases, an essential part of treatment for mental health condition. <affirmative> the thing that's most important. And that's not about medication, it's about getting the treatment that you need.

Billie Henderson ([24:04](#)):

Yeah, exactly. And like you mentioned, it's about getting the treatment that you need. So even if you do need medication, it's oftentimes the case where the medication isn't enough. You can't just be medicated and then expect all of your problems to go away. Certainly every solution to everything. No, you need therapy, you need counseling and you need that support system in place. Because the way I see medication is that it's essentially, it's a tool. It's a tool to help get you to a place where you are stable enough to say, be in therapy and do counseling and talk about these issues. It's not something that can just make everything magically feel better. And I like the point you mentioned of people will oftentimes see themselves as weak for needing medication. You wouldn't go up to someone who is having chemotherapy, dialysis and called them weak because haha, you got messed up kidneys. No, you don't. No one would think that that's okay. And it's the same thing with mental illness. You're not gonna walk up to someone who needs medication for their depression, say, Oh, you weak, you a pussy. No,

Kaiya Bates ([25:33](#)):

Yeah, you're right. Nobody would go up to somebody who's struggling with cancer, some sort of disease and call them weak because it is a tangible thing and you can see it. That's why I think there is such just, there's just a lot of negative stereotypes with that because a lot of people you can't see. And a lot of people are good at hiding what they're struggling with. And so I think that's definitely why

Seán Collins (host) ([26:02](#)):

That's Kaiya Bates talking with Billie Henderson, we're listening to their conversation today as we explore ways to support the mental health of young people. You'll find a list of resources on our website. HearMeNowPodcast.org. If you are struggling, please call the Suicide and Crisis Lifeline at 9-8-8. Someone's available now to talk with here. No, back to Billie and Kaiya's conversation.

Billie Henderson ([26:31](#)):

Now, you had mentioned this earlier, how the conversation regarding mental health and mental illness has been improving and especially among younger generations. And that's something that I have seen too in my throughout high school and my middle school careers. I don't remember anyone ever talking to us about mental illness. I think we had one little tiny conversation about it in middle school where we are, This is depression, this is anxiety. And they left it at that. But now I am happy to see when I'm scrolling on my Instagram page or TikTok or whatever and I see a lot of these posts that are about mental health awareness and talking about, I see a lot of posts about like ADHD awareness borderline personality disorder depression, suicidality and it's just these posts that spread awareness about it. But also the part that I really appreciate is that they talk about the ugly shit that's involved with it. Because if you're going to be talking about mental illness, you can't just leave out all of the doty grimy details that come with it. You can't talk about anorexia without also talking about the hunger pains and not being

able to poop for a week and fainting. Anytime you get up, you can't talk about drug addiction without the manic feeling for getting your next hit, without talking about the shit that you would do in order to be able to afford that next hit.

[\(28:26\)](#):

These are all details that are so important in the experience of people who suffer from these mental illnesses. And yet it's not often talked about. It's, there's a dirty taboo feeling that comes with discussing these aspects. And I do believe that a lot of that conversation has happened because of Covid. Like you mentioned I think when Covid started, I was in my senior year of high school it, it happened literally my second semester, just halfway through and everything got toned to shit. And that's why we saw a lot more people discussing about mental illness because now there's, at home all day, you're in quarantine, you're not able to go outside or socialize. And so you're just left with your thoughts all day.

[\(29:34\)](#):

And I think also we see this very tangible this very tangible statistics about increasing mental health issues among younger generations because just think about how much has happened since Covid started. We are living in a pandemic. We have top scientists in the will yelling every day about how climate change is going to destroy us in the next 20 years. You've seen all of these protests around police brutality, all of these shootings God, all of these shootings. It's a very terrifying world to live in right now for younger generations because we still have our whole lives ahead of us. And if everything feels like it's this shitty right now, just think about everything else that could happen in our lives.

Kaiya Bates [\(30:43\)](#):

Exactly. Yeah. And just what you said, I mean, it is a lot more prevalent these days, especially with Covid. And yeah, it has become a more common conversation, especially because I feel like during Covid there was a lot of things that became more common, especially about raising awareness for a bunch of topics. And I, I'm glad that mental health was one of them. But I guess I just wanted to ask what is your mental health journey? What made you who you are today?

Billie Henderson [\(31:18\)](#):

Oh God. Let's see. There's so much. I feel like I've lived three lifetimes already. I know. Yeah. Let's see. Well, I've always known I was trans since a young age but I never really had an opportunity to explore it, I guess when I was a kid. Cuz I lived in Bend, Oregon, which is very hick town republican area, <laugh>, that type of beat. And so when I finally moved to Portland I finally got the opportunity to explore that aspect of myself more. And I got to start hormone replacement therapy and everything was going good. But then part way through my hormone replacement therapy they kind of botched it, I guess cuz they had me on this testosterone blocker called Lupron. And I started that when I was 15, I wanna say 15, yeah, 15.

