Dear Students,

The winter months are filled with reminders of emotional challenges. There is Mental Illness Awareness Week, National Depression Screening Day, Children’s Mental Health Awareness Week, World Mental Health Day, OCD Awareness Week, ADHD Awareness Month, Bullying Prevention Month, Domestic Violence Awareness Month, Survivors of Suicide Month, Pregnancy and Infant Loss Awareness Month, Selective Mutism Awareness Month, and Red Ribbon Week (Drug Free America). With all of this awareness, we might expect that we have progressed to being a society/community that has struggled with and conquered the stigma of mental illness. So why have we not?

Unfortunately there are still many people who feel that mental illness is a sign of weakness and that if you just tried harder and stopped complaining all the time, your life would get better. Not only do we say that to ourselves but we say that to each other. Parents say that to their children, spouses say that to each other, friends say that to friends. It leaves us feeling that we need to hide how badly we are feeling, we shouldn’t ask for help, should be able to fix things on our own by adjusting our attitudes, and that we are weak and pathetic. As a result, we feel worse and worse and then are at risk for something dangerous happening, as was the case for Robin Williams. Suicide is the 3rd leading cause of death for people aged 10-24 and the 2nd leading cause of death for people aged 15-24. An episode of major depression can be a life-threatening illness that can be effectively and often quickly treated with a combination of both therapy and medication. But the only way that individuals can recover from this illness is to admit to themselves and others that they have it and to allow themselves the treatment they deserve.

Dr. Joy Von Steiger
Sr. Assoc. Director/Clinical Director, Brandeis Psychological Counseling Center
“Why Mental Health Disorders Emerge in Your Early 20s”

by Hanson O’Haver

From the 4/29/15 column ‘The VICE Guide to Mental Health’
http://www.vice.com/read/why-mental-health-disorders-emerge-in-your-early-20s

There’s a reason the image of the floundering, scared, shaky post-teen struggling to enter adulthood is a cliché. Between moving out of your parent’s home, going to college and getting a job, lack of sleep, drugs, and unrestricted access to alcohol, becoming an adult is fucking hard. So it’s no wonder that this period is popularly associated with having a mental breakdown. But is there any truth behind the pop culture trope? What about kids from wealthy families who don’t have the stresses the rest of us do in early adulthood, or people whose most trying times come in their 30s or 40s? Is the appearance of mental illness in young people a matter of environment or biology?

To better understand these questions, I phoned Johanna Jarcho, Ph.D., a postdoctoral fellow at the National Institute of Mental Health whose work studies differences in brain development in healthy people versus those who have mental health problems, with a focus on anxiety. She explained how our brains interact with social conditions to influence our mental health, and why the best way to deal with a problem is to get it diagnosed early.

VICE: I’ve often heard it repeated that mental illnesses frequently begin in a person’s late adolescence or early 20s. Anecdotally that seems consistent with what I’ve seen, but is there any scientific basis to this claim?

Dr. Johanna Jarcho: Yeah, the vast majority of mental health disorders do emerge during one’s adolescence or early 20s. If you’re going to have an anxiety disorder as an adult, there’s a 90% chance that you’ll have had it as an adolescent. Basically, you’re not going to develop an anxiety disorder as an adult. You’re going to develop it as a kid and then it’ll carry through to adulthood. Emerging research suggests that this is because adolescence is a time when the brain is changing to a great degree. We once thought that the brain didn’t change that much after earlier childhood, but what we’ve seen is that the brain continues to undergo really profound changes up until your early 20s. It’s still quite malleable, so being exposed to different influences in your social environment can really have a profound impact on the way that your brain continues to develop.

You said that much has to do with brain development. At the same time, young adulthood seems to be a time where people are going through major upheavals, both socially and economically—things like college, entering the workforce, or living away from your parents. Is there a way to quantify the effect of environment versus biology?

