MYTH VS REALITY about the science of severe mental illness

Myth: Mental illness is not a medical disease.
Reality: The National Institute of Mental Health defines mental illness as a disruption in neural circuits. New imaging techniques like PET, fMRI, MEG and high-resolution EEG are making it possible to map patterns of cortical activity in psychiatric diseases, and neuroimaging is beginning to yield their biomarkers. The view that mental illness is a lifestyle option or personality quirk is without scientific or clinical basis and reinforces the damaging concept that psychiatric symptoms are a behavioral choice.

Myth: If quality services were available, people who need treatment would seek help on their own.
Reality: An estimated 50% of individuals with schizophrenia and 40% of individuals with bipolar disorder lack awareness of their illness, an anatomical brain condition called anosognosia. People who think they are not ill have no reason to seek treatment, no matter how effective or available they are. Limiting treatment to those medically able to seek medical care discriminates against individuals who are not able to recognize they are ill.

Myth: Treatment is only clinically effective when it is voluntary.
Reality: Many factors influence the effectiveness of treatment, and not all individuals with severe mental illness respond to treatment, whether voluntary or involuntary. Among individuals who lack insight, court-ordered treatment can be a crucial bridge to recovery. Innumerable outcome studies have documented that qualifying individuals who receive mandated treatment in the community for at least six months experience a higher quality of life (e.g., are less likely to be arrested, incarcerated, homeless, victimized or violent, including to themselves) than when they were not under court order. Moreover, while resentment is common at the time of civil commitment, a majority of recipients later report that mandated treatment improved their lives.

Myth: Antipsychotic drugs cause homicidal behavior.
Reality: There appears to be no published research to support the rumor that taking antipsychotic drugs increases homicidal ideation. On the contrary, studies examining mental illness and violence consistently find that homicides by individuals with severe mental illnesses are almost always committed by individuals who have never been treated or are not taking their antipsychotic medication.

TreatmentAdvocacyCenter.org