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## What's wrong with Mental Health?

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May is Mental Health Awareness Month. You will see stories discussing the courage it takes to seek treatment and persevere. Other stories will focus on the trending epidemics of teen suicides and the opioid addiction crisis. Still others will look under the giant wellness or resilience umbrellas and suggest ways to better take care of ourselves so we're being proactive instead of reactive. However, when I started thinking about this article, I saw the need for focus on a very different topic.

As a therapist I wholeheartedly believe in the power of therapy and treatment. I see people changing their lives and finding strength they didn't know they had by making a phone call. Like most professionals, I also see things the profession can change in order to benefit more people.

### Confusion

As I see it, one of the many reasons people don't seek treatment for their mental health is due to confusion. If you have health insurance you pick out your primary physician but you don't pick

out a therapist. People are unsure where to begin. You can contact your insurance provider but you're likely limiting yourself to only in-network providers. There are many well-qualified mental health professionals that aren't on all insurance panels, and some that aren't on any, due to [poor reimbursement rates](#)<sup>1</sup>. As awareness and help-seeking behaviors rise, the need for mental health professionals increases. Regrettably, [there are fewer people entering the field of psychiatry](#)<sup>2</sup> and mental health and professionals are being reimbursed much less than those providing physical health services. These facts make it increasingly difficult to see a provider quickly even if you're lucky enough to find one that suits you.

There are a few resources that could help you navigate finding a therapist in your area. The Substance Abuse and Mental Health Services Administration (SAMHSA) provides a [behavioral health treatment services locator](#)<sup>3</sup>. The National Alliance on Mental Illness ([NAMI](#)) offers [a helpline](#)<sup>4</sup> that can help with

symptoms, treatment options and local support groups and services. [The Psychology Today](#)<sup>5</sup> website also provides a find a therapist tool that allows you to type in your city or zip code and select between finding a therapist, a psychiatrist, a treatment center, or a support group.

### What's in a name?

Maybe you found a provider with little difficulty. How do you know they're the right professional for the job? Do you need a LPC, LCSW, LMFT, PCGC, SAC, MD, or Psy.D? What type of provider should you choose?

Many people don't understand the differences between a counselor, therapist, social worker, psychologist, psychiatrist, personal coach, or a psychotherapist. This is no fault of the public (although, a little research wouldn't hurt). The profession has made it confusing and every state has different licensing requirements and many of them have different professional titles. It becomes even more confusing when I tell you that not all counselors and

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2. <https://news.aamc.org/patient-care/article/addressing-escalating-psychiatrist-shortage/>
3. <https://findtreatment.samhsa.gov/>
4. <https://www.nami.org/Find-Support/NAMI-HelpLine>
5. <https://www.psychologytoday.com/us>
6. <https://www.verywellmind.com/can-psychologists-prescribe-medications-2795756>

social workers are “clinical” professionals.

For example, I’m a Licensed Professional Counselor (LPC) in Wisconsin. In Wisconsin this is considered my “clinical” licensure. As an LPC in Wisconsin I can essentially start my own practice as a therapist. However, in Illinois, I was also a LPC. A LPC in Illinois is only the first step toward clinical licensure. After 2 years of supervision (3, 360 hrs. in IL) by a Licensed Professional Clinical Counselor (LCPC) you can take the exam to become a LCPC in Illinois which is the equivalent of LPC in Wisconsin. The LPC-IT (Licensed Professional Counselor in Training) license in Wisconsin is the equivalent to the LPC in Illinois. Wisconsin requires 3,000 supervised hours. The same is true for clinical social workers. Confused?

Social workers and counselors receive similar training and provide similar services. To become a licensed professional requires a graduate degree, years of supervised experience, and passing one or more exams. While a counselor might be more attuned to helping someone by engaging them in

psychotherapy (talk therapy), a well-trained social worker will do the same and also provide wrap-around services and advocate for the client.

A doctor of psychology is a psychologist and has either earned a Ph.D. or a Psy.D, while a psychiatrist has earned their M.D. Both psychologists and psychiatrists are interested in assessments and may specialize in treating specific disorders, but psychiatrists are trained medical doctors and can therefore prescribe medications.