Some types of mental health disorders are much more genetically based than others. Schizophrenia and bipolar disorder have a much higher rate of inheritance. If you have a first degree relative like a parent or sibling who has one of those disorders, you’re at a much greater risk for developing it yourself, and there are things in the environment that can potentiate that. For other disorders like depression or anxiety, it’s less heritable. Whether or not you develop one of those disorders is a lot more contingent on your environment. Young adults go through all these different social changes, but we evolved to be able to make this big transition from being with parents to forging adulthood. What happens during this transition can definitely have a profound effect on whether you grow to be “healthy” or to have these types of disorders. We’re still finding out more about how much of this is biologically based and how much is environmental. We’ve learned from genetics that it’s not just the genes and it’s not just the environment, it’s an interaction between the two.
So a mental illness is not just an inevitable thing that people either will or won't have?

No. A lot of us tend to focus on the negative, but it's really important to focus on the fact that there's a lot that can be done to protect against developing mental health disorders, even if you are at risk. The social environment could tip you over into becoming sick, but in a good social environment you can actually thrive.

What kind of things should people be aware of?

It's important to know what you're at risk for. Let's say you had a parent with psychopathology; that certainly is a risk factor. If you've had a difficult time engaging in your social world as a kid, that's another risk factor. If your parents sheltered you instead of giving you some exposure to difficult things and showing you how to cope, that's another risk factor. The type of parenting that you had as a child can really affect the way you cope with the new challenges as you launch into adulthood.

Let's say a person is starting to experience symptoms of a mental health disorder. What can they do to mitigate harm?

The most important thing that you can do to mitigate the effects that any kind of psychopathology might have is to get treatment earlier and when you're younger. It's like how habits are formed: they get strengthened over time and once they're established they become biological, in a way. It's much more difficult to break them and they stick around for a long time. If you think there's something that may be wrong, you should try to get help before things become a crisis, before you feel like it's having profound effects on your life.

Health care is so expensive and opaque that I think a lot people have a feeling that, "Maybe I'm depressed, maybe I have anxiety, but I'm probably fine." They don't want to potentially spend thousands of dollars seeing a doctor, so they wait until it's absolutely necessary.

If you wait on getting treatment, your symptoms can become much more intractable. You save money in the short term, but your long term spending is much higher. We do preventative care for physical illness, but as a society we aren't quite there with mental health.

What do you make of self-diagnosis forums, WebMD, and other online health tools?

I think that because health care has not been readily available in the past, and because there is still a stigma against going to see a mental health professional, people have relied on the internet to understand what's going on with them. That can be a good first step, and certainly it can underscore the fact that you're not alone in the types of symptoms that you're having. But that doesn't necessarily get you to treatment. It's important to be able to go to a professional and say, "I think I need help with this." Certainly the more resources the better, especially for people who haven't had a lot of exposure to receiving mental health care. It can be scary. The internet can be useful but it doesn't get you a diagnosis and it doesn't necessarily get you treatment. But more information is always better.

Is misinformation a problem?

Well, let's say someone diagnoses themselves with depression. For one person, giving themselves a label in that way may be harmful, but for another person it might be helpful. In terms of misinformation, everyone is different, so getting treatment that's specific to your situation is really important.

There are certain things that get put out online about, say, computerized health services or video games (continued on page 3)
that make you have less anxiety and people are hopeful about that, but it’s not there yet. I think that there is this false hope that there is an easy, inexpensive, low side-effect cure for certain things and the data just hasn’t supported that. It’s something to caution people about. There are sort of wacky strategies people are promoting on the internet that don’t really have that much scientific backing. I think it’s better to seek professional care than to try some of these things.

You’re saying there’s not going to be a quick and easy mental health equivalent of penicillin that makes everyone healthy?

That would be lovely, but it’s just not happening. There hasn’t been a new medication that really helps with mental health disorders in a really long time, which is disappointing.

