

Dismantling stigma, one word at a time

BY STEVEN MICHELMAN

The following contains explicit language about mental health and suicide. If you are thinking about suicide, please reach out to a friend, family member, doctor, counselor, or therapist, or call the Suicide and Crisis Lifeline at 988. You can also search 988 online to easily get to the Suicide and Crisis Lifeline site and have an online chat with someone.

OVER TWENTY YEARS AGO, I was backstage talking to a co-worker and friend; I will call him Bob. Bob was telling me a story about haggling over something he was selling. Bob said, “The guy tried to Jew me down!” “What???” I replied. “I know, right?? Can you believe he tried to Jew me down?” he said again without hesitation. “Bob, that’s not cool to say,” I explained. Bob looked at me, confused. He knew I was Jewish and never connected the words he was saying with being antisemitic or offensive. To Bob, it was the acceptable language he had used since childhood. When I explained why it was unacceptable, he said, “Oh, man, I’m sorry, Steven. I’ve said that my whole life and never got that.” We discussed what happened and came to an understanding. It did not impact our relationship, and we remain friends today. Even though the interaction was uncomfortable, I did the right thing by staying calm at that moment, educating my friend, and not ending a friendship over ignorance.

Would I have responded the same way if Bob had said something about a different religion or culture? Twenty years ago, not likely. I understood the seriousness of the comment only because it affected ME. What Bob said resonated with MY culture,

religion, and how I was raised. Years later, when words I was accustomed to saying were becoming “outdated,” I laughed and ignored the requests to stop using them. I scoffed at people when they pointed out MY ignorance of what was “P.C.” Even when I knew the words were not ok, I said them anyway. I only thought of myself and the inconvenience of changing. I thought, no one can make ME find a replacement or worse, make ME remove those words from MY vocabulary. This narrow-minded way of thinking is no longer a part of ME. Today, after my recent life experiences and being educated about stigma and nonjudgmental language, I understand. WORDS MATTER.

Words matter. Gestures matter. Our language matters.

This article is not about telling people what to say, when to say it, or how to say it. As a person with multiple mental health diagnoses, I am experiencing, for the first time, emotional reactions to the use of mental health disorders as punchlines or as sayings used to excuse a person’s insecurities. In January of this year, *Protocol* published an article about my mental health journey where I revealed my struggles with anxiety, depression, and suicidal ideation. I was honest and raw in that article. Yet, I never shared any of the diagnoses I received

from a psychiatrist. It did not matter that I had been living with persistent depressive disorder (PDD) and generalized anxiety disorder for years. Sharing that I was someone managing obsessive-compulsive personality disorder (OCPD) and borderline personality disorder (BPD) was not necessary to understand my story, not in that article and not in my life. If a person met me before or after those diagnoses, they would not know that information unless I revealed it or until they read these words.

My son was watching “Impractical Jokers,” a TV show about four friends who put each other in uncomfortable and funny situations. I sat down to watch with my son when someone on the show said, “I have a choice between killing myself or scrapbooking.” My reaction to hearing “killing myself” was numbness. I disconnected and sat down away from the TV. I admit it is a funny concept. He would instead do anything else than scrapbooking. Suicide is not the alternative. It is never an alternative or a joke. Yet, what was said is now in the ether. It is out there promoting and supporting stigma. Our language matters, and this language, making suicide a punchline, minimizes the seriousness of someone with suicidal ideation.

The other day I was at physical therapy to get help with tendonitis in my right shoulder. I finished a set of stretches on my right side when the PT said jokingly, “Let’s do the left side too. I am OCD like that.” This statement struck me. Obsessive-compulsive disorder (OCD) is a severe life-long mental health condition that can cause intrusive thoughts that can lead to intense

anxiety and behaviors that are experienced as uncontrollable. People diagnosed with OCD struggle to manage these thoughts and may suffer. I know I have previously made similar jokes, and I probably contributed to someone's discomfort or feeling overwhelmed, or who knows what. That "who knows" part helps me be more mindful and more accepting of using non-stigmatizing language. We do not know what others are feeling or experiencing, so why say it? Humans are intelligent and clever, and we can find different ways to express ourselves. We all may experience obsessive thoughts or compulsive behaviors from time to time. It does not mean we have a serious mental health condition. We should not self-diagnose and make that condition our identity.

When I hear "OCD" or any diagnosis used as feelings or jokes, I am startled. I react similarly to ADHD (Attention Deficit/Hyperactive Disorder) and PTSD (Post Traumatic Stress Disorder). ADHD and PTSD are both conditions that can require long-term treatment and can be debilitating. ADHD is not the same as "I am forgetful" or "I am having trouble paying attention today," and a PTSD diagnosis is not given to someone whose team lost the game in overtime last night. Those serious diagnoses belong to just that, their diagnosis. If anyone reading this is experiencing symptoms that are impacting their ability to function in their home and work life, if they are struggling to get out of bed each day, keep a job, maintain their focus, meet the basic needs of everyday life, please, please, seek professional help (check out www.samhsa.gov). If not, please, please find another way to tell a joke and share your feelings. Like physical health conditions (cancer, heart disease, obesity), doctors use mental health diagnoses to help people seek the appropriate treatments so they can heal and recover. Saying "I am so OCD" is the same as saying, "I am so heart disease" or "I am so lung cancer."