Psychologists are more likely to gather data through assessments and standardized testing. They can determine if someone has a traumatic brain injury (TBI), a learning disorder, or if they’re fit to stand trial or return to a safety sensitive job. Some specially trained psychologists can also prescribe medications but they are limited to a handful of psychiatric medications and are only located in the military, the Indian Health Service as well as in Louisiana, New Mexico and Illinois<sup>6</sup>.

A certified personal coach may be able to help someone determine goals

and reach them just as a social worker or counselor would. They are also shielded from the stigma associated with therapy and mental health. However, while social workers and counselors are state licensed and regulated professions, coaches are not. Therefore, anyone that wants to call themselves a coach can do so and this has the potential to be dangerous if there are real, underlying mental health disorders at play that a personal coach isn’t trained to recognize or treat.

There is a little “consumer beware” disclaimer when choosing a mental health professional. Unfortunately, the title counselor has become a bit ubiquitous. Not all counselors have the same training. An alcohol and other drug abuse (AODA) counselor, known as a Substance Abuse Counselor in-training or Substance Abuse Counselor (SAC-IT, SAC) have different requirements than a Professional Compulsive Gambling Counselor (PCGC), a School Counselor or an LPC. All four share the title of counselor and all four provide different services and have different educational requirements.

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This is the main reason I've started referring to myself as a therapist or psychotherapist. While I can and have helped clients with addiction, I do not specialize in addiction. The SACs or PCGCs specialize in addiction but may not be suited to help with grieving the loss of a loved one or handling anxiety disorders. Just as you would seek the right doctor for a physical ailment, it is important to ask a social worker or counselor if they are qualified to help.

## Stigma

This topic could fill a series of books. There are several reasons (earned and unearned) people have preconceived ideas about seeking treatment.

Some of the more popular reasons are as follows: *I have to be in crisis to seek help, If I get help it means something is wrong with me, It means I'm weak, They'll make me go to meetings, If therapy actually worked it wouldn't take so long, It's too expensive, Therapists just get paid to talk and be judgmental, I don't want to take medication for the rest of my life, If I get help everyone will find out, They'll want me to choose between therapy and*

*my faith.* I would like to address some of these notions head-on.

*I have to be in crisis to seek help.* You never need to be in crisis in order to call a mental health professional. In fact, we would love to speak to you before you find yourself in crisis when it will be harder for you to produce change and we're more concerned with triaging.

*If I get help it means something is wrong with me, it means I'm weak.* Seeking help for your mental health doesn't mean anything is more wrong with you than someone seeking help from a doctor because of knee pain. Seeking help takes strength. It is never the weak person that reaches out for help.

*If therapy actually worked it wouldn't take so long.* Therapy is not a magic pill. It can take some time. Often, therapists start working with a client to help with the presenting issue only to discover what's actually causing the presenting issue is much bigger and deeply rooted. In most scenarios, it took years for the person to get to the place they are when they seek help. It's going to take a while to unpack it all.

*It's too expensive.* A single therapy visit is cheaper than a trip to the doctor's office. However, many therapy visits can add up. Therapists may charge more as an attempt to make a living wage since insurance reimbursement can be so low, if they reimburse at all. You can always ask about a sliding scale or payment options to see if your therapist can work with you to reduce costs. There are also nonprofit organizations like [Catholic Charities](#), [Lutheran Social Services](#), and [United Way](#) that provide supplemental funding to community mental health clinics and can assist you in finding resources.

*I don't want to take medication for the rest of my life.* Just because you're seeing a therapist doesn't mean you'll get referred to a psychiatrist and start taking medication. If you are referred, it doesn't mean you'll need medication for the rest of your life. If you do require daily medication, then it's probably for the best. You can always get more than one opinion.

*If I get help everyone will find out.* Therapists and social workers have a code of ethics we follow. In that code are clear rules about

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confidentiality. We are not to talk about your information with anyone else without clear consent from you.