With mental health and with health in general, what we “know” seems to always be changing. To pick an obvious example, I’m constantly seeing articles about new studies saying red wine is bad for you, and others saying it’s good. For someone who’s not too knowledgeable it can become very confusing. How much of what we think we know now will be different in a few years?

I think we all thought that by now we’d know more than we do. I go back to this example of genetics: When the human genome was decoded we thought, oh, now we’ll know everything. We’ll be able to fix stuff and it’ll all become clear. By having a greater understanding of what’s behind mental health disorders, we’re learning that it’s just really complicated.

One thing that happens a lot is that the lay press puts things in very simplistic terms that give people a false hope. They’ll say, “Here’s this spot on the brain where depression lives,” as if we could fix this one spot and then everything would be OK. It’s really so much more complicated than that. At this point we’re just starting to know what we don’t know. It’s a little terrifying. It’s a totally changing field. I really do hope that in 10 or 15 years we’re in a place where we can better identify symptoms earlier. It’s still pretty early in terms of neuroscience.

Is there anything else you think that the average young adult should know about mental health?

They should know that most of the mental health disorders that people have in their 20s do dissipate. That can give you hope. But they should also know that if you’re one of the people for whom it’s not going to dissipate, it’s much better to get help sooner rather than later. Don’t think of seeing a mental health professional as something stigmatizing that you only do in a moment of acute crisis. Think of it as a general wellness thing, like going for an annual checkup. Talk about problems early instead of letting things build up.
Am I sad or depressed?
Jonathan Moran, MD/MBA,
M Pia Rogines Velo, MD, PhD
Staff Psychiatrists

It is common to experience the first symptoms of depression during college years. In fact, 30% of college students reported feeling “so depressed that it was difficult to function.”

Depression is a common but serious mental illness that typically presents with feelings of sadness or anxiety. Most college students occasionally feel sad or anxious, but these emotions usually pass quickly, within a couple of days. Untreated depression lasts for a few weeks, impacts the day-to-day activities and is much more than just being “a little down” or “feeling blue.” Depression can affect your academic performance in college as well as your social interactions. Depression is also a major risk factor for suicide. Suicide is the third leading cause of death for teens and young adults ages 15 to 24.

When depression is caught early, symptoms can be relieved more quickly; it prevents depression from coming back and helps students succeed in college and after graduation.

The symptoms of depression vary. If you are depressed, you may feel: sad, anxious, empty, hopeless, guilty, worthless, helpless, irritable or restless. You may also experience loss of interest in activities you used to enjoy, lack of energy, problems concentrating and remembering information, or making simple decisions, problems falling asleep, staying asleep, or sleeping too much, loss of appetite or eating too much, thoughts of suicide or suicide attempts, aches, pains, headaches, cramps, or digestive problems that do not go away.

If you have depression, you may feel exhausted, helpless, and hopeless. But it is important to realize that these feelings are part of the illness. Treatment can help you feel better. To help yourself feel better, try to see a professional as soon as possible. Research shows that getting treatment sooner rather than later can relieve symptoms more quickly and reduce the length of time treatment is needed. Break up large tasks into small ones, and do what you can as you can. Try not to do too many things at once. Spend time with other people and talk to a friend or relative about your feelings. Do not make important decisions until you feel better. Discuss decisions with others whom you trust and who know you well.

Meet the Staff

What is your full name and how do you ask people to refer to you?

Amy Engel, LICSW; Amy

What is the most important thing you would like people to know about how you approach your work?

AE: I approach all of my clients with an open mind. I prioritize establishing a trusting relationship. From there we work collaboratively to understand behavior patterns and symptoms as well as cultural and familial origins of distress.

How would you describe your approach? (style, theoretic orientation, etc.)

AE: My style is primarily relational and psychodynamic. That is, I believe that respectful rapport between client and therapist is of utmost importance. I was trained psychodynamically - -to help people to see connections between current struggles and the influence of formative experiences and relationships. I do my best to support students through their efforts to make healthy choices at the same time as they may be processing and/or grieving circumstances from their past and present.

