Angela Diaz: At the Mount Sinai Adolescent Health Center, we provide free services to the patient, and no cost to them. On average, we spend about $1,000 per year for all the services that they receive, all those comprehensive services. We also buy their medication and we've even metro cards so that there is no barriers. And because only 30% of the teenagers that come to us, the young people that come to us have Medicaid, if they have Medicaid, we bill Medicaid, but we have to raise a lot of money. So our budget for the year is $10 million. So we raise the money to be able to provide all the services that they need integrated and not worry about the fact that they do not have money or insurance.

Angela Diaz: The Mount Sinai Adolescent Health Center has had a long history of partnering with schools and we partner in differing ways. One is that we have within six high schools in Manhattan, we have full-time clinics. So right inside the school building we have clinics where we provide medical, mental health, sexual health, so all the components, and we also can go to the classroom if a teacher request us. So very strong working relationship with schools.

Angela Diaz: We also have young people that we train to be leaders. We have the Peer Health Education Program that work in different types of schools in New York. And they go into the classroom and work with young people on a ray of issues including how to prevent HIV infection, how to make good decision about trauma. And they go with the staff and is very effective because it's young people talking to young people. Well, also, many schools send young people to us.

Angela Diaz: We feel that parents are really key. Young people have the right to confidential services and we honor that, and that's very important to us, and that's why so many young people come, but we also understand that young people do much better when their parents love them, when their parents are involved in their care, when they can communicate with their parents. So we actually encourage parents to come and bring their children, we encourage young people to talk to their parents.

Angela Diaz: And sometimes the young person might say to us, "Well, I cannot say that to my mom or my dad. They will kill me." And we say, "No, no, no, they will not kill you. Bring them here. We will help you tell them whatever the issue is." And the young person has that option to bring the parents to the clinic and then we help them tell. But we really are major partners with parents, we also do family therapy. Usually the family therapy involve the adolescents that we serve and also whoever is there in their families could be a mom, it could be a dad, it could be both parents, it could be a grandparent, or the siblings. So we really think that family is very important and the healthier the family is, the healthier the young person will be.

Angela Diaz: We've reached the most vulnerable and disconnected young people. And the reason that we are able to do that is because of the way we design our services. We make it easy for everyone to be able to come in. Public School, private school, and the specialized high schools and the teachers and guidance and
Angela Diaz: We have learned working with young people is that we need to ask them direct questions. And if we do and we ask them in a sensitive way that they know we are there just to help them, they're like an open book and they will tell us. And what we do is that before they [crosstalk 00:35:04] I would say something like, "I will be asking you a lot of different questions. We ask those questions from everyone. [crosstalk 00:35:22] is not that we need to be able to [crosstalk 00:35:22] from you and that's why we are asking those questions. So just be aware that we're going to be asking you lots of different types of questions." But we ask every single patient the same thing. It's just to make sure that those that have experienced those things really will be able to share that and then get help for that.

Angela Diaz: We really need to strive for equity? You need to really give this young people the steps that they can climb to get to where they need to be. And the way you do that is by providing teen-friendly services, youth-friendly services, and providing all the different trauma-informed service or that they need a mental health, everything, and working with them in a way that they heal from their trauma and they are able to deal with the different disparities.

Angela Diaz: Another challenge that we face is the lack of awareness of the needs of young people in term of the type of services are they need. People try to send them to a biomedical type of approach, and that just doesn't work. And the funding often doesn't incorporate prevention. And really doing the type of work, the intensity of the work that is needed to address some of those disparities and to really achieve equity. And it is really important because those funding itself is silo, and at some point it will be important to try to figure out, "How do we develop maybe a youth-specific funding mechanism that incorporates all the things that we see?" Because it's in those same kids that we are seeing all the things, "but also the go from wellness to prevention, health education, risk reduction and treatment?"

Angela Diaz: So the full range of scope that I think is needed because these young people really can do very, very well. We need to really think about those social, political, economic context that leads to the disparities and then figure out how to fix it so that people can really maximize their outcome and do well.

Angela Diaz: Another issue is training. When people go to medical school or psychology school or nursing school or social work school, they're not necessarily learning how to work with young people. So training is a major issue. And just to give you the example in medicine. In adolescent medicine people, it's only like a hundred of us. So there are about 26 programs in the country and every program puts
one or two people who graduate every year. So that is not enough adolescent medicine people.

Angela Diaz: There are wonderful pediatricians and family physicians and actually, the majority of youth are seen by those other disciplines, but even them, I think they need additional training. I think we all should be receiving training on how to work with young people. There are the ministers will be receiving training on how to set up a program that are appropriate for young people that is going to make it easy for them to come and utilize those services. The financial mechanism needs to be re-thought and maybe integrated the same way the services are being integrated and I think with all these things, the system would be much more efficient and the outcomes will be much better.

Angela Diaz: We use different lenses. One is a social justice lens. Another one is a positive youth development lens. We actually see the young people as full of promise. They have many assets. These young people are smart, they are creative, they are working and even when they have such challenging lives, they are really trying to do the right thing. Sometimes I work with patients that I wonder, "How does this kid get out of bed, much less go to school, much less help with the chores in the house?" They work, they do really help people in ... They volunteer, so they have tremendous assets.

Angela Diaz: And we need to really start stablish, we need to reframe young people and start seeing them by the positive assets that they have, use positive youth development principles and deal with all issues and the challenges and address them. But really, they should be more about wellness, about how these young people maximize their potential.