There are extreme circumstances (i.e., threat to self or others) where we may have to break that confidentiality. Otherwise, rest assured that we don't want to risk losing our license just to tell our mechanic about the torrid details of your affair.

Admittedly, the profession isn't doing itself any favors to end stigma by using words like "disorder", but generally, the public causes more damage by defining people by their diagnosis. We'll say things like, "John is an alcoholic" instead of, "John suffers from alcoholism". We know that addiction is a disease. We wouldn't say, "John is a cancer" unless we were referring to his astrological sign or we really detest him.

We also know that the head; which has the brain, attaches to the rest of the body. However, for some reason we're more comfortable talking about our diabetes or heart disease diagnosis with perfect strangers than discussing our mental health with loved ones.

The ideas we have about treatment come from virtually endless sources. Our family, friends, co-workers, or spiritual leaders may influence us. What we read in magazines, newspapers, and social media platforms certainly influence us. What we hear on talk-radio or see in movies or on TV all play a role in our collective feelings about treatment.

### The Unknown

The idea of telling strangers our deepest thoughts, sharing with them the darkest parts of our lives or admitting that we could use help and guidance is truly scary. We might picture lying on the chaise with the graying, bearded, bespectacled therapist in a tweed blazer sitting behind us with a pad of paper and a pen writing notes as he repeatedly asks, "How does that make you feel?" This is how therapists, psychologists and psychiatrists are typically portrayed. Or maybe you envisioned the woman wearing tie-dye and burning incense in her crystal littered office? Another stereotype of the profession.

The reality is that the mental health profession is like most professions. It's made of people from all

different cultures and backgrounds. Those stereotypical professionals don't really exist anymore. So what can you expect when seeking treatment? It depends on what you're seeking treatment for, but typically you'll call the office to schedule an appointment. At this time, the office may ask to send you intake paperwork or ask if you can come in early or prior to the appointment to get the paperwork completed. Depending on the presenting issue, part of this paperwork might include basic assessments and releases of information. You should also receive a copy of the office's HIPPA policy or Notice of Privacy Policy, Consent for Services or Service Contract, authorization to bill a credit card, and a Social Media Policy.

During your first session your therapist will be information gathering based on the presenting issue. They understand how scary it is to open up and be vulnerable. This may take more than one session because the therapist wants to be careful in making a proper analysis. As you would expect, the treatment plan is designed around the diagnosis. The therapist will walk you through the

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diagnosis and their thoughts for treatment and goals while seeking your feedback and input. This may or may not include a psychiatric referral.

The therapeutic relationship should be a collaborative one. I always tell clients that I'm simply there to help guide them. They're the ones doing all of the hard work so when they see positive changes they deserve all the plaudits. However, I let them know the opposite can also be true. If a client is missing appointments, not doing their homework, and not being open and honest during sessions, they're not going to see the positive changes they want.

It's also quite possible that the therapist isn't listening and refuses to adjust the treatment plan. Maybe you feel like you're not being heard or understood or there's just something not clicking between you and your therapist. This is a good time to discuss this with your therapist or, find a new therapist. It doesn't make sense to stay with a mental health professional you can't connect with. It wastes your time and theirs.

During each session your therapist should be assessing your well-being and how you're progressing toward your goals. They should adjust the treatment plan as needed and discuss this with you as you progress. Once you realize you can open up to a stranger and unload so many things that have been bothering you and get tools to help you succeed as you move forward, you may wonder why you didn't seek treatment sooner.

### Conclusion

Like many professions, mental health faces some challenges. Mental health parity, stigma, a lack of consumer information about licensure requirements, an increased need for services, and a shortage of providers are just a few issues we face.

The more we have open conversations about the increasing importance of mental health in our society, the more we fight the stigma of help seeking. Then the rest of the dominoes may fall.

If you're a lawyer, judge, law student or family member in Wisconsin in need of assistance, please reach out.

Wisconsin Lawyers Assistance program: 1(800) 444-9404

If you or someone you know needs help:

National Suicide Prevention Lifeline: 1(800) 273-8255

National Helpline: 1(800) 662-4357

National Alliance on Mental Illness Helpline: 1(800) 950-6264

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