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<div align="center">Treating Mental Disorders: Time to Tear Down the Barriers</div>

First, a simple definition: "Treatment gap – the number of people with a condition or disease who need treatment for it, but do not get it" (Kale). Specifically, for people suffering from mental disorders, the number of people deprived of proper treatment is astounding. Take schizophrenia and depression, two types of mental illness, for example: Their treatment gaps are 32.2% and 56.3%, respectively – more like gaping holes (De Silva et al.). These statistics from 2014 persist even after implementation of the Mental Health Parity Act, a 2008 law requiring insurers to include essential health benefits, which encompass treatment for mental health (Bendat). These "gaping holes" need to be sealed up by more widespread treatment of mental illness. Treatment is imperative for the vast population suffering from mental disorders, and even has the potential to decrease gun violence associated with mental illness (Fisher and Lieberman). The stigma placed on mental health and the number of Americans unaware of their access to treatment stand in the way of individuals seeking this treatment; through awareness of these two roadblocks, treatment would be better utilized.

Just as plainly as broken legs bar mobility, mental illnesses disturb someone's ability to cope with the ordinary demands of life ("Mental"). Broken bones are treated with casts and splints; mental disorders are treated with pharmaceutical drugs, as well as teams of psychiatrists, social workers, and job-training specialists. About 95% of what is known about the brain today

has been learned in the past 10 years, which has allowed researchers to spawn the pharmaceutical advancements that provide a durable groundwork for treatment today. With these state-of-the-art drugs, treating mental disorders has been proven extremely beneficial. In fact, studies reveal it is even more successful than treating individuals with heart disease. Treatment of heart disease has a success rate of approximately 45% – a miniscule percentage next to a substantial 60% for schizophrenia and depression and a hefty 80% for panic and bipolar disorder (Clark). Between these breakthrough drugs and a team of professionals, most people suffering from mental disorders can successfully relieve their symptoms ("Mental"). With success rates prevailing high above that of a common (and commonly treated) disease, medical professionals and insurers have essential evidence that providing mental illness treatment is very worthwhile (Clark).

Not only is treatment extremely effective today, but there are growing masses of Americans in need of it. Mental health disorders are *not* a minor problem: It is estimated that 25% of the United States' population suffers from a mental disorder in any given year (Bendat). This means 30 million Americans were estimated to experience mental illness in 1993 (Clark). By 2012, the number had hastily climbed to over 40 million Americans affected by mental illness ("Few"). To put this in perspective, cancer, a disease almost all of us have been touched by and learned to loathe, affected a significantly smaller group in that same year – roughly 1.5 million people (Siegel and Jemal).

Mental illness remains the leading cause of disability in the United States, Canada, and Western Europe over any other disease – yes, even cancer and heart disease (Mohlman).

Now let this really sink in. Grasp what the numbers above mean: One in four Americans suffer from a mental illness. A mental illness that disturbs their ability to function normally every single day of their lives (Bendat). These impediments to daily living can have extreme

consequences, the most severe being depression, suicide, and even imprisonment. Depression, heaved at a person already struggling with a mental disorder, can have detrimental effects. Not only is the person's daily functioning a task in itself, but due to the symptoms of depression, he or she can lose sight of life's purpose. The development of this "There's no reason to live" attitude often leads to suicide. Of the general population, less than 1% reported past suicide attempts, as opposed to 18-55% of people with mental illness (Corrigan, Druss, and Perlick). Research also suggests that over 90% of suicides by children and adolescents are due to mental disorders (Mohlman). Violence also lurks among the negative side effects of mental illness (Corrigan, Druss, and Perlick). Sixteen percent of all inmates in prison and jail have schizophrenia, manic-depressive illness, major depression, or another severe mental illness (Mohlman).

Of these inmates suffering from mental illness, a handful may be there for reasons related to gun violence – specifically, mass shootings. While people with mental illness only represent a small percentage, 3% to 5%, of total violence, the public has been given horrid, yet convincing reasons to be concerned about conflation of mental illness and mass shootings (Fisher and Lieberman). A survey from September of 2013 showed that Americans are concerned about the mental health system "at blame" for mass shootings. The source of their concern is easily demonstrated by two powerful examples.

Sandy Hook. Only two words and almost everyone reading them has already had a rush of both anguish and heartache. Adam Lanza unrepentantly killed twenty first-grade children and six adults at Sandy Hook Elementary School in December, 2012. With this shooting, Lanza, twenty-two years old, became responsible for one of the deadliest mass murders in history. Described as "socially awkward, yet intelligent," Lanza suffered from Asperger's Syndrome

(Bramble). However, it is suspected that Asperger's was not the cause of Lanza's violence. This violent act has been attributed to the fact that people with Asperger's, or any developmental disorder, are more prone to almost every major mental illness. His behavioral problems were left unaddressed, which could have led to this sudden outrage of violence and killing of twenty-six people (Park).