[\(32:41\)](#):

And I was on that and I was supposed to start estrogen at the same time, but there was a nurse at O H S U, which is where I was getting my treatment at the time. There was a nurse there who told us that we should wait a month or two before actually pursuing the estrogen in order to give the Lupron time to activate. That was a lie. And that was a big mistake because for about a month and a half after that, I had zero hormones in my body. There's no estrogen, there's no testosterone. And that's a whole month and a half of my life that I just don't remember at all because I was so out of it and unmotivated. And my mom told me basically I was a robot. I would just, I'd just lay in bed all day and do nothing.

[\(33:45\)](#):

And that's where we started to see a lot of my smaller mental health disorders, I guess my anxiety and my depression that I had since I was a kid. That's where we started to see a lot of that begin to really grow and manifest. And so it wasn't long after that I got diagnosed with a major depressive disorder and generalized anxiety disorder. And then soon after that I was diagnosed with anorexia. And that's something that I had to actually go to a treatment facility for. I was in a partial hospitalization program that was offered by Providence. And my first time in, I was there for three months. My second time I was there for a month and a half.

[\(34:49\)](#):

And soon after that I had my first big suicide attempt, I guess, where I tried to overdose on my antidepressant since I've been collecting up. And that was a whole thing. I ended up going to a psych ward for a bit for that. But luckily through therapy and finally finding the medication that works for me, I managed to get my stuff under control for the most part. But it wasn't long after being in the psych ward that I actually started to develop a pretty big drug addiction problem. I was abusing pills, mainly Xanax and the opioids and just really basically doing anything that I could get my hands on to get high and that I actually actually ended up being a big problem until I had my if my oh shit moment is how I phrase it which was a bit of a couple collections of moments.

[\(36:23\)](#):

It was one night when I went into a drug-induced psychosis after combining Xanax and Adderall and I really scared a lot. I scared my whole family because I was being so erratic and delusional. And then I also had what I called the Ambien incidents where there was one weekend I had taken my dose of Ambien, my doctor just upped it to help my sleep. And after taking that dose, I ended up going on a late night drive. And I don't remember the drive itself whatsoever. All I remember is getting pulled over by the police in Lake Oswego and them telling me that I had driven through a construction site and nearly hit a construction worker. And then the weekend right after that, I accidentally overdosed on my Ambien when I again took my usual dose it didn't work. So I took a second one and then I blacked out and woke up in a hospital with them telling me that I have a blood alcohol count of one four.

[\(37:54\)](#):

And we went back home later that day to find out. I had actually taken around half of my ambience script that night as well. So I was very lucky to not have died that time because it was a very dangerous situation I guess. And so after that I kind of started to focus more on actually actually addressing my mental health issues on actually getting help for them and trying to work to better myself. And this would then be around the time when I'm starting college. And for a bit there I was going really good. And then there was last year where and I had already relapsed on a couple substances by this point but now the relapse lasted any longer than two months or three months I'd say. But there was last year, last spring semester which would actually be this February of this year where I was at a protest in downtown Portland. This was a march. There was a justice for Patrick Kimmons march. And I was at this protest, whenever I go to them, I go as a field medic to just assist other medics if anything happens. And there was a shooting, someone had decided to come to the protest with a gun and fire into our security team.

[\(39:54\)](#):

So I rushed over to the scene to help people out, come to find, I wanna say six bodies on the ground. So I ran to the closest one that there was to me. And long story short, the person that I was helping ended up being declared dead on the scene by paramedics. And so that kind of just threw in PTSD to my whole mental illness I guess mental illness cocktail that I have going on. And it's something that I'm still working on processing today. Cuz one of the things that's often not talked about with ADHD is our incredible ability to mask. I'm very good at acting. I am a stable and healthy person. And also our ability

to compartmentalize, because I was seeing a therapist at the time when this happened, who's an amazing therapist. She's been so very helpful and matches my way of seeing myself in my mental illness. Exactly.

(41:26):

But I was seeing her and she was helping me to process this traumatic event and I kind of just compartmentalized it to the point where I had actually convinced myself that I processed all of that stuff and that I was okay now I still had like PTSD, but I was managing it. And now this year due to a couple things that have come up since there are new stresses being added that kind of, if you just compartmentalizing and bottling up all of your emotions and trauma and shit to the, and never releasing any of it, then it can often happen where when one new stressor is added, it doesn't even have to be a big one, it's just a new stressor that's added into the bottle. It can cause it to burst. And that's kind of been what I'm going through now, where that bottle has burst and all of those emotions and stress and trauma over everything that happened in February is now rushing back out for me to deal with <affirmative>. That's where I am to this point at least.

