



2020

The Fears Behind Depression: Removing Masks and Helping Your Loved Ones Heal

Anna Mader
Brigham Young University, anna.mader33@gmail.com

Follow this and additional works at: <https://scholarsarchive.byu.edu/familyperspectives>



Part of the [Social and Behavioral Sciences Commons](#)

Recommended Citation

Mader, Anna (2020) "The Fears Behind Depression: Removing Masks and Helping Your Loved Ones Heal," *Family Perspectives*: Vol. 2 : Iss. 2 , Article 7.

Available at: <https://scholarsarchive.byu.edu/familyperspectives/vol2/iss2/7>

This Featured Insight is brought to you for free and open access by the Journals at BYU ScholarsArchive. It has been accepted for inclusion in Family Perspectives by an authorized editor of BYU ScholarsArchive. For more information, please contact ellen_amatangelo@byu.edu.



The Fears Behind Depression: Removing Masks and Helping Your Loved Ones Heal

By Anna Mader

I never expected to be a statistic. But in 2018, that's exactly what happened.

That year, an estimated 17.7 million Americans experienced a major depressive episode,¹ and I was one of them. When my depression hit, I was living abroad volunteering for my church, and I worried that if my depression interfered with my work, I'd have to go home.

So I didn't tell anyone.

I knew the classic symptoms,² and I masked them.

For example, I knew that people with depression may have trouble finding the energy to do simple things, like getting out of bed or taking a shower, so I made sure all my actions were consistent with what others expected to see. I woke up every morning at 6:30 a.m. I planned for and taught free English classes 2-3 times a week. I constantly met and talked with new people.

For a year of my life, I worked, I smiled, I laughed, I pretended.

I thought I had done a good job of it, too, until I looked back at videos of myself from that time. I looked like a zombie trying to pass as a human, hoping nobody noticed. I was depressed, and I needed help.

Why People May Not Seek Treatment for Depression

Like me, many who struggle with depression don't seek treatment. A 2018 study³ by Dr. Adam Chekroud and colleagues shows that 30.6% of people who report needing treatment for depression don't pursue it. Some lack knowledge about available resources, while others have concerns related to treatment affordability and convenience. Still others worry about what people might think of them or assume they can handle it on their own.

My reluctance to seek treatment was connected to social stigma.⁴ I knew therapy and medication would be

there if I asked. However, fears of being judged, losing control, or being a burden made me hide behind a smiling mask. A better understanding of these common fears and how to navigate them could have helped me access treatment sooner.

Fear of Being Judged

During my depressive episode, I was constantly terrified that others might find out about my depression. I hated the idea of concerned glances thrown my way or of semi-sympathetic voices discussing my life. I was scared I would be sent home early from my service, and that everyone would think I was weak.

Fears of social stigma aren't unfounded. One study on the evolution of social stigma suggests that while people are becoming more knowledgeable of mental illness, their

Validate your loved one's struggles instead of blaming them and encourage their strength instead of treating them like they're broken.

actual attitudes aren't necessarily becoming more accepting. Another study suggests that half of Americans are uncomfortable discussing mental health at work.⁶

You can reduce stigma by trying two things: normalizing depression and then not fixating on it.

To normalize depression, the National Alliance on Mental Illness (NAMI) suggests drawing parallels between

mental illness and physical illness, openly discussing depression, and educating yourself and others.^{5,7} Validate your loved one's struggles instead of blaming them, and encourage their strength instead of treating them like they're broken.

While talking about depression is critical in reducing stigma, don't obsess over it. Depression made me feel like an outsider, and I didn't want that confirmed by others treating me more carefully or constantly asking me about my feelings. Separate illness from your loved one's identity by continuing to nurture your relationship with them outside of depression. Discuss other topics and spend time doing activities you both enjoy.

Fear of Losing Control

Depression made me feel like I was being sucked into a black hole—the intensity of the pressure was all-consuming and disorienting. Overwhelming feelings of pain and hopelessness took my brain to some very dark places, including thoughts of suicide. I didn't want to be left alone with these thoughts, but I was scared that just hearing the word “suicide” would trigger others and push them to overreact and take control of my life to save me.

This situation isn't unique to me. Depression is often comorbid with suicidal ideation,⁸ whether these suicidal thoughts are passive (i.e. “I wish I was dead” or “things would be easier if I just wasn't here anymore”) or active (i.e., having the intent and/

or a plan to commit suicide). The Mayo Clinic⁹ and Suicide Awareness Voices of Education¹⁰ offer suggestions on how to handle both passive and active suicidal ideation. Even if your loved one's safety isn't in immediate danger, as may be the case with passive ideation, encourage them to seek professional help in addition to talking to you.

