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Honors Capstone Final Paper

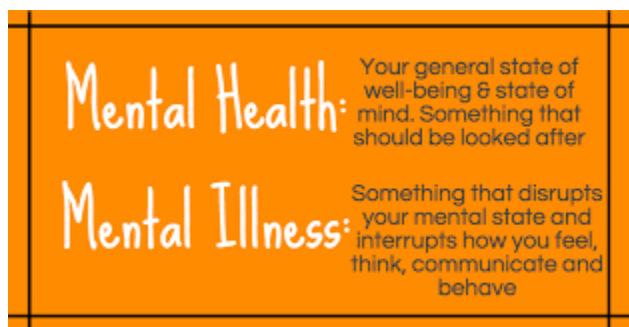
The Silent Killer

Have you heard of it? There is a silent killer. Yes, you heard it right there is a silent killer out there, and it is one that lives in your own brain. Did you know that one in four teenagers over the age of 18 suffer from a diagnosable mental illness? Did you know that suicide has become one of the leading cause of death from ages 15-24? Mental Illness has plagued our adolescents, society and has dismantled Generation Z. Children, teenagers, and young adults in this generation have been directly immersed in a society where there is no sense of reality. During prime developmental years, it can be said there is still much to learn, experience and discover, yet most teens have been trapped behind their phones, clinging to a want of acceptance, and even experiencing their first global pandemic, knowing what social isolation truly feels like. It can be said that for these reasons, mental health had been put on the back-burner for years. Although physical health is of value, without mental health there is no physical health. Over the past decade, although there have been improvements, mental health is not considered, valued or treated correctly based on individuals needs due to the stigma that surrounds it, the cost it takes to treat it, the lack of education to advocate and the everlasting effects of the pandemic.

What is Mental Health?

What does it mean to have good mental health? What is the meaning behind mental illness? The thing about mental health and illness is that there is not one correct definition to define them. It has a myriad of different meanings and interpretations dependent on the groups of people identified. It can be said that the definition to a millennial, Gen Z, is different than a Gen

X or Boomer, or it can be different to someone who has experienced a mental illness versus has not, or someone whose employer practices mindfulness and prioritizes mental health and wellness, where as another employer doesn't. I guess you can say it is almost a relative concept with someone who chooses or does not choose to believe in it. Mental health has always been



around; it was just classified as a psychiatric disorder or that you are chronically ill and need to be put away in accordance with the DSM. The DSM is the Diagnostic and Statistical Manual of Mental Disorders. It is

used as a handbook used by healthcare professionals in the United States and much of the world as the authoritative guide to the diagnosis of mental disorders (Psych Central, 2022). The DSM was written a long time ago and is often used in psychology classes as a reference for definition. These definitions however have evolved since they have been written, there are more interconnections and innovations of science that revolve around the studies of mental illness and mental health. In reality, mental illness with specifics to anxiety, depression, and bi-polar disorder are at an all time high. It is at its peak at its most prime position most courtesy of the pandemic. The best way to define mental health is, "A state of mind characterized by emotional well-being, good behavioral adjustment, relative freedom from anxiety and disabling symptoms, and a capacity to establish constructive relationships and cope with the ordinary demands and stresses of life. (American Psychology Association, 2013). So although this sets forth a good example as to how to define mental health, it also leaves room for personal interpretation. Every person who experiences a form of positive or negative mental health can define it differently each time based on personal conviction.

The difference between mental health and illness is that mental health is a state or condition of one's emotional health (APA Dictionary, 2022). Mental illness is a disease that impacts one's emotional health and capacity to perform cognitive or daily routine tasks. It is not something that humans can control, only something people can manage. According to the American Psychology Association, mental health disorders or mental illnesses can best be described as, “any condition characterized by cognitive and emotional disturbances, abnormal behaviors, impaired functioning, or any combination of these. Such disorders cannot be accounted for solely by environmental circumstances and may involve physiological, genetic, chemical, social, and other factors” (American Psychology Association, 2013).

In my own experience, defining my own version of what good mental health was troublesome for me. I am a student, daughter, friend, cousin, sister, female, who struggles with depression and anxiety. Living with these two things is real, and it affects me daily as it does with others who struggle from the same illness. It can affect moods, desire to do things once enjoyed, question social life, isolation from those who care about you, and most importantly, is a very lonely state to be in. It is sometimes not knowing how to recognize yourself separate from the mental illness. Mental health and wellness was not defined for me when I was 13 when I first started to experience its “symptoms”, however when I was 18 and was stuck at home with my

thoughts, it became highlighted in my life due to the COVID-19 pandemic.