Is there anything you would like to share about your background (training, experiences, non-professional aspects of life)?

AE: I have worked in three different college counseling centers throughout my career. In addition to my experience I have many years of post graduate training in topics such as trauma, grief and loss and treating individuals who have family or friends struggling with addiction.

What sorts of things do you practice in your life to maintain wellness?

AE: Breathe. Evaluate the cause and effects of my actions and decisions. Staying connected to family and friends, laugh a lot, strength training and yoga. Enjoy the pleasures of eating and walking.

What is your full name and how do you ask people to refer to you?

AL: Aileen Lee, Psy.D. (Students can refer to me as Aileen)

What is the most important thing you would like people to know about how you approach your work?

AL: My work is centered around mindfulness, understanding the self and struggles, and finding ways to tolerate things that are difficult to tolerate. Mindfulness to be present with the moment & psychodynamic theories to better understand the self.

How would you describe your approach? (style, theoretic orientation, etc.)

AL: "I was trained in many different styles of therapy in graduate school; however, what felt true to me was different ways to understand the self and struggles, and learning to be mindful of life's experiences. Also, the importance of self in relation to others - -interpersonal relationships.

Is there anything you would like to share about your background (training, experiences, non-professional aspects of life)?

AL: I was an international student from Malaysia, I am Chinese and speak Mandarin and Cantonese. I have grown into an identity that embraces values from both the Eastern (Chinese) and Western (American) cultures.

What sorts of things do you practice in your life to maintain wellness?

AL: I love getting outside and being active through playing soccer, hiking, and exploring new places with friends. I also prioritize getting enough sleep and eating tasty meals and try to listen to music every day.

What is your full name and how do you ask people to refer to you?

LB: Liz Barcewicz, Psy.D. Liz

What is the most important thing you would like people to know about how you approach your work?

LB: As a psychologist, the most important aspect to my work is creating an open, safe space for students to feel comfortable talking about their thoughts, feelings, and experiences.

How would you describe your approach? (style, theoretic orientation, etc.)

LB: My approach to therapy is primarily relational and strengths focused. I utilize aspects of CBT and DBT to help students view situations from a different perspective and develop skills for managing symptoms.

Is there anything you would like to share about your background (training, experiences, non-professional aspects of life)?

LB: I completed my post-doctoral fellowship at Cambridge Eating Disorder Center in their partial hospitalization program and also worked for 4 years in community mental health settings with a focus on trauma.

What sorts of things do you practice in your life to maintain wellness?

LB: I love getting outside and being active through playing soccer, hiking, and exploring new places with friends. I also prioritize getting enough sleep and eating tasty meals and try to listen to music every day.
“The Underrated, Essential Art of Coping”

BY LEO BABAUTA

You might think that when someone says, “I’m coping,” that it’s not such a big deal. You’d be wrong.

The skill of coping is highly underrated, and our inability to cope with difficult feelings can lead to major problems, including health problems, financial ruin, work procrastination, even death. Not such an insignificant skill!

How can the lack of coping skills lead to death and other major problems? Well, let’s say that you’re bored and lonely, but don’t know how to cope with those feelings in a healthy way. You might try to avoid these problems with distraction, food, TV, smoking, drinking. I know, because I’ve done those things myself, many times. These aren’t such a big deal once in awhile, but frequent use of these coping mechanisms will lead to eating way too much, smoking or drinking too much, inactivity (from watching too much TV or being online too much) ... and these all can lead to long-term obesity and related health problems, even death from an obesity-related disease like diabetes or heart disease.

What would be another way to cope? If you’re bored, you might cope by learning something new, or tackling a new challenge. If you’re lonely, you might try to exercise, write, teach yourself a new skill, or meet new people. These are just a few examples, but you can see that these are much healthier ways of coping.