Kaiya Bates (43:02):

Well, I applaud you for being able to talk about it in such an amazing way. I mean, I am just listening to that just makes me applaud you because I, You are so strong, you really are. And I definitely have not been through as much as you have. I mean as far as,

Billie Henderson (43:29):

Okay, I do just gotta say I do not, I don't like to compare. Right,

Kaiya Bates (43:32):

Exactly.

Billie Henderson (43:33):

Mental health stories because one, everyone's story is different. It's proportional to that person. So I never for people say that they haven't been through as much as I have because who knows, We all process shit in a different way.

Kaiya Bates (43:54):

Exactly. Yes. No, yeah. <laugh>. But yeah, I think, I mean, I guess hearing your story and hearing your journey, what is one thing that you would tell your younger self now that you've been through it?

Billie Henderson (44:14):

I'd wanna tell my youngest self that is going to be okay is at least I know when I was a young kid, there was so many things that I was going through where I felt like this is a world ending scenario. This was the worst case. It's horrible, I'm gonna die because of this, but I survived and I keep on surviving despite what new stuff gets added into that. So yeah, I just wanna tell my younger self to be okay and to hang in there and to see how amazing and hot we are today

Kaiya Bates (44:59):

<affirmative>. Exactly. Exactly. I like that. I like that a lot.

Billie Henderson (45:03):

Yeah. Well, why don't you tell me your mental health story?

Kaiya Bates (45:08):

So when I was younger, I had suffered with selective mutism for seven years. And for those of you who don't know what selective mutism is, it's a severe anxiety disorder in which a person cannot speak in certain social situations. And in my case, I would not speak to anybody outside of my immediate family. It took me two years to talk to my preschool teacher, took me eight months to talk to my kindergarten teacher. And even just saying hi, just as simple thing as that was so hard for me and I didn't understand why it was so hard for me and so easy for everybody else. And I mean, at least that's what it seemed to me. And I found myself constantly just being ashamed. I didn't, making eye contact with people. It made me nervous. I remember just constantly feeling anxiety, but I never was able to express myself. I never was able to explain how I was feeling because I was just so anxious that I couldn't speak. And it was really hard for me, very, very hard for me, especially because I felt so alone and I felt like nobody knew how I was feeling because back then, I mean even 10 years ago mean not a lot of people talked about mental health and especially in elementary school. I mean, I think I just had lessons about empathy and being nice to other people, <laugh>. I think that was the closest thought to

Billie Henderson (46:52):

Mental

Kaiya Bates (46:52):

Discuss. And so I thought that I was different from everybody else because that was never discussed in my environment. And so I had gone to years and years of therapy and it was hard for me to participate in class. And I also struggle, still struggle but I have struggled with Tricot mania which is a hair pulling disorder because of high levels of anxiety. And that was really hard for me too. That also created more anxiety because I often, I would go to school with a bald spot on my head and that did not help my select mutism at all because it just made me shut down even more.

(47:48):

And there's just a lot of years of me doing my hair a certain way to hide things and people would ask me if I had cancer a lot of those type of questions. And it was not something I felt comfortable talking about. And it's still something that's pretty personal to me as, because I still struggle with it. Just all of that, just feeling a bunch of anxiety. So my mental health journey's a bunch about anxiety, but I mean I've now grown and learned, I wouldn't say grown, I would say I've learned how to cope. I've learned how to embrace my collectives. I've learned how to cope with social anxiety in severe forms of social anxiety. And it's why I, sharing my personal story has been so important to me, especially because I was wanting someone like me who I could relate to. And I felt like I couldn't relate to anybody.

(48:48):

And that's why I'm so passionate about this topic. I actually had one experience. So I did a lot of anxiety presentations when I was Ms. Tri-C City's outstanding teen about anxiety and how to use my regulation kits. And I was in the kindergarten classroom and the teacher had told me, she had came up to me before my presentation and I remember she told me, she said, There's a little girl in there that has selective mutism. And it turns out her name was actually Kaiya just like me, and she was actually half Korean just like me. Oh my God. I thought that was just the coolest experience because I talked about,

Billie Henderson ([49:32](#)):

I think you talk to yourself, I think you met your younger self.

Kaiya Bates ([49:35](#)):

Exactly. I know. And it was just a what just absolutely mind blowing because I knew that that was something that has leaded me to this moment, that moment because she was able to hear from someone with the exact same name as her, was someone who looks a lot like her about something that she struggles with too. And the teacher had told me before, she's most likely not gonna talk to you because she suffers with mutism. And I said, Of course, I completely understand. And I talked about my story and how I often feel anxious in the classroom and it was looking through a mirror, turning back time or something. But after my presentation, she actually came up to me, she gave me a hug and she started talking to me. And I know how hard that must have been for her because I know from personal experience that is difficult. And so that was just probably the most touching and one of the most important experiences that I've had, especially with being a mental health advocate because it was truly looking through a mirror.

