Mental health
What’s gone wrong?
There’s a growing mental health crisis. Depression, prolonged levels of anxiety, self-harm, eating disorders (including anorexia, bulimia, and binge eating), alcohol abuse, drug abuse, and suicide have all increased. And these are just some of the more obvious examples. Low self-esteem, hopelessness, worthlessness, powerlessness, and self-hatred all reinforce the mistaken idea that you can’t change. It’s a huge problem for those individuals affected, directly or indirectly, but also for society. The focus is a negative one, of how to treat the sick, rather than on the need for better psychological health. The various authorities and other organisations are overwhelmed by requests for help, unable to keep up with demand. It’s a desperate situation.

It’s important to take a step backwards from solely looking at the mental health crisis, for the purpose of gaining - and placing it within - a wider perspective. The overall self-orientated psychology that everyone is conditioned into is inherently dysfunctional and problematic. It’s normalised and therefore accepted without any real questioning or serious challenge. (Despite numerous attempts to “spiritually” change, going back a few thousand years, the selfish psychology persists. There has been inadequate understanding or know-how of what is necessary to bring about authentic change, combined with varying degrees of “playing” at the goal of transcendence.) Today’s mental health crisis is therefore one type, grouping, or expression of excessive dysfunction within a much wider spectrum of dysfunctional behaviour. Other major forms of suffering - whether on an individual, societal, or global level - have the same root cause: selfishness. It’s absolutely important that this wider context is fully understood.

One consequence of appreciating the above is that there will be two distinct classifications of what is being diagnosed as “depression”. First, there are all those who are struggling to cope as a result of poor behavioural choices; this is known as learned helplessness. But there is a second group of individuals, often young people, who are being misdiagnosed as “depressed”, yet they are not suffering from learned helplessness. Instead, they are merely struggling to accept a sick and superficial society, when they might rightly expect a better world and future. (These two classifications are not mutually exclusive and there can be overlap.) Society is badly failing both groups of individuals, by the lack of appropriate role models and an overall immaturity. Whereas technology has advanced and functions well, psychology remains contradictory and hypocritical; humans are still a long way from realising their full potential. Some young people are smart enough to realise that “something’s wrong”. They’re sufficiently shrewd so as not to get pulled in by superficial “ways” to “improve” things - be it political, “spiritual”, or otherwise - but nevertheless still left feeling the need for a better direction.

Actually, it’s misleading to label this second classification of individuals as “depressed”. Would we retrospectively think that a German soldier working in a death camp for Jewish people during World War II, reluctant to join in with a party after hours, to be psychologically sick? No; such a response to an unacceptable situation would be appropriate. Mental health professionals urgently need to question their failure to properly understand what is happening here - a situation made worse by their own limited mentality. Some young people might be justifiably “depressed”, yet be less psychologically unhealthy than many so-called “experts”, requiring a very different course of action to “treatment”. They simply seek the means to improve the world around them, which is a noble pursuit.

Focusing on the first (and probably main) classification of those who suffer from depression, we need to examine what causes learned helplessness. Perhaps the most basic starting point is distorted perception or a failure to face reality. This results in a gap, leading to some disruption. Anxiety arises. So far, this is a description of what happens within normal - albeit self-orientated and dysfunctional - behaviour. But when there is excessive...
self-preoccupation, the problem will escalate and a poor situation quickly becomes a bad one. There’s the loss of “control”, and, when this doesn’t lessen, the next thing is to displace or grasp for a different solution. There are various options, although you usually pick the one you’ve seen being done by someone else: shutting off, self-harming, some kind of temporary escapism, or ending it all. When this is repeated (excluding actual suicide, of course), you get learned helplessness. And this set of habits becomes normalised, perhaps compulsive, and so hard to move on from because of dependency.