To help your loved ones see you as a safe person to confide in, include them in their own recovery process. You may start by saying things like, “I'm doing my best to respect your autonomy and trust you in your recovery. What can I do that would be most helpful for your healing and safety?” Then, on your loved one's good days, counsel with them about how to recognize and work through bad days or how to assess their physical safety.

However, remember that passive thoughts can easily turn to active intent and plans, so be vigilant in discussing and monitoring suicidal ideation with your loved one. When passive ideation becomes active, you will have to take control and get help immediately by calling 911 or a suicide hotline like the National Suicide Prevention Lifeline.¹¹

Fear of Being a Burden

A final reason I stayed silent about my depression was because I believed sharing my burden would weigh people down. I didn't want to contribute to any feelings of anxiety or awkwardness. I thought it was better to suffer alone than to be selfish.

To alleviate this fear in your loved one, you can try saying things like, “I am concerned, but I'm so glad you're sharing this with me. You don't have to protect me from your feelings or prioritize my comfort over your well-being. Keep sharing with me, and as I

Mader: The Fears Behind Depression

become more familiar with depression, I'll know how to better support you. I'd rather share the weight with you than stay ignorant while you struggle alone." Then, just listen.

However, don't neglect your own emotional needs in your attempts to reassure your loved one that you're okay. If you get burnt out helping your loved one, you may be at greater risk for depression yourself. If you're struggling with your own feelings or in knowing what to do, you might consider going to a trained therapist yourself.¹² A professional can help you

process your own emotions and teach you how to effectively communicate with people experiencing depression.

Taking the Mask Off

When I finally returned home from abroad, I made sure to start regularly seeing a therapist. Talking about my depression helped diffuse the pain I had been holding inside me for the previous year. My therapist also helped me identify people in my life with whom I did feel safe sharing my experience. Expanding my support network from

my therapist to family and friends significantly aided in my recovery.

What I learned is that depression is a horrifically isolating disease. The unfairness of enduring alone was almost as bad as the pain of depression itself. Connecting with others, however, is a powerful way to aid in healing. You can be that connection by negating fears and being a safe space for your loved ones. Vulnerability encourages vulnerability, so don't be afraid to take your mask off first to help your loved ones do the same.

Endnotes

- 1 SAMSHA. (2019). *Key substance use and mental health indicators in the United States: Results from the 2018 National Survey on Drug Use and Health*. [Substance Abuse and Mental Health Services Administration](#)
- 2 National Institute of Mental Health. (2020). *Depression*. [NIMH » Depression \(nih.gov\)](#)
- 3 Chekroud, A.M., Foster, D., Zheutlin, A.B., Gerhard, D.M., Roy, B., Koutsouleris, N., Chandra, A., Esposti, M.D., Subramanian, G., Gueorguieva, R., Paulus, M., & Krystal, J.H. (2018, July 2). Predicting barriers to treatment for depression in a U.S. national sample: A cross-sectional, proof-of-concept study. *Psychiatric Services (Washington, D.C.)*, 69(8), 927–934. <https://doi.org/10.1176/appi.ps.201800094>
- 4 American Psychiatric Association. (2020). *Stigma, prejudice, and discrimination against people with mental illness*. [American Psychiatric Association](#)
- 5 Schomerus, G., Schwahn, C., Holzinger, A., Corrigan, P. W., Grabe, H. J, Carta, M. G., & Angermeyer, M.C. (2012). Evolution of public attitudes about mental illness: A systemic review and meta-analysis. *Acta Psychiatrica Scandinavica*, 125(6), 440-452. <https://doi.org/10.1111/j.1600-0447.2012.01826.x>
- 6 American Psychiatric Association. (2019, March 20). [American Psychiatric Association](#)
- 7 Greenstein, L. (2017, October 11). *9 ways to fight mental health stigma*. [National Alliance on Mental Illness](#)
- 8 Purse, M. (2020, March 25). *What is suicidal ideation? A look at dangerous thought patterns*. [Very Well Mind](#).
- 9 Mayo Clinic Staff. (2018, January 31). *Suicide: What to do when someone is suicidal*. [Mayo Clinic](#).
- 10 SAVE. (2021). *How to help someone who feels suicidal*. [Suicide Awareness Voices of Education](#).
- 11 Suicide Prevention Lifeline. (2021). <https://suicidepreventionlifeline.org/>
- 12 Howes, R. (2014, March 10). *8 more reasons to go to therapy*. [Psychology Today](#).