

Save kids from jaws of poverty

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During May, Mental Health Month, it seems fitting that I should share something about my experience as a child psychiatrist working with our community's troubled teens in court-mandated placement.

As one might imagine, providing emotional support for teens in placement is challenging, heart-rending work. Nevertheless, I consider it a privilege to be part of the deeply caring community of St. Joseph's Villa, where I have worked as a child and adolescent psychiatrist for the past 20 years.

Through my work at the Villa, I have come "into relationship" with many of our community's most vulnerable adolescents and their families. Indeed, the adolescents who enter placement at St. Joseph's Villa for the most part suffer not from mental illness but from the toxic byproducts of concentrated poverty that include poor nutrition, violent homes and neighborhoods, drug addiction, lead toxicity and schools that are overwhelmed and ill-equipped to meet their needs.

Many are extremely hyperactive and inattentive, often as a result of fetal drug and alcohol exposure, early childhood lead toxicity and repeated trauma. Many have been suspended from school for long periods and/or have given up on school altogether. Many are adolescents who self-medicate with street drugs, who cannot sleep, who are tormented by nightmares and traumatic flashbacks, and who cannot manage the heavy burden of their hurt and anger.

And the number of our community's young people in crisis is rising. How could this not be the case when the poverty rate in the city of Rochester ranks 11th in the nation, when 88 percent of City School District students qualify for free or reduced-price lunches, and less than half of CSD students entering the ninth grade remain in school through graduation?

It has been the greatest privilege to bear witness to the promise and growth (against considerable odds) of many young people who enter placement at St. Joseph's Villa.

On the other hand, responding to the enormous emotional needs of our youths "after the fact" has far too often left me and my co-workers heartbroken and weary.

As a child psychiatrist, I am called upon to consider the potential benefits and risks of prescribing psychoactive medication for our teens. Some clearly do need medical treatment for major psychiatric disorders. For most, however, if

medication is considered, it is as a last resort to dampen highly impairing and dangerous states of hyperarousal (the common psychobiologic consequence of high levels of chronic stress and trauma).

For these young people, the best medicine, by far, is preventive medicine. What better month than Mental Health Month to make a pledge to preventive medicine? Awakening to the poverty crisis and consequent social adversity in our midst should concern us all. Please get involved.

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