

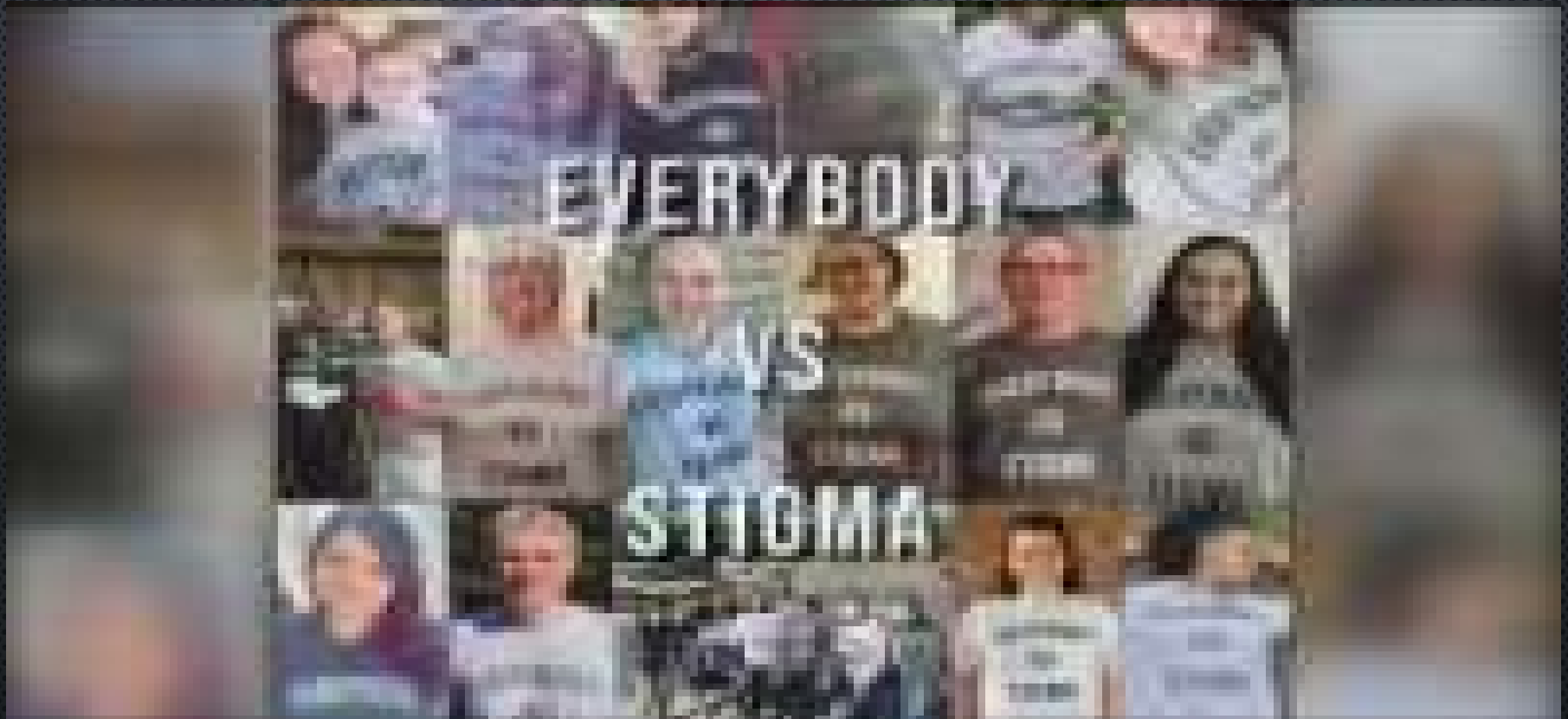
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**-VS-**  
**STIGMA®**

# WHO is Kevin Fischer?

I serve as Executive Director of NAMI Michigan, Director of The Dominique Fischer Memorial Foundation and CEO of EVERYBODY -VS- STIGMA.COM. In addition, I am the Immediate-Past President of CIT International (Crisis Intervention Team), on the Advisory Board of Directors of several behavioral health organizations throughout Michigan, including Governor Whitmer's Suicide Prevention Commission, the Michigan Department of Health & Human Services (MDHHS) Mental Health Diversion Council and Behavioral Health Advisory Council (BHAC), Executive Producer of the Mind Matters with Dr. Michele Show, and others.

# WHY IS MENTAL HEALTH IMPORTANT TO ME?



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# WHY DISCUSS MENTAL ILLNESS?

WHY TALK  
ABOUT  
MENTAL  
ILLNESS ?

Myths About Mental Illness:

**Mental illnesses are  
brought on by a weakness  
of character or faith.**



# WHY DISCUSS MENTAL ILLNESS?

## What Causes Mental Illness?

There is no single cause for mental illness. A number of factors can contribute to risk for mental illness, such as:

- Early adverse life experiences, such as trauma or a history of abuse (for example, child abuse, sexual assault, witnessing violence, etc.)
- Experiences related to other ongoing (chronic) medical conditions, such as cancer or diabetes
- Biological factors or chemical imbalances in the brain
- **Use of alcohol or drugs**
- Having feelings of loneliness or isolation



# WHY DISCUSS MENTAL ILLNESS?

## Mental Health:

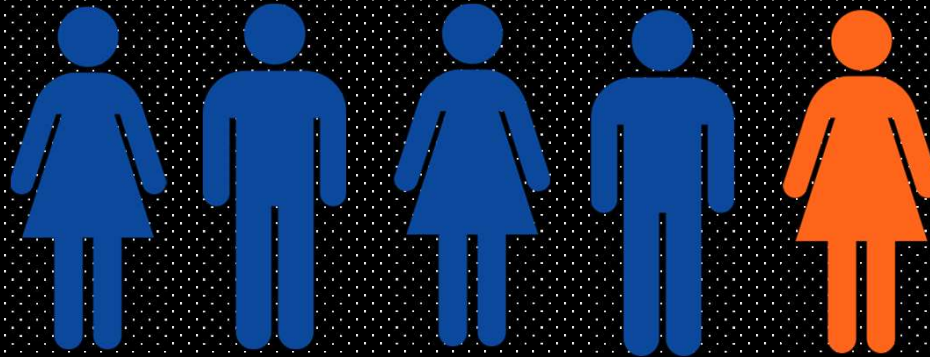
Mental health is an important part of overall health and well-being. Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

## Mental Illness:

Mental illnesses are a product of the interaction of biological, psychological, and social factors. Research has shown genetic and