The present trend towards mental health problems is to accept that “it’s okay not to be okay”. Whereas this is understandable in one way, it’s dangerous in another. Increasing numbers of young people are choosing labels to define themselves as “not okay”. This conveniently absolves themselves of any blame or responsibility - and their parents and friends like this idea too, as it also lets them off the hook for any poor influence. The desperate situation is explained away as an “illness”, rather than lots of bad behavioural choices. And when it’s an “illness”, you can expect to be given drugs - which is a quicker and cheaper way of dealing with the problem compared to months or years of cognitive behavioural therapy. But “happy pills” do little more than giving the person who is depressed a “tin hat” to wear. He or she feels less, dulled down. The actual harsh reality is that it’s not okay to be just “okay”. If you choose a mediocre life, riddled with contradictions and hypocrisy, or just dumbed down, avoiding whatever you want to avoid, then you’re going to suffer. Life won’t be good, let alone fulfilling.

Mental health problems result from inadequate self-discipline, the lack of clear thinking skills, and poor processing of information. When combined with excessive avoidance, plus the absence of deep meaning and purpose, it’s a recipe for disaster. And it shouldn’t come as a surprise - any more than if you repeatedly fail to go to work, you’ll be sacked. Life has consequences - even in this modern “easy” world. Until this is clearly understood and widely acknowledged, the mass of excuses will continue and nothing will improve.

Children are being pressurised to grow up too fast. Peer pressure has always been a negative influence amongst the young, simply because adults and society are overall immature. Monkey do what monkey see. The media, social media, and celebrity culture don’t help. Questionable messages of what is important are absorbed by young minds. Expectations are unrealistic. There’s too much emphasis placed on keeping up appearances and outward beauty. As young people become adults, it doesn’t get any better. You’re expected to join in with the “supposed-to-be” life. Be a good sheep! The rat race will snare you in its trap. Materialism offers endless short-term distraction, at a price. And those Instagram photos with their clever filters are so alluring. Some picture-perfect location, such as a lavender field, will help you look wonderful when you pose for the camera.

The overdiagnosis of mental illness is worrying. The American Psychiatric Association makes a lot of money publishing and selling globally the Diagnostic and Statistical Manual of Mental Disorders (DSM). Its contents don’t all stand up to scientific scrutiny, yet this is the psychiatricist’s bible. Allen J Frances chaired the task force for the fourth revision, but has severely criticised the current DSM-5 edition. He has accused his fellow professionals of “diagnostic inflation” and “swallowing up normality”. He called for a re-think in a lecture on 11th May 2012; search YouTube for “Allen J Frances on the overdiagnosis of mental illness”. Although many share this view of overdiagnosis, the situation nevertheless continues to deteriorate. Antidepressants are dished out like sweets. And it’s getting hard to find young people who haven’t been labelled with this, that, or the other mental health illness tag - when the actual reality is they’re just suffering from the consequences of accumulated poor choices and lousy behaviour.
I have little time for religious belief. Some great insights into a higher way of being, likely gained through oneness experiences, have been lost within institutionalised dogma. It’s outdated and has been rightly dropped by many in our modern world. Religion is part of a worldwide failure to significantly change. But the dumping of religion has left an ethical vacuum. Before, it acted as a crutch - preventing a decline into the gutter. Rather than working out a more worthy replacement or way forward, the timely rise of materialism has filled this hole. Money, or what it can buy, has become the new god. Any new-found freedom has been wasted, accompanied with a hedonistic dash downwards to the lowest common denominator. There has rarely been any acknowledgement, let alone education, about the pitfalls of avoidance - other than Americans sometimes saying “Oh, gee, he’s in denial!” - and it’s now become unchecked with the departure of religious guilt hanging over the people’s heads. There’s a glorification that “shit happens”. Instead of learning a valuable lesson from Shaggy’s song It Wasn’t Me, many reach their creative heights when making yet another silly excuse. It’s all sad and bizarre enough to make a sane person rush off to the doctor, begging for a prescription of “happy pills”.

The main goal in life should be to change our psychology from selfishness to non-selfishness. Until then, humans will remain stuck in the current immature stage of intelligent evolution. There are several major obstacles to overcome, without needing another to join in the general mess and frustration. This self-obsession with “my mental health problems” doesn’t help anyone or anything. Whereas a minority of people genuinely require help from a psychiatrist, most do not. What they need instead is a large dose of self-honesty. It’s crucial to face reality, even if it initially stings or stinks. Our society is sick enough - in urgent need of something better - without the additional complication of falsely medicalising defective normal behaviour.

Iain Scott, December 2020
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