The Stigma Surrounding Workplace Mental Illness And Psychotherapy: 10 Common Misconceptions

Knowing the myths about mental illness and psychotherapy can keep you or someone you know from hesitating to reach out for help.

PHOTO BY AYO OGUNSEINDE ON UNSPLASH

A lot has been written about mental health in the workplace and the risks of sharing a mental illness with coworkers or employers. September is National Suicide Prevention Month--an important time to address the unfortunate, widespread stigma that still exists about mental health and psychotherapy in America. Studies show that when everyone thrives in the organization, the organization thrives. But much more needs to be done to educate employers and employees about mental health wellness and suicide prevention.
Some experts go so far to advise you to be careful about what you tell your boss because it could cost you your job. Yet when you’re facing a difficult emotional crisis, your employer’s understanding and support is a huge relief, especially if you’re having trouble functioning at your usual standard. Companies and employees alike harbor misguided notions about what really goes on in a practicing psychotherapist’s office, many of which come from novels or television. Psychotherapists are often portrayed as incompetent hacks, more disturbed than their clients. Some scenes are good, some bad and others downright comical. There are numerous myths about psychotherapy that continue to show up in the written word, on the screen and in the workplace. Here are ten of the most common ones:

1. **People who go for psychotherapy are weak, mentally ill, or crazy.** Untrue. Nowadays if you seek treatment, it’s viewed as a sign of resourcefulness. The average therapy client struggles with many of the same problems we all struggle with on a daily basis: relationships, self-doubt, confidence, self-esteem, work/life stress, life transitions, depression and anxiety. The preferred designation for the person in therapy is “client,” not “patient,” for that very reason. Over my twenty-five years of experience, I’ve often said that the folks I treat in therapy are mentally healthier than some people walking the streets who fear the stigma of mental health counseling.

2. **Therapists sit behind desks taking notes while you lie on a couch.** This is rarely the case. Trained clinicians know that the arrangement and distance between them and the client are critical for a safe and workable therapeutic alliance. Psychological or physical separation from the client can create subtle authority and intimidation and an inability on the client’s part to fully connect and disclose information pertinent to treatment. The typical therapeutic setting is much like your living room where both parties sit in comfortable chairs without barriers between them. Good therapists often ask if the distance is comfortable and refrain from taking notes until after the session so they can be present with clients.

3. **Psychotherapists and clients become best friends.** There is no basis in the myth often seen in literature that you pay a psychotherapist to be nice to you and care for you. The therapeutic relationship is a psychologically intimate but strictly professional one. It’s the therapist’s absolute commitment and requirement of ethics and law that the relationship be limited to counseling sessions and necessary email, phone or text contacts. Clinicians who break the boundary between a professional relationship and friendship can lose their licenses for such infractions. The client’s name and personal story are strictly confidential. In an episode of the TV series The Sopranos, a serious ethical lapse occurred when one therapist revealed the name of another therapist’s client across a crowded table at a dinner party full of clinicians. Around the country the next day, the episode outraged clients and therapists because of this egregious ethical violation. Some fans even lost faith in their ability to maintain “belief” in the television program.

4. **Psychotherapy is mostly talk therapy.** Therapy isn’t passive. Scenes in novels and TV shows where therapists just listen to clients vent, nod their heads in approval, and mirror back the same words are stereotypes. So are those cases in fiction where therapists interpret clients’ experiences for them instead of eliciting...
a client’s own interpretations. With today’s cutting-edge therapies, clinicians are trained in experiential and therapist-led modalities that engage both parties in an interactive collaborative process based on dialogue and the client’s active engagement in joint problem solving. Together psychotherapists and clients identify problems, set goals, and monitor progress sometimes with homework and reading assignments as part of the process.

5. **Psychotherapists have ready-made solutions for all of life’s problems.** What is important in establishing the therapist-client alliance is not what the therapist thinks is important to bring about change but what the client thinks is important. A good therapist tailors treatment sessions around the needs of clients instead of plugging clients into ready-made formulas. In so doing, clinicians listen not just to the content of the story but for deeper themes and patterns that undergird the stories. This allows the professional to mirror feedback based on these emerging themes and patterns that can facilitate change, not just the repetitive words and phrases that clients supply.

6. **Psychotherapists blame a client’s problem on their upbringing.** Despite the theatric antics of Dr. Phil, a well-trained therapist doesn’t blame or shame. They don’t blame clients or their parents. They bring an objective, bird’s-eye perspective to help clients see the water they’re swimming in, so they can take responsibility for their lives. Professional therapists never admonish, blame or shame clients into change.

7. **Psychotherapists can prescribe medication.** This is a common myth. The term “psychotherapist” is a broad umbrella that includes licensed social workers, licensed marriage and family therapists, licensed practicing counselors, and licensed psychologists. Although this practice has changed in some states, generally speaking psychotherapists are trained in the skill of helping clients work through their problems. Psychiatrists are medical doctors who usually limit their practices to prescribing and monitoring psychotropic medications while working with psychotherapists who conduct the actual therapy.

8. **Psychotherapy can solve problems in one or two sittings.** While convenient for the novel or television show to have a character “fixed” in a session or two, it doesn’t work that way in real life. The average session is around fifty-to-sixty minutes and the first session is basically an intake and getting acquainted session. To get to the heart of a problem, psychotherapy takes many more sessions over time. On the flip side, as in the Sopranos, psychotherapy rarely takes six or seven years. Generally speaking, something’s not working when a client works with the same therapist for excessively long periods of time. The average therapy course is three to four months.

9. **Psychotherapists believe that the personality is cemented by age five.** The belief that you can’t teach old dogs new tricks is perhaps the biggest myth of all. When you read a novel in which a therapist says that personality is fixed by age five, it’s laughable and the story loses credibility. Neuroscientists have shown that the brain is malleable, and new MRI technology allows us to see this change. Some of the latest psychotherapy techniques utilize treatment based on neuroplasticity—the creation of new neural pathways in the brain and thus the potential for new beliefs and behaviors throughout life from womb to tomb.
10. **Psychotherapists make clients feel immediately better after each session.** This scenario might be convenient for a storyline, but nothing is further from the truth. Clients are not cars, and therapists aren’t mechanics. Clients are active participants while therapists help them face and uncover whatever is bothering them. That process takes time and can be initially difficult and painful. Having feelings stirred up is part of the therapeutic process. When psychotherapists describe the healing trajectory, we often say sometimes things get worse before they get better. But skilled therapists are trained on how to lead clients through the storm into the calm.

If you or someone you know is struggling with a mental health issue, don’t hesitate to reach out for help. Contact Mental Health America at www.mentalhealthamerica.net/contact-us to find resources closest to you or call 1-800-273-8255, a 24 hour crisis center. You can also call 1-800-985-5990 or text “TalkWithUs” to 66746 at the SAMHSA Disaster Distress Helpline. Trained crisis workers will listen to you and direct you to the resources you need. In an emergency, call 911 or contact a local hospital or mental health facility.