

Mental Illness Is the Most Common Disability

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Mental illness is the most common disability in the U.S. Twenty percent of the adult population experiences mental illness annually. For minors, ages six to 17, the number is one in six. Virtually everyone has a family member or friend who's affected. Yet stereotypes persist, with mental illness often viewed as a sign of personal weakness, leading to blame instead of understanding and help.

The term mental illness is broad and covers a wide spectrum of symptoms and disorders. On the one end, the symptoms may consist of mild anxiety, obsessive thoughts or depression. The symptoms may be situational or more persistent and generalized, but the individual may still function sufficiently in work and social settings. Back in the day, these individuals were often referred to as "the worried well." The other end of the spectrum includes symptoms and disorders that severely impact an individual's ability to function or may result in death due to suicide. Perhaps the broadness of this range explains some of the public's negative views. After all, if I can go to work when I feel depressed, why can't you?

Americans, quite simply, are not receiving the mental health care that they need. A 2017 study by Mental Health America found that over half the adults who were experiencing mental health problems had not received care during the previous year. Over two-thirds of the youths with major depression lacked treatment. Mental health issues were seriously underreported on the IEPs (Individualized Education Programs) of students with disabilities.

Systemic Barriers

There are many reasons that individuals with mental illness do not receive the care that they need:

• Too few mental health providers- Mental Health America found that there was one provider for each 529 individuals needing help. Those living in rural areas have even

less access to a mental health provider. There is a critical shortage of child psychiatrists to treat children and adolescents.

- Inadequate insurance Millions of adults remain uninsured. But even those with health coverage often struggle with copays and limited coverage. Low insurance reimbursement rates mean that even when providers are available, they may not accept a patient's insurance. Attacks on the Affordable Care Act and Medicaid make matters worse.
- Fragmented healthcare system Individuals often don't know where to turn, and a single provider seldom offers all the services needed. In the private sector, a physician may provide medication, while a psychotherapist offers talk therapy. In the public mental health sector, individuals may have access to a team of mental health providers, but due to funding limitations, services are often limited to those with the most severe symptoms.
- Failure to diagnose Individuals may not realize they are experiencing the symptoms of mental illness, and primary care physicians aren't always trained to look for its signs. Depression, for instance, is widely undiagnosed.
- Resistance to treatment Because of the stigma attached to mental illness, many individuals refuse to acknowledge their need for services. In other cases, the illness itself may cloud their judgment. Unless there is danger of violence or self-harm, treatment of adults must be voluntary.
- Untrained police Police, called in times of crisis, are seldom trained to deal with mental illness. Their focus is on the potential for violence in the immediate situation, rather than connecting individuals with local services. Too often, persons who need medical care end up in prison.
- Lack of community resources Many individuals suffering from severe and persistent mental illness lack basic resources such as housing, food and income. Community resources are limited. Such individuals may end up sleeping in shelters or being homeless.

What to Do?

More public education is needed to fight the stereotypes and prejudice that prevent acknowledging how widespread mental illness is. There needs to be a fundamental shift in thinking and acceptance that mental illness deserves the same attention to care as any number of chronic, physical, illnesses. Why is it acceptable for children to dress as psychopaths for Halloween? Would we find it acceptable for a child to dress as someone with, say, progressed ALS?

We need to increase funding for research and for safety net programs that pay for services when private incomes and health insurance fall short. We need health insurance that gives true parity to mental health.

Better screening tools should be developed. More primary care physicians must be trained to recognize the signs of mental illness, and individuals need to understand how to identify the symptoms in themselves. Then they need to know where to turn for services. Telehealth could help. With the current need for social distancing due to the coronavirus epidemic, telehealth is becoming more widespread and acceptable as a legitimate treatment option.

Multidisciplinary crisis intervention teams, comprised of both police and mental health professionals, should be trained and deployed.

There is a need for better funding of community supports that include assistance with housing, skill building and employment.

The solutions to our mental health crisis may not be simple or inexpensive, but the longer we delay significant action, the longer we'll continue to pay an unacceptable social price.

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