So how you cope can be the difference between a good life, and a sick one. We all have unhealthy coping mechanisms, and finding better ways of coping will help us procrastinate less, eat more healthily, exercise, and be happier.

Self-compassion as a way of coping

When you find yourself facing difficult feelings, your first reaction might be to avoid thinking about the feelings.

Let’s say someone close to you has gotten sick or died — you might not want to face the pain, so you cope with it by avoiding the pain, finding ways to numb the pain or distract yourself. This is running from the problem.

If you notice yourself doing this, it’s a good time to pause. Just say to yourself, “I’m avoiding.”

Now instead of avoiding, you have the choice to gently turn toward the pain, and say, “I’m hurting.” Or “I’m angry.” This is an acknowledgement of whatever you’re going through. And it’s OK to feel these things.

Next, you can deal kindly with the pain, with the boredom or guilt or grief or anger or loneliness. These are all very difficult, and it’s OK to feel them, and it’s OK to comfort yourself with kindness, compassion, love. Wish for an end to your pain, and wish for your own happiness.
Curiosity & openness

You’ve given yourself some compassion, but what to do about these difficult feelings? I suggest curiosity.

Stay with the feeling(s) you’re having, and be curious about what it’s like. For example, if you’re feeling overwhelmed with a project, instead of avoiding the project and seeking distraction (procrastinating) ... try staying with this feeling of being overwhelmed. It’s not a fun feeling, and you’ll want to run. But be curious — what’s it like to just feel overwhelmed without running?

Face the feeling with an attitude of openness. Be open to uncomfortable feelings, and as always, you’ll find that it’s not comfortable but you’ll be OK. You develop a trust that everything will turn out fine. It’s not pleasant, but it’s fine.

Curiosity means that we don’t instantly decide we know this is a horrible experience and try to run away ... it means we decide we don’t really know what this will be like, and we’d like to find out more. It’s a learning stance, instead of one that assumes we know what things will be like.

It’s an approach of exploring new territory, and finding out what this new experience has in store for us.

The benefits of coping

This isn’t an easy practice, I’ll admit. But it’s worthwhile, because with this kind of healthy coping, you can find better ways of dealing with all kinds of things, including:

- Procrastination — instead of running from scary and overwhelming tasks, we can see what it’s like to feel afraid and overwhelmed, and still take action on these tasks. Writing a book, for example, is scary and overwhelming, but we can still write even with these feelings flowing through us.

- Anger and frustration — instead of wanting to lash out at people (or avoid them) when we’re frustrated with them, we can stay with these feelings and just be curious what it’s like to feel them. And then, when we’ve stayed with these feelings (and given ourselves some compassion), we can see what it’s like to deal compassionately with someone who we’re frustrated with. To try to understand them instead of judging them.

- Unhealthy cravings for food, drink, smoking — we turn to these things for comfort when we’re feeling stressed, bored, lonely, sad ... but we can stay with these feelings and be curious about them, and learn to do other, healthier actions instead, like taking a walk, doing yoga, meditating, talking with people, creating, learning, practicing a skill, and so on. These are healthier ways of coping, but we often avoid them because we don’t like to feel these feelings and want to stuff the hole in our hearts with comfort food, drugs, etc.

- Death and illness — when someone we love becomes sick or dies, the grief and sense of loss can be overwhelming and devastating. We want to comfort ourselves, and so we often turn to unhealthy ways of comforting. But instead, we can give ourselves compassion, stay with the powerfully difficult feelings, and be curious what it’s like to stay with these feelings. Really get to know these feelings, become intimate with them, and trust that we’ll be OK even if we give in to feeling them. We can deal, we can feel, we can get through this, because while it’s far from comfortable or pleasant, it’s doable. And temporary.

That’s just the start — as you learn to cope with self-compassion, staying, and curiosity, you will find that you can deal with anything life throws your way. And come out smiling.