

SPRING BIRTHS NEW PERSPECTIVES

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In a global society where hot topic trends come and go in an instant and where quick answers are accessible to people throughout the world, mental illness seems rather taboo. From passing judgment upon a person's behavior or thought process to describing the characteristics of a struggling psychological status, the symptoms experienced by millions of people throughout the world today is still significantly misunderstood by the general public - the very people those with mental illness depend on most for support.

Clinical terms and phrases are often used by doctors and mental health professionals to summarize and reflect back what patients describe regarding their struggles dealing with mental illness.

"I prefer the words mental health over mental illness when discussing symptoms and patterns of daily living with my clients," says Ken Caselden, Licensed Professional Counselor and Chief Clinical Director at Lighthouse Counseling Services. He says that although symptoms may be grouped together to generally describe how a person is experiencing mental illness, how one person experiences his or her own mental health can be described, and also interpreted, in many different ways. Still, these terms and descriptions do little justice to put into words what so many experience living with common conditions such as depression, anxiety, addiction, and acute stress.

Unfortunately, life with mental illness comes with its share of judgments, discrimination, and negative reckoning resulting in the resistance of openly discussing mental illness. The signs and symptoms of mental illness can be confusing for both the client and those who interact with the person struggling - and the silence one feels compelled to maintain as a result of the negative reactions and misunderstandings do nothing less than worsen the signs and symptoms, Caselden says.

"I know because I am a therapist by day and a patient by night at times it seems," Caselden said humorously. He describes winter time, particularly, as a period of time when irritability, less patience and tolerance, self-defeat, and low motivation become more noticeable by family, friends, and co-workers. He stresses the need to normalize what people with mental illness experience as a necessary first step to countering the negative stigma associated with such. It is important to be open with real, relatable words about what living with mental illness is like so as to educate and reduce the isolation caused by saying too little or too much during periods of poor mental health, he says.

Unfortunately, many people resist asking for help because of the backlash, judgment, fear, and/or shame experienced as a result of feeling something not many people understand or want to accept. Words like "crazy," "bipolar," "suicide," and "hysterical" are too often used with negative connotations.

Many people experiencing a poor mental health, whether periodically or throughout a lifetime, resist seeking help until the 4th quarter when a crisis has become the center of attention. Relief from the crisis then becomes the qualifier for (recovery) resulting in living life one crisis after another. Caselden suggests that patterns may often be the first sign to exploring underlying struggles.

Deep down we are all looking for ways to feel secure, have fun, self express and feel accepted, reach goals and accomplishments, and feel like we belong. “We should break away from the negative labeling of symptoms associated with mental health struggles,” Caselden says. Many people experience symptoms differently. Opening up the dialogue, without judgment and without the common “get over it” attitude that stems from our general misunderstandings about the condition, can open wide the doors toward relief of these symptoms.

We need to speak up, in relatable terms, about the conditions and struggles of mental health. Recovery is possible no matter what stage of life a person is in. Before recovery and/or relief from mental illness may be experienced, however, we have to stop pretending that mental illness just goes away. We have to stop acting like mental illness doesn't exist. We have to stop expecting addicts to just quit using. Most importantly, we have to be honest about mental health being a state that all people experience in one way or another.

Burying feelings, refusing to be open, quick fixes, and praying that the symptoms just go away is not addressing mental health in a healthy manner. “We have to stop qualifying our experiences as being right, wrong, good, or bad. This can always be debatable depending on who you ask. Caselden suggests filtering one's experiences through the idea that our behaviors, feelings, and thoughts are either healthy or unhealthy for one's self and self only.

Empowering people to experience life based on one's own standard for healthy living and supporting those individuals and families to set their own paths for change is most effective when we are proactive, not reactive, to the next crisis.

Caselden says although family and friends may help, a trained professional's unbiased interpretation is often beneficial. “Family and friends often tell us what we want to hear or what they want to tell us. The art of therapy is finding the precise moment to safely discuss and experience life so the person seeking help can find his or her own answer with his or her own words. That is the key to personal, ongoing, developmental change,” he said.

May is Mental Health Month. Appropriately so, as spring births new opportunities and breaths of fresh air, so shall we birth new understandings and perspectives with regard to how we improve mental health.