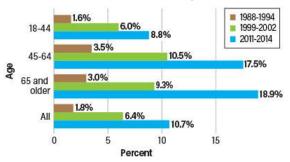


Mental Illness? / Disorder? / Maybe What You Have is Just BAD

How have we come to a place where <u>one in six Americans is taking some kind of psychiatric drug</u>? And how has the overall use of drugs like antidepressants gone up by a **factor of SIX** in just 20 years (see chart below)? Are we to believe that our collective mental health has degraded sufficiently and our psychiatric drugs have improved sufficiently to explain these striking increases in less than a generation? A more logical explanation would be to look at those who sell and prescribe these medications.

Percentage of Americans Who Took at Least One Antidepressant in the Past 30 Days



Source: NCHS, National Health and Nutrition Examination Survey

<u>Percentage of Americans Taking Antidepressants Climbs</u>

What we know for certain is that over this same time period the healthcare industry has consolidated to increase profits and efficiency. Having patients dependent upon prescription medications certainly facilitates efficiency and profits, but people are not widgets and these drugs are not curative. They do, however, keep patients coming back because when the drugs are stopped, any relief they provide stops as well and the subsequent withdrawal symptoms can be painful.

A recent <u>New York Times article</u> states, "Some 15.5 million Americans have been taking [antidepressant] medications for at least five years. The rate has ... more than tripled since 2000 ... Many who try to quit say they cannot because of withdrawal symptoms they were never warned about." This is for drugs that "... initially were approved for short term use, following studies typically lasting about two months." We can see how this would work well for healthcare industry profits, but not so well for their clients.

Martin Seligman, best-selling author and former President of the American Psychological Association states in his book, Flourish: A Visionary New Understanding of Happiness and Well-being, "The first dirty little secret of biological psychiatry [e.g., prescription drugs] and of clinical psychology [e.g., therapy] is that they both have given up the notion of cure." He further states that even in addressing only symptoms, "Almost always, the effects are what is technically called 'small.' ... Taking an average over the entire huge literature, for each you get a 65% relief rate, accompanied by a placebo effect that ranges from 45 percent to 55 percent." For example, "... in half the studies on which the U.S. Food and Drug Administration based its official approval of antidepressant drugs, there was no difference between placebo and drug." In summary, we routinely give patients with emotional pain a life sentence to psychiatric drugs that were only approved for short-term use and are only minimally effective.

The situation looks even worse when we consider that science tells us that human feelings of depression and anxiety, which are being treated as a "mental illness" or "disorder," are a normal, adaptive response to our environment and experiences. An adaptation is a physical or mental ability, feeling, or behavior pattern that humans developed during our evolution to enhance our chances of survival (i.e. to better adapt to our environment). These emotional pains are adaptive because they send a signal to you and others that certain aspects of your environment or experiences are harmful, and your survival and wellbeing are being threatened in some way. The emotional pain we feel provides an incentive to change things for the better, just like with physical pain.

What we treat as a worsening mental health problem is actually a worsening social problem, where people feel increasingly insecure, alone, and powerless. When we medicate away the pain that tells us we have this problem, we create the real mental "disorder" by removing the natural incentive to solve the problem, which leads to greater hopelessness. So at the same time that use of psychiatric drugs has skyrocketed, the suicide rate has increased by twenty-five percent and the rate of drug overdose deaths has increased by more than three times. This is a predictable outcome of a system focused on relieving symptoms and increasing profits, while ignoring the underlying problems. If an orthopedic doctor offered only pain medication and a rented wheel chair for a broken leg, instead of acting to heal the break and restore normal use of the leg, that doctor would soon be out of business. But for mental health, this type of approach is the norm.

We need a different approach that is focused on healing the underlying cause of emotional pain, and for that, we need to better understand the problem. The word "BAD" as used in the title is an abbreviation for Brain Adaptation for Danger, Disconnection, and Disempowerment. When our environment or experiences tell us, we are not safe (danger), not supported by others (disconnected), and/or not able to get what we need (disempowered), we feel emotional pain, such as fear, anxiety, anger, and depression. These feelings are a normal, adaptive response of our brain (i.e. BAD), not an illness or disorder. They prompt us to change our environment and/or experiences to reduce harm and restore our sense of well-being.

Though prescription medications may provide useful short-term relief, the cure for our emotional pain requires change. If our pain is a symptom of a harmful environment and experiences, then the cure is a better environment and experiences. We all know this intuitively. If everything were good, we'd have no pain. But making changes to our environment and experiences can be difficult when important aspects are not within our control. So, we need supportive relationships and increased understanding about things we can control, along with healing skills and self-care practices to enable the needed changes.

We know that such healing change is possible because of our experience offering <u>Healing Workshops</u> for those struggling with emotional pain. Here are two examples:

- Early in one workshop a client stated, "I've seen a thousand therapists and they all told me what was wrong with me. But none of them told me what I could do to get better." After the healing workshop the same client wrote, "Thank you for assisting me on my journey to wellness. I have felt a significant change in my life towards positivity which would have been difficult to near impossible without you two by my side."
- Another workshop client said she never saw a therapist to avoid getting, "a scary, stigmatized label that I never wanted to hear about myself." After the workshop this same client wrote, "I didn't know how to talk about my painful experiences, and I didn't want to. In this workshop, I didn't have to. I quietly learned what I needed to heal by listening to the experiences of others in my small, yet very supportive group, and through the development of my own healing practice."

If you've struggled with depression, anxiety or other emotional pain and you're interested in exploring the possibility of healing, please visit our website, <u>Katlyn's Healing Center</u>, where we offer free healing resources and an online Healing Support Program to assist those affected by trauma or other difficult life experiences. You may want to start with our presentation on this subject titled, "Maybe What You Have is Just 'BAD'."

Human nature is extremely intelligent, having evolved over millions of years. Painful emotions are a natural and adaptive response to a harmful environment, so labeling them as an illness or disorder is not helpful. Instead we should move in the direction that our human nature leads us, toward correcting the conditions that cause our pain. The root cause of our emotional pain is experiential, and not surprisingly, so is the cure. Once you have experienced healing for yourself and witnessed that of others, there can be no doubt about these truths.

The good news is that healing is also natural when the right conditions are present, just like a plant will flourish when threatening environmental conditions are removed and sufficient light, water, and nutrients are present. But to address the root cause of human suffering and promote the healing that is needed, we all have work to do, individually and collectively. Healing is personal, and these healing changes can only happen one person at a time.

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