Billie Henderson ([50:53](#)):

Wow. That is such an inspiring story for being a mental health advocate, cuz it's not often that you have that experience of literally meeting your younger self. Exactly. Right. <laugh> being able to be the one who inspires them to overcome that fear and to tells them that they're not alone. Exactly. That is such an amazing story. And also, I do gotta say, you are so very eloquent with the way you talk about your experience. You talk about it so just elegantly and refined and with so much confidence behind it.

Kaiya Bates ([51:48](#)):

Yeah, thank you. I definitely remember it took me, what is it now? I mean, it's a year and a half of talking about my mental health story, but I remember at the beginning because something that you do when you try out or run, I guess to be part of the Miss America organization and to win a title, you have to do an interview with the judges and they do talk a lot about your social impact. And mine of course was about mental health, and that was last July, so it was over a year ago now, but I remember that was when I had just started talking about my mental health story. So it took me years and years to talk about it. But I remember they had asked me about it and it was in front of five adults. And so little me, I mean freaked out because <laugh>, I couldn't even talk to one adult alone, let alone five and especially about not about mental health. I would never be able to do that even four years ago. And I remember that's why I'm so passionate about sharing your story and starting out because it's never going to be a comfortable thing. Like I said earlier, and I remember I did, I was crying <laugh> when I was talking about it because it wasn't really comfortable for me. And thank you. That's actually a really huge compliment to hear that I can speak with such confidence because that's not something that I was able to do even a year ago.

Billie Henderson ([53:23](#)):

Yeah, definitely. It took me, I think around two years before I really got comfortable telling my story to the point where I could tell it so easily. Yes. Even when I was interviewed for the documentary the way that I told my story back then was with just so much anxiety and overthinking. And I hate listening to myself talk that many years ago because I'm just like, God, I could have told this so much better now. <laugh>

Kaiya Bates ([54:03](#)):

Right? Oh, I feel the same way. <laugh>.

Seán Collins (host) ([54:07](#)):

Well as someone who's been listening to people tell stories for more than 50 years I don't think I've ever listened to two people your age be as eloquent as the two of you have been. I mean, it's really, really impressive and it's really helpful for others to hear it talk about destigmatizing something that a lot of us live through, and it's part of our makeup and our personality, and it's what makes us wonderful in a lot of ways. And it makes us human in every other way. And I'm really grateful for the two of you. Oh, spending the time with one another. Thank you. And telling these stories.

Kaiya Bates ([54:55](#)):

Yeah. I definitely really liked what you said, how it's part of us and it's what makes our makeup. Because I, looking back at all my trials regarding mental health, I couldn't help but feel grateful for the experiences I've had because not only has it helped me connect with others, but it's also helped me become more confident in myself. And it's all, it's allowed me to be able to have that new to perspective and to be able to help others with their mental health. And I'm grateful for the experiences that I've had. And now I can look back at my experiences with fondness, but obviously not at the time. I wasn't too fond <laugh> of what I'm going through, but <laugh>, I cannot look at it with a sense of pride because I was able to go through that. I mean, I went through that and now I'm able to talk about it and I'm able to help others. And so that I'm honestly grateful for mental health and grateful for the experiences that I've gone through.

Billie Henderson ([56:12](#)):

<affirmative>. Yeah. I wouldn't be who I am today if I didn't go through what I went through as shitty and traumatic and horrible as it was. I still like if I could live my life again, I wouldn't change anything.

Seán Collins (host) ([56:32](#)):

That's Billie Henderson, College student and youth Mental Health advocate. Kaiya Bates is a high school student, an advocate for young people's mental health. Our sincere thanks to them both. You'll find a list of resources on our website, [HearMeNowPodcast.org](#). If you're struggling, please call the Suicide and Crisis Lifeline at 9-8-8. Someone's available now to talk with you, and you'll find a list of vital resources on our website. [HearMeNowPodcast.org](#).

([57:18](#)):

The Hear Me Now podcast is a production of the Providence Institute for Human Caring. The program is produced by Melody Faucet and Scott Acord. We have research help from medical librarians, Katherine Gibbs, CIMA bta, Amanda Schwartz and Heather Martin. Our theme music was written by Roger Neal. The executive producer is Michael Drummond. Join us in two weeks when we try to assess the current moment in Alzheimer's research. I'm Sean Collins. Thanks for listening. Be well.