Similarly, Aaron Alexis, a subcontractor who previously work at the Washington D.C. Navy Yard, killed twelve people there in September 2013. Alexis told police and his supervisors that he was hearing voices and being followed a month prior to the shooting (Bramble). These signs suggested mental illness, and he was dismissed from the Navy Yard for a month. However, when he returned, he proceeded to take the lives of twelve innocent men working in the Navy Yard. He never pursued help from a mental health specialist, according to Veterans Affairs, which could be why his mental health was still unstable after his one month leave ("VA").

Due to the overwhelming number of devastating mass shootings similar to these crucial illustrations, gun control legislation is at the forefront of discussion in our nation. However, studies have revealed that gun control laws relating to mental health are not very successful (Bramble). It is, nevertheless, crucial that better service for individuals with mental disorders be provided to diminish mass shootings. Neither Aaron Alexis nor Adam Lanza had sought mental health treatment prior to the shootings (Park; "VA"). Had medications been administered and proper treatment enforced, these dramatic mass shooting featured in the media could have potentially been avoided. Public opinion polls support expanding treatment of mental illness to reduce these instances of violence (Fisher and Lieberman).

While treatment is necessary, successful, and supported by the public, few American pursue treatment. Only 20% of people suffering mental illness have sought professional medical care, and a staggering 11 million Americans have an unmet need for mental health treatment. Financial concern was the most common answer given during a study in which individuals with mental illness and their families were asked why they do not seek treatment. More than 1 in 5 people (22%) said that costs formed the barrier to pursuing treatment. Similarly, when asked what information they would need to know prior to being treated, 75% of people said they would have to know if psychologists or mental health professionals take insurance. What these individuals do not realize is that under the Mental Health Parity Act, insurers are required to cover mental health and to eliminate annual limits and higher copays or deductibles ("Few").

An article entitled "Few Americans Aware of Their Rights for Mental Health Coverage" informs readers of a 2014 poll conducted by the American Psychological Association (APA) that shows only 4% of Americans are aware of the Mental Health Parity Law. Passed six years ago, it requires health insurers to cover mental health equally or better than physical health. Awareness of the law has not increased since 2010. The APA's executive director for professional practice, Katherine C. Nordal, asserts that "more access to mental health care is the rallying cry, but the simple fact is many people may already have coverage and not know it or not understand how to use it." Nordal spells out the obvious: "Laws don't work the way they were intended to when people don't know they exist" ("Few").

Aside from skewed financial perceptions, the stigma placed on mental illness also stops people from seeking treatment (Corrigan, Druss, and Perlick). The mental illness stigma refers to the public sense of fear and rejection caused by mental illness. Mental illnesses are the only type of illness that invoke this kind of reaction, rather than pity and desire to help. The average

American is less comfortable around people with mental illness than people with any other disability. Major depression, a mental illness, was regarded as a sign of personal and emotional weakness, rather than a health problem, by 43% of Americans (Clark). A statement from the National Stigma Clearing House expresses that images of psychiatric illness are usually associated with set patterns of absurdity and violence. The statement reads that as a result:

> "Lives and reputations can be shattered by the onset of schizophrenia, manic depression, major depression and related illnesses. Rather than seek help, many sufferers deny their sickness to keep a job, an insurance policy, a friend, even a family" (Clark).

Mental illnesses can affect anyone, despite age, race, religion, or income. They do not result from poor upbringing or personal weakness and lack of character. They are legitimate medical conditions that impair daily functioning ("Mental"). The forced secrecy individuals feel caused by the mental illness stigma results in "lost productivity and needless human suffering" (Clark).

Because treatment would be beneficial to such a large proportion of America, and could even help limit mass murders such as the shootings at the Navy Yard and Sandy Hook Elementary School, it is vital that the barricades to treatment be demolished. Simply raising awareness of the Mental Health Parity Act would eliminate the financial concerns stopping individuals from seeking treatment. Not quite as simply, but just as importantly, eliminating the stigma placed on mental health would help those affected seek treatment without thinking twice about who will judge them. Thinking back to the new vocabulary word, treatment gaps, it is clear what needs to be done. It is time to close the gaps. It is time to speak up. As researcher Donna Mohlman writes: "By becoming the voice of the silenced, we give hope to those who suffer from mental illnesses: our students, husbands, siblings, parents, children, and grandchildren."

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