# Psychologists are starting to talk publicly about their own mental illnesses, and patients can benefit

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[From sports and entertainment celebrities](#) like Simone Biles, [Ariana Grande](#) and [Ryan Reynolds](#) to [everyday social media users](#) on Facebook, Twitter and TikTok, more people are [talking publicly about mental health](#).

Yet both students and professionals across fields have long been advised that talking openly about their own [mental health](#) experiences [risks negative judgments](#) from co-workers and supervisors, which can

potentially damage their careers. Ironically, even professionals in mental health fields are advised to [conceal their own experiences with mental illness](#).

This culture of silence is counter to what psychologists know to be true about battling stigma: that talking openly about mental health can [help reduce stigma and encourage others to seek help](#).

Stigmatizing openness about [mental illness](#) can also result in the [systemic discrimination against](#) and [exclusion from mental health professions](#) of people who can make valuable contributions to the field—whether in spite of or because of their unique mental health experiences.

We are a [doctoral candidate](#) and an [assistant professor](#) of clinical psychology who have both experienced mental [illness](#). In a recent study, we explored [how common mental health issues are](#) among [clinical psychologists](#) and trainees, and whether those issues affected them professionally.

In a related commentary, we and our psychology colleagues wrote openly about [our own experiences with mental illness](#) to show others that success in mental health careers is possible for people who currently live, or have lived, with mental illness.

## Psychologists are people, too

In a forthcoming peer-reviewed study, almost 1,700 psychology faculty members and trainees completed an online survey that [asked about their mental health experiences](#). This is the largest study to date on the rates of mental illness in graduate programs that train clinical, counseling and school psychologists.

Our survey asked participants two separate questions: whether they had

ever experienced "[mental health difficulties](link)" and if they had ever been diagnosed with a mental illness by a professional. Asking both questions was important, because some mental health difficulties are not labeled as specific conditions, and not all respondents may have had access to a mental health provider who could make a formal diagnosis.

Over 80% of all respondents reported having mental health difficulties at some point, and 48% reported having a diagnosed mental illness. These rates are similar to [rates of mental illness in the general population](link).

Our findings show that, far from being immune to the conditions they treat in others, psychologists grapple with mental health difficulties or illnesses just as much as their patients do.

Mental illnesses are [leading causes of disability](link) worldwide. This fact may partly explain why [there's a stigma among psychology professionals](link) about disclosing them: Some may see mental illness as an insurmountable handicap to being effective at researching mental illness [or treating it in others](link).

However, in our survey of psychology faculty members and trainees, 95% of respondents with mental health difficulties reported having "no" or "mild" professional problems related to these experiences. Over 80% of those with diagnosed mental illness reported the same.

This finding highlights that experiencing mental illness is not by any means a barrier to being a capable and effective psychologist.

## Stigma as a barrier to inclusion

Through another upcoming study, we identified some of [the structural barriers within clinical psychology](link) that may discourage psychologists from talking about their own mental illness.

One key barrier is that—again, ironically—stigma toward mental illness exists from within the mental health profession. We have found that psychologists and trainees with mental illness may be unfairly viewed as damaged, incompetent or hard to work with by their colleagues. We based this conclusion on our personal experiences in the profession, combined with the large body of research on the dynamics of disclosing mental illness.

Previous research has found that sharing one's mental health difficulties, disability or illness in a training setting may result in lost professional opportunities, such as being hired or promoted or winning an award.

However, research also shows that sharing one's mental illness may open up other opportunities to receive support and accommodations on the job, such as adjustment of job tasks, work schedules and time and performance expectations.

## Lived experience counts

As therapists ourselves who have worked with hundreds of clients, we have found that our mental health struggles help us understand and empathize with the challenges faced by our patients.

Research suggests that we are not alone. Studies show that therapists may use their experiences to inform how they work with clients. In fact, some widely used and scientifically backed therapies were developed by psychologists with lived mental health experience—such as "dialectical behavior therapy," which aims to help clients live in the moment, deal with stress and emotions in healthy ways and improve relationships.

As research scientists, we have found that our mental health experiences not only inform our ideas but also help us grapple effectively with the inevitable setbacks that come with a profession defined by endless hours

of data collection, grant writing and a [publish-or-perish culture](#).

Having personal experience with mental health challenges reminds us why our work has meaning and is worth the struggle: to help and improve the lives of real people dealing with real traumas and real emotional struggles.

## Psychologists 'coming out' proud

Although we have chosen to make our struggles public, we are not saying that others like us should feel that they must talk openly about it—or that all psychologists must have had mental health experiences in order to treat patients or do research effectively.

Rather, we believe that psychologists who have chosen to talk about their mental illness may be able to use their positions to destigmatize openness about these health issues—for other mental [health](#) providers as well as the patients they serve.

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