Losing human interaction and being in complete isolation for 6 months took an emotional toll on me. Although I had trouble defining mental health, I



also found it to be a problem in seeking a resolution for it in itself. I call it a problem because finding resolutions to solving a mental health disorder will almost take you forever to figure out. It is more of managing it than it is of solving it. Going to school away from home was also a large adjustment in itself, making friends during the pandemic was even harder. Finding my place in a new environment seemed to not only be challenging for me, but a lot of my peers as well. I sought comfort in knowing that at those times I was never truly alone. In my second collegiate year I sought help from Sacred Heart's Counseling Center. It was a normalized experience, and an experience that granted me the opportunity to speak upon my own struggles. My experience was positive, whereas years before it would have been something I would fear doing. From my personal experience I find it safe to say that to anyone who is struggling in their battle with a mental health disorder it is a process that will continue to be ongoing. I can safely say that three years ago I would not have been in this position to advocate for myself and use the resources my University had for me. The Mental Health initiative has been extending across the United States where universities are normalizing the effects of the pressures of education, new environments and just the affects of adversity that students face. That being said a lot of these universities are offering free, readily accessible screenings for their students (Greater Good Magazine, 2019). An example found through Drexel University, is that they are offering students an opportunity to "get a checkup from the neck up" (Greater Good Magazine, 2019). Students can stop off and answer questions on a screen and at the end of the screening they receive information in regards to their answers, along with resources and support (Greater Good Magazine, 2019). Opportunities for students to be transparent and have a process of receiving help or resources in an easy and accessible way makes all the difference in a students wellbeing. It additionally allows for a deeper level of comfort in asking for these resources of feeling okay

to advocating for themselves and getting help. I hope other universities continue to advocate for their students who do struggle with mental health disorders in hopes to not end, but minimize the amount of people suffering along with the amount of people affected by it.

Sacred Heart University is moving towards the “mental health initiative” where students are able to assess the counseling center free of charge. This outlet can become a saving grace for students who are struggling as well as just needing someone to talk to. The problem with

accessing these resources is that there is not enough staffing to help everyone. This shows the relevancy of the issues of mental health disorders existent at the university



level. When applying to see a counselor you will do a mental health survey and rank the feelings they present to you 1-5, 1 being Completely Disagree, 5 being Completely Agreed. The problem at hand is if one student has a higher rank on the survey than another they are bumped up on the counseling waiting list and are able to receive resources faster than the other student.

Unfortunately, for many students at SHU, there are such a large number of students who want to receive help, but because of the limited amount of counseling staff, not all students are considered. It is important to realize that this is by no means necessarily the university’s fault but rather the staff that is in charge of funding and who does not value the funding of the mental health/ counseling center to help their students, who are in large numbers, receive the resources they need. It is also imperative that every university continues the movement on having free counseling on their campuses. It is so hard to find affordable mental healthcare or therapy services that students can access, and oftentimes students do not even have a way of getting to

said mental health services. As a student who used the counseling center it most definitely, changed my life, and benefited me in a great number of ways. I can say that I was lucky enough to meet with a counselor however others were not granted the same opportunities.

COVID-19's affect on mental health:

In lieu of the most recent pandemic named as COVID-19, it has created a very huge wide span of mental health crises, highlighting current issues people experienced and new ones that



have been introduced due to social isolation. Due to the COVID-19 pandemic it can be said that the entire world was affected by it. Even today, although the world is trying to move forward attempting to make COVID a thing of the past, it is tough to say that COVID can be

forgotten. Not only have many people lost loved ones to its repercussions through illness, there are ever lasting effects on individuals, one of which is not necessarily physical but rather hidden. A survey was conducted and it was said that of the 214 people, 193 identified that they had a mental illness “post-COVID” (Pavlo, A., Reis G., et.al., 2020). Social distancing measures, the impact of quarantine, unemployment and people with mental illness are more vulnerable not only to COVID infection but also to its behavioral health consequences (Pavlo, A., Reis G., et.al., 2020). People with current mental illnesses were mitigated by this impact and were recognized by exacerbating an existing mental illness and by articulating plans that accommodate such people’s needs. During the pandemic many clients of outpatient clinics had no access to mental healthcare due to the social isolation restrictions regulated by the CDC. Fears of running out of medication, lack of clinical care, and overall

lower chances of adaptive healthcare therapies is what allows for this to be considered a major deficiency to this community (Pavlo, A., Reis G., et.al., 2020) . Thus, in turn, many patients went unseen, and continued to progress with their mental illness with struggles on how to cope with it. Furthermore, even new patients post COVID who developed anxiety, depression, borderline personality disorder, bipolar disorder were all exposed to a new normal that was yet to be talked about nor explained as to how to deal with. The COVID-19 pandemic left an everlasting effect on everyone, but it especially affected those who suffer from a pre-existing mental illness and those who developed one (Pavlo, A., Reis G., et.al., 2020). The impact of COVID-19 pandemic includes the consequences of impacted mental health.

