

No Shame,

No Blame

Shattering the myths about mental illnesses

By Marona Graham-Bailey

“She’s so weird.”

*“I don’t even like her.” “She’s so scary.”
“I hate her.”*

Carmen P. overhears her peers whisper behind her back. Everyone has to deal with gossip. But Carmen, a 16-year-old from Tennessee, has bipolar disorder as well as post-traumatic stress disorder. Each day, she faces the stigma of a mental illness.

What Is a Stigma?

A stigma is a mark or characteristic, such as a mental illness, that society associates with shame. *Mental illness* is a general term for several medical conditions that interfere with thinking or mood and can make everyday functioning difficult or, in severe cases, impossible. (See “Common Mental Illnesses.”) And it’s fairly common in adolescents; at any particular moment, between 14 percent and 20 percent of young people are dealing with mental illnesses, according to the Institute of Medicine, which studies health issues.

Even though mental illnesses are widespread, the conditions tend to be feared in a way that physical disabilities and other health problems usually aren’t. People with mental conditions may experience discrimination or mistreatment because others think they’re different. In one British survey, 87 percent of people treated for mental illness said the stigma and bias had negatively affected their lives.

Understandably, people battling such problems might fear that revealing their conditions would cause others to avoid them or become hostile. Indeed, a recent study showed 30 percent of people said admitting a mental illness would be tough, but only 20 percent thought coming out as gay would be hard. “If other teenagers find out, they’ll make fun of you,” says Elizabeth W., 17, from Georgia. She is coping with bipolar disorder.

Carmen says she lost some close friends when they found out about her condition. “They would come over to my house, and we’d be best friends,” she recalls. “But then we would walk [in] the neighborhood and we would see another friend,” and the friends Carmen was with would treat her as if she didn’t exist.

Common Mental Illnesses

Bipolar disorder: condition in which moods vary among hyped-up mania, depressed slumps, and normal moods

Depression: an illness that often includes extended periods of persistent sadness, feelings of worthlessness and helplessness, and changes in sleeping and eating habits

Eating disorders: a group of disorders whose symptoms include distorted perception of body image, over- or undereating, or unhealthy methods of losing weight

Phobia: an anxiety disorder characterized by disabling and irrational fears

Post-traumatic stress disorder: an anxiety disorder that can develop after someone experiences or witnesses a traumatic event

Schizophrenia: a thought disorder marked by a false perception of reality, such as hearing voices and seeing hallucinations

Can We Talk?

Those problems may sound small, but ignoring them—and mental health problems—can have serious and lasting effects. The stigma of a mental illness keeps some teens from seeking the help they need, and untreated conditions can have consequences as serious as suicide. In addition, a significant number of teens who have mental illnesses drop out of high school, reports the National Alliance on Mental Illness (NAMI).

Myths About Mental Illness

False beliefs about people with mental illnesses make it easy for prejudice to rear its ugly head. See whether any of these sound familiar.

Mentally ill people are dangerous. Do you assume that people with mental health disorders are more violent than others? If so, you're not alone. Many media stories about mental illness involve violence, says Eric Spencer, executive director of the Georgia state chapter of NAMI.

More knowledge equals less fear and misunderstanding. And that's a good thing.

Those accounts often “don't get any of the positive in there, because if they did, they wouldn't have a story,” says Carmen. In reality, most people with mental illnesses are not violent, and some are more likely to be victims of crime.

You can easily tell when someone is mentally ill. Do you believe that a person with a mental illness looks or acts a certain way? It's true that some disorders have noticeable symptoms. For example, people with schizophrenia

has a best friend who accompanies her to a support group. “She wants to come and learn with me and be there with me,” Carmen says.

Know your limits. Don't take on the responsibility of being your friend's only supporter. “Friends can't do it all,” says Dr. Barbara Gracious, a psychiatry professor. Being a good friend may mean confiding in an adult you trust, such as a parent or guidance counselor, and letting him or her know your friend seems to need more help than you can give.

Now that you know a bit more about mental illnesses, what would you do if a friend told you he or she had such a condition? Here are some ways to help.

Open your ears. Take time to listen to your friend. “At our high school, everybody's talking; you don't really see people listening,” says Elizabeth W., a Georgia teen battling mental illness. Listening is one of the best ways to show your full support to your friend.

School yourself. You're not expected to be an expert on your friend's condition. It's OK if you have never even heard of it. Still, learning about it will help you better understand what he or she is going through. Look up the disorder on a trustworthy Internet site or at the library. And ask your friend questions; asking is always better than making assumptions. Carmen P., a Tennessee teen with bipolar disorder and post-traumatic stress disorder,



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often hear voices that aren't there or have rambling speech. But the feelings of extreme guilt, rejection, and worthlessness characteristic of depression are much less obvious. You generally can't tell whether someone has a mental illness just by looking at him or her. “Someone with a mental illness, you can't see it, and you might never know that that's why they're acting the way that they're acting,” says Spencer.

People with mental illnesses should be in institutions. It's not true that these conditions can be treated only in a hospital. Scientists have learned more about the brain and how it works, and they've found more and better ways to treat depression, schizophrenia, and other conditions. As a result, many people with mental illnesses live in the community. Combining medication with talk therapy helps most people with mental illnesses live healthy and fulfilling lives. And just like those with diabetes or high blood pressure, they must work hard to care for themselves. Carmen says, “You take your medicine. You have good days and bad days.”

People with mental illnesses should just snap out of it. Have you ever thought that if they tried hard enough, people could get rid of mental illnesses? It doesn't work that way, says Dr. Barbara Gracious, a professor of psychiatry and pediatrics at the University of Rochester School of Medicine and Dentistry in New York. “People are afraid of admitting a need or weakness for something that they've been told they should be able to fix on their own or control on their own.” But many mental health disorders have biological causes, and willpower is not enough to make them disappear. People with mental illnesses can lead successful lives by learning how to best manage their disorders and minimize the symptoms.

Part of the Solution

Bias happens because mental illness is a taboo topic. You can help fight the stigma of mental illnesses by breaking that taboo and educating yourself and others. “Learn about mental illness,” encourages Elizabeth, “so if you have

Watch Your Language

It's important to choose your words carefully when talking about mental illnesses. Turning medical terms such as *psychotic* and *schizophrenia* into insulting slang (how often do you hear others say “psycho” or “schizo”?) is hurtful to people who are coping with serious mental illnesses. The name-calling reminds Carmen P., a teen with bipolar disorder and post-traumatic stress disorder, that “just by having a mental illness, you're so much different than all the other kids.”

These language lapses happen every day. Take a study of media coverage of mental health problems by the University of Washington and the Washington state Mental Health Transformation Project. It found that 31 percent of news stories used “negative or derogatory language about people who had mental health issues,” but only 6 percent of stories used positive language.

So what should you say? Instead of demeaning words, use the proper names of disorders. If you don't know the details, general terms, such as “mental illness” or “a mental health condition,” are OK.

Also realize that a person is not the illness. Instead of calling someone “schizophrenic” or “mentally ill,” say “a person with schizophrenia” or “an individual with a mental illness.” When you put people before their labels, you're using “person-first language,” says Eric Spencer from the National Alliance on Mental Illness. Other terms to watch for are *insane asylum* and *loony bin*; use *psychiatric hospital* instead.

any friends who have a mental illness, you'll know how to respond.”

More knowledge equals less fear and misunderstanding. And that's a good thing. “If people were more open and accepting of each other,” says Carmen, “I think it would all be so much better, to not have the judgment that hangs over everyone with mental illness.” **CH2**

Think About It ...

Have you seen examples of bias toward people with mental illnesses in your own life or in the media?