Taking Care of You ... All of You

Your mental health is just as important as your physical health

BY *Beth Weinhouse*

How are you feeling? No, not your stuffy nose or your achy knees. *Feeling*. There's so much going on in the world right now that many of us are feeling stressed, worried and anxious. Polls that ask people what they're concerned about list a vast array of subjects including keeping their families safe, access to health care, identity theft, paying bills, the opioid epidemic, loneliness, social media, job security, the impact of emerging technology, politics and political polarization, climate disasters, current events, and the state of the world. It's no wonder we're so worried.

The rapid pace of change in so many arenas right now is a big part of the problem. "Change creates anxiety and sometimes depression," says Linda Rosenberg, MSW, who recently left her position at the Columbia University department of psychiatry to consult for private and public companies entering the mental health-care field. "Younger people are looking on Instagram and seeing idealized lives that are driving their anxiety. They're worried about not getting jobs due to AI," she says. "Older people experience loneliness. They're living longer, losing friends and family." The pandemic made people more accustomed to living online, which increased feelings of isolation and loneliness for all ages.

As New Year's approaches, here's another indicator of how we're feeling. After years of prioritizing our physical health, Americans are now turning inward. Popular New Year's resolutions have always included vows to improve physical health through weight loss,

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exercise and healthy eating. But last year, according to the American Psychiatric Association, a record one-third of Americans made a New Year's resolution to prioritize their psychological and emotional health. The things people were resolving to do for the coming year included meditating, spending more time in nature, focusing on spirituality, journaling, taking a social media break and seeing a therapist or psychiatrist.

The saying "You're not alone" sounds cliche, but it has never been more true. Ken Duckworth, MD, chief medical officer at the National Alliance on Mental Illness (NAMI), says some of the shift started with the pandemic, when stress and anxiety almost seemed normal. "It became a 'we' thing instead of a 'they' thing," he says. "Most of us had somebody in our life who was struggling at this time. More people were willing to talk about it." And for those whose stress and anxiety were interfering with their daily lives and happiness, seeking help for their mental health concerns became more accepted.

Currently, anxiety disorders and depression are the biggest mental health challenges facing Americans. And about 1 in 4 of us—around 60 million people—report experiencing at least one mental health condition in

the past year. The numbers are so high, in fact, that the U.S. Centers for Disease Control and Prevention has asserted that the country is in the midst of a mental health crisis.

"There are rising rates of depression and anxiety. We have a substance abuse disorder crisis. I would concur—we are in a mental health crisis," says Marketa Wills, MD, CEO and medical director of the American Psychiatric Association, adding that rates of anxiety and depression are rising steeply in young people.

A slow build

It's true that some of these changes began with the pandemic. But many of America's current mental health challenges actually began before the pandemic even started. "During the pandemic, there were increases in depression and anxiety across the population. But many advocates before the pandemic were shouting that mental health was worsening," says Madeline Reinert, senior director of population health at Mental Health America. "The pandemic seemed to speed up an increase we were already seeing, and draw more attention to it."

In fact, during the pandemic there was some improvement in certain areas of the country's mental health. While that may seem counterintuitive, experts explain that during a crisis—like a war, natural disaster or pandemic—people are often focused on getting through the challenge and surviving. One example: Suicide rates actually went down slightly during the COVID-19 pandemic.

Since then, though, most mental health indicators have returned to pre-pandemic levels. "Depression and anxiety in U.S. adults and adolescents has increased about 60% in the last decade," says Dr. Wills. And suicide and drug overdose remain leading causes of death in the United States. While it's normal to feel anxious about things happening in the world today, "if stress and anxiety are impeding your day-to-day life and making you feel unwell, please reach out for help," urges Dr. Wills. "Your mental health matters."

In good company

"What I think was the silver living of the pandemic was a kind of profound shift in how we think about mental health," says Dr. Duckworth. "COVID opened a conversation in millions of American households about mental health and addiction." Adds Dr. Wills: "We've become more open, transparent, around issues of mental health in ways that we weren't before the pandemic. I'm encouraged by the fact that many more people are seeking the help that they need once they realize they have a mental health condition. So many more people are willing to get treatment than perhaps 5 to 10 years ago, before the pandemic."

And then there's the huge influence of popular culture. "One of the things that's had the biggest impact is when celebrities come out and talk about

their own experiences and recovery," says Rosenberg. Many, many celebrities—including Britain's Prince Harry, athlete Simone Biles and singer/actress Selena Gomez—have done just that.

Andrea Paquette, a young woman who calls herself Bipolar Babe, is the president and co-founder of the Stigma-Free Mental Health Society. She's shared her own journey at more than 850 schools, workplaces and events, connecting with thousands of others who are struggling with mental health disorders. This kind of openness can help people realize that mental illness can affect anyone. The destigmatization not only helps people let go of any shame, but also spurs them to get help, and it encourages government, employers and communities to offer that help.

Recent joint research from the Harris Poll and the American Psychological Association found that nearly 9 in 10 American adults now say that having a mental health disorder is nothing to be ashamed of. But that doesn't mean that mental health is now stigma-free. More than a third of the people polled admitted they would still view someone differently if they learned that person had a mental health condition. So there's still a way to go.