Insurance and Mental Health

Mental health has not been valued due to its assumption that physical health is more important. It took a global pandemic to finally cause adjustments to the world as we know it. Insurance companies still, however, do not cover a majority of the expenses of medications, in or outpatient therapies, and providing resources for those who need it. Mental health care facilities cost insurmountable amounts of money as well as loads of commitment to getting better. It can be said that these costly issues were brought to light moreso, when COVID-19 hit, partly ending the stigma against mental illness and promoting resources in getting help. Although there is more openness and transparency in coming forward with a mental health crisis, there is still a large cost that comes with trying to take care of one's mental health. Most insurance companies cover less for mental conditions rather than physical. Private insurances



specifically, cover mental health care costs for 28% of total expenditures while for general medical needs it accounts for 40% of health care expenditures (Frank R.G., McGuire T.G, 1986). Additionally, 58% of insured people pay 50% of their copayment rate for visits to an outpatient mental health care provider (Frank R.G., McGuire T.G, 1986). According to an article, this is because there is a higher demand for mental health care and insurances are in higher responsive need. Better coverage would increase demand, increasing expenditures through use of the services available. This could happen based on learning benefits, breakdown of stigma or pattern of treatment (Frank R.G., McGuire T.G, 1986).

Based on the requirements set forth in the Affordable Care Act any qualified insurance plan purchased through the ACA covers mental health costs (eHealth, 2022). Without the ACA, there are no health insurance plans that cover mental health services (eHealth, 2022). Those with pre-existing conditions had trouble finding mental health insurance coverage at an affordable rate or were denied coverage in totality (eHealth, 2022). The only insurance companies that are moving towards a more regulated form of attempts at having some form of mental health insurance coverage are Medicaid, and Medicare, Cigna and Aetna. The problem with this is that with Medicare and Medicaid they only apply to specific groups of people. For Medicare, it applies to those who are over the age of 65, and statistically there are greater percentages of people who suffer from mental health disorders at a much younger age. For Medicaid, it helps a portion of people who suffer who also suffer from limited resources and lower incomes, which again is a percentage of the whole. Although both these plans are beneficial and are helping people, it does go noticed that there are these federal insurances funding some mental health care costs but only two private insurances that are truly trying to move towards making mental health care more affordable and accessible (eHealth, 2022). So far those are the only four, two of which

are private insurance companies that have begun to make a movement towards integrating more health insurance module reform for mental health disorders (APA, 2019). The federal government has laws and regulations installed called parity laws. Parity laws require “insurance companies to treat mental and behavioral health and substance use disorder coverage equal to (or better than) medical/surgical coverage” (APA, 2019). Although these laws sound perfect and beneficial towards the ability of their being covered towards mental health conditions, state laws say that if mental health benefits are offered, and they can not be more restrictive than physical health benefits, a health plan is allowed to exclude certain diagnoses to be covered (APA, 2019).

Although this is not the best case scenario, there have been other improvements made for the mental health world that is free of cost and is available to anyone who chooses to use it. The 988 suicide hotline has stirred away from the high costs of mental health resources and is free. This hotline runs 24/7 and has trained professionals on call to talk to any individual who calls with any thoughts of self-harm, suicide, or just simply to talk about the hardships of life. Statistically in 2020, 3.3 million people called the regular number before the 988 number, and now in 2022, 7.6 million individuals have used it (988 Appropriation report, 2021). This is a huge improvement in the mental health world, where there used to be a ten digit number needed to be memorized in order to receive help, or just have someone to talk to.

Stigma and Education:

The stigma that has surrounded mental illness and the value of mental health has changed significantly over time. In another sense, mental health was not considered a valid reason for someone to have a day off from work, need a break from school, have an extension for something or need a doctor's visit. On my annual physical with my pediatrician there was never a

mental health screening exam where you are asked a series of questions on how your mental health is up until 2016. Because of the increase in not only prevalence in mental health crises, but also because of the transparency increase, the education, value and stigma around mental illness has changed. Years ago before COVID-19, seeking help from a guidance counselor was considered excessive, unnecessary and that you were a “troubled” student. It is still a stigma needed to be broken at the secondary and high school level. There is a strong link between youth mental health and student mental health, given that a large number of students now attend university



level schooling. Students with mental health disorders are argued to have earlier on intervention models that apply to young adult mental health support (Brown & Hunt, et.al, 2018). There are opportunities for higher education educators to investigate the risks, problems, and preventative measures/factors for student’s mental

health and development at the university level (Papish & Kassam et.al, 2013).