I am an instructor for the Mental Health First Aid course (<http://btshehelp.org/mhfa>). The class addresses language, stigma, and

its impact on those with mental health challenges. We discuss the importance of person-first language. We learn that saying "Steven is a person living with a diagnosis of depression." respects my individuality. My diagnosis, depression, is a part of me; it does not define me. Using stigmatizing language in our discussions can cause people to feel unworthy, isolated, and, worst of all, afraid to get or ask for help. Stigma can make us feel embarrassed and fearful of ridicule, preventing us from helping those needing support.

When I started writing this article, I intended to focus on mental health terms only. As I become more aware and focused on how we communicate, I also find common, everyday sayings and gestures that are stigmatizing. I hear some of these way too often. "We gave them enough rope to hang themselves," "If our call is any earlier, I am going to kill myself," "I will shoot myself in the head if we have four more years of this!", "I will jump off the roof if this line doesn't move." There are so many sayings that are uncomfortable to hear. Let us be mindful and simply find replacements or cut out words like "Kill myself," "Hang yourself," "shoot yourself," and any other terms that cause us to experience unwanted feelings. Being mindful may save someone with mental health challenges from feeling unsafe, experiencing pain, or feeling isolated.

I went to lunch with a colleague who recently started looking for work. He had never read my previous article about my struggles with suicidal ideation and did not know my story. When I asked how the job search was going, he reached his fist over his head. To me, it looked like he was celebrating. "Oh, great!" I exclaimed. He said, "No! I am ready to hang myself!" He then laughed, made the same motion with his fist, tilted his head to the side, and stuck out his tongue. I was surprised at what I noticed. First, gestures, like words, may cause others to experience pain. I am 100% certain I would have done the same before my mental health challenges and before I

understood the impact on others. Second, in our post-pandemic world, depression, anxiety, and suicide are at their highest. I implore you to explore other ways of expressing your emotions, your fears, or making a joke. Words matter. Gestures matter. Our language matters.

What if a word we use today impacts someone tomorrow? YOU change. If someone asks you not to use the word, please support them. There is a reason they are requesting. On the flip side of that, those of us doing the asking could provide an option and not shame those using stigmatizing words. If you cannot offer an immediate alternative, then work together to find one; come to an understanding. If you experience an offensive gesture or hear activating words, please help that person find another way to communicate their feelings.

After reading what I have written here, my wife, Molly, was in a meeting, and someone, said, "Oh, her, she's OCD but in a good way!" Molly used the word "activated" to describe her feelings when she shared her experience. She was stunned, frozen in place. She didn't know how to react. Before she was aware of my concern, she had never experienced OCD, PTSD, and the term "kill myself" other than words people say. Now, she heard it clearly and didn't know what to do. "I wish there were instructions," she told me. Molly was sensitive to not shame a co-worker in front of others, yet, she felt shame not saying something. We know not speaking out gives power to those saying painful and intolerant words and makes it ok for others to use them. Molly knows that their intention was to make a joke about a co-worker's desire to complete tasks with excellence. Molly also now knows it is stigmatizing language and gets to make a choice. With that choice, she has the knowledge and the power to create change.

As I wrote in my previous article, I have been asked often about the consequences of telling my story. Questions like: "Are you concerned that sharing your mental health journey publicly will impact your

business and relationships?” That question is brought to you by stigma. That fear and negativity, that sharing my challenges will bring shame, embarrassment, and even failure. If I allowed stigma and the discrimination surrounding mental health to stop me from sharing my story, I could not help others struggling. I will help more people by breaking that cycle of stigma than I would by sitting in it and hiding who I am. To answer that question: No! I am not concerned. Nothing is more powerful than helping someone and possibly saving a life.

As leaders in entertainment, WE in our community can change the narrative and alter the use of stigma in our industry. Next time you’re backstage, in a production meeting, having a toolbox talk, on a break, or running a crew, WE have a choice to help others identify, understand, and change words of ignorance and cruelty into words of understanding and awareness. Awareness

of others’ feelings and supporting them with kindness will prevent the bullying and victimization associated with using harmful stigma-filled language. Be mindful of your words, and those around you will follow.

I have deliberately chosen the word ignorance in this article to identify people who say and do things without being aware of their actions. Bob is not hateful. He knows using slurs against a race or religion is terrible, yet he was ignorant about the term he was using. Even if the phrase never resonated with him as intolerant, he knows he should not have said those words. We could argue that Bob is innocent and not ignorant, yet it does not matter. We can all be mindful of how others experience our words and gestures.

Mental health conditions are neither funny nor descriptions of feelings or emotions. When making a choice, I love asking, “Is the juice worth the squeeze?”

When choosing the best words and respecting our teammates and loved ones, consider: “Is the laugh worth the intolerant remark?” We can rise above, we can educate, we can learn, we can be mindful, we can be aware, we can support, and we can cause change. We can dismantle stigma in our lives and this industry. One word, one gesture at a time. Who knows... ■



Steven Michelman is co-owner and founder of EPS (Entertainment Project Services, LLC). Steven wants to take this opportunity to thank his family and friends, especially his wife Molly, for their continued

unconditional support. He offers his email, steven@epssolves.com, to anyone navigating their own journey. Please be kind, especially to those struggling.