"Mental health treatment has been different than other health care in that it's done behind closed doors," says Rosenberg. "When someone had a physical illness, people brought cakes to comfort them. But people didn't do that when someone had a mental illness. People didn't talk about it." Now, at least they're starting to.

When it's serious

While anxiety, depression and substance abuse disorders may lead the numbers and capture the most national attention, less common mental health disorders such as bipolar disorder and schizophrenia aren't going away. These mental health conditions may get less attention because their prevalence doesn't change as much in relation to external factors like pandemics and political division.

Perhaps because they are both more severe and less common, the stigma around these disorders hasn't abated as much as the stigma around anxiety and depression. Researchers and those who treat mental illnesses say that new ways to identify these serious mental disorders earlier is a priority, as is providing accessible and effective treatment and educating the public.

Shifting priorities

Right now only about half the people in this country with any mental illness receive treatment, for a variety of reasons. "Fewer than half of all counties in the United States have a single psychiatrist," says Reinert. "A lot of those areas are rural areas. Nationwide, there are 340 people for each psychiatrist. So in a lot of places in America, people may have to travel several counties over to get care, which may be out of reach."

Money is also a huge factor, with 1 in 4 adults who experience frequent mental distress unable to see a doctor because of cost. Much of what's being done in the field is aimed at addressing these inequities of access and affordability.

One way experts are hoping to bring mental health care to more people is by enabling primary care doctors and other health-care providers to offer this care in conjunction with mental health experts. "Collaborative care allows primary care physicians to consult with mental health professionals so people can get mental health care with their primary doctor," explains Dr. Wills. With collaborative care, you could go see a health-care provider for a sore throat, and that person could also help you deal with the anxiety you're feeling. In fact, most mild to moderate mental health conditions are now treated by primary care physicians, she adds.

Mental health experts are also working to normalize mental health screening in health-care settings. For instance, when you fill out a questionnaire before your annual physical, you might be asked about your moods and emotions along with your physical symptoms. "If you're being asked about your mental health all the time, then it's not as jarring to bring up a concern," says Reinert.

The other big change coming to mental health care has to do with emerging technology and artificial intelligence (AI). During the pandemic, many people became accustomed to receiving mental health care by telehealth, and

that trend has persisted, allowing people to receive mental health care from home.

A variety of web-based companies—such as Headspace, Talkspace, BetterHelp and Spring Health—help match people with online therapists, making care more accessible, especially in rural communities and medical deserts. In addition, some of these companies are offering AI "companions" to talk to people and are using AI tools to collect large amounts of data, with the goal of improving diagnosis and care. A recent study at Dartmouth University using a therapy chatbot called Therabot found that the program resulted in significant improvements in participants' symptoms.

While the new technology shows a lot of promise, for now some experts are urging caution.

"It's an unregulated industry, and protection of data privacy is paramount," says Dr. Duckworth. "We're open to learning about whether there's a way this can fulfill some of the needs. But there have to be protections, guidelines."

Adds Dr. Wills, "I do think technology will be an important force for mental health treatment in the future, from diagnosis to treatment to research to quality improvement. But I don't believe AI will replace that human interaction, that very important human connection."

It's not all good

Unfortunately, some of the positive trends in the field are being offset by new challenges and bars to treatment. For-profit hospitals may not prioritize

mental health care since it doesn't bring in as much money as other types of medical treatments. "Doing heart surgery, spine surgery, oncology makes a lot of money," says Rosenberg. "The treatment of mental disorders is not a moneymaker." And lingering taboos about mental health, plus the high cost and lack of insurance coverage, persist in making treatment out of reach for many people.

Most worrisome of all, though, say the experts interviewed for this article, are funding cuts being made to the National Institute of Mental Health and the Medicaid program. Medicaid currently funds about 25% of all mental health care in the United States. "These cuts will affect plus or minus 15 million people. Rural mental health care is already a crisis," says Dr. Duckworth. "The Medicaid cuts and closure of the rural infrastructure will be a slow-moving mental health crisis over time."

If you feel you need help ...

If you're feeling overwhelmed by stress and worry or you're experiencing other troubling psychological symptoms, many resources are available to consult for help, no matter where you live or what your personal circumstances are.

✦ Ask your family, friends and neighbors for advice. "Often the best information comes from people you know," says Rosenberg. They might offer a fresh perspective or direct you to resources you didn't know about.

✦ Consult with your primary care physician. Most anxiety disorders and mild to moderate depression can be treated without you having to see a mental health specialist like a psychiatrist. If you do need a referral, your primary care doctor can help you find the right therapist for treatment.

✦ If you work for a large company, you may have access to a mental health program as part of your benefits. Check with human resources to find out more.

✦ Check your health insurance benefits and call to get recommendations for care. Therapy and other treatments may be well-covered by your insurance. Therapists and clinics may offer a sliding scale so treatments aren't out of reach, so ask and find out.

✦ Look into mental health outreach support programs in your area; many are free of charge to residents.

✦ If you are in crisis, call 988, the national Suicide and Crisis Lifeline.

✦ Check online for a wealth of information. Organizations like NAMI have chapters across the country. Visit *nami.org* and input your town to find a local chapter. Mental Health America offers free online screening tests at *screening.mhanational.org* to help you determine if what you're feeling could indicate a mental health disorder.

No matter what you're feeling, there is help out there. You just have to reach out a hand and ask. R