In a study, medical students talked about the stigma surrounding mental health in their undergraduate programs to become psychiatrists. Attempts to combat the stigma through educational initiatives have had mixed signals in this study. Psychiatric education overall can decrease the stigma of mental illness and increase student confidence (Papish, A., Kassam, A., Modgill, G. et al, 2017). This goes to show that once people become familiar with a topic they become educated in it and understand it more. The same goes for understanding the importance

of mental health and having it be spoken about in an educational setting. The more it is advocated for in a public setting is education the better it will be in terms of continuing to improve the mental health care system and continuing to end the stigma behind it.

In the classroom, it is important to identify the proper verbiage to use when educating students and even so talking to students in regards to handling stress and the pressures of school and life, is imperative to the advancements and the ending of the stigma surrounding mental health disorders. For example, a phrase thrown around in the “I want to kill myself, I am so stressed”. This phrase is constantly thrown around to describe the negative feelings collegiate and high school students, and now even middle schoolers have. It is sad to say that these phrases as well as other phrases of self harm have been used to describe negative feelings and almost have become a conditional phrase that continue to be used to describe stress. Before mental health awareness started becoming a grander topic of conversation, these phrases have been carried and passed throughout the generation. Fitting in, being a part of a group, finding your place in this world is all what young adults seem to long for. Thus, when your friends start to throw around words like that, you can no longer tell if those were acts of asking for help, or describing a certain feeling of overwhelmingness in a joking matter. In terms of resolving this it is important to be informative in the classroom and have educators reinforcing this. Ways in which students are corrected on verbiage is by reinforcing ways to displace stress and overwhelming feelings. This could be done with journaling, talking to someone, forms of meditation, and also being self aware. With this, a lot of students in and out of the classroom struggle with understanding *how* to process their emotions and feelings and with some guidance for an educator or staff member they can use these tools, take them home and continue to reinforce them there.

The Brighter Sides

The continuation of insurance policies lacking insurance coverages for mental health care and recovery continues. Although this is an ongoing problem that intrudes the capabilities of major improvements in society, there have been other outlets of improvement made where social

in April 2017, our classmate Nick Spaid lost his battle with mental illness.

happiness project was started in efforts to help people just like Nick and break the stigma behind mental illness.

Nick had dreams of being an entrepreneur and we wanted to carry on his legacy through happiness project

media and the internet have provided resources that are free for the first time. Two examples are the Happiness Project and NAMI.

NAMI is the National Alliance on Mental Illness, and is a non-profit organization that goes to different schools (including my high school) to educate not only the students on mental illnesses and disorders but also the school's staff and teachers. It is also important to recognize that at this moment, the NAMI organization is the number one leading non-profit in the mental illness alliance since COVID-19 started in 2020 (NAMI). The un-denying truth of

mental health disorders are also outlined on these platforms. For example, 1 in 5 US adults experience mental illness each year along with 1 in 6 youth aged six-seven experience mental health disorder each year (Happiness Project). 50% of these mental health disorders start at the age of 14 and 75% by the age of 24 (Happiness Project). Suicide is the 2nd leading cause of death among people aged 10-14 (Happiness Project). With these statistics the non-profit NAMI provides a call center, educational resources, tools and strategies to get better and a website that provides other resources. Another organization is the Happiness Project which promotes affirming mental illnesses and disorders such as anxiety, depression, bpd, and bi-polar disorder. Friends



of Nick Spaid, who lost his battle to mental illness, created this foundation to continue his legacy and promote affirming mental health disorders. They also have an app providing resources, outlets and strategies as to how to deal with mental illness and that is it validated to having one. A lot of these resources would not have been around years ago, where people outwardly promote the awareness of mental health disorders including social media and internet platforms. Years ago, it would have been an extremely hushed concept that no one wanted to advertise or help because of the extremities that exist with assisting those who are mentally ill. This is a huge advancement in the realm of the mental health disorder world, and it allows people to believe there is a safe space online.

Ultimately, mental health has not been considered, valued or treated correctly based on an individual's needs due to the stigma that surrounds it, the cost it takes to treat it, the lack of education to advocate and the everlasting effects of the pandemic. The COVID-19 pandemic greatly affected those with pre-existing conditions, and even allowed for people to develop new conditions. With the pandemic came a lot of mental illness transparency and more of the stigma has been brought to light. It should not have taken a global pandemic for mental wellness and disorders to be a part of dinner table conversation. Overall, mental health is a huge component of our lives and is one of value, yet is treated as a principle rather than an issue. We all go through disappointments, changes, life disruptions, however we all internalize and handle those things differently. It is important to realize that although mental health disorders are not visible, they are there. You may not see it but it can be there, so be aware. There is a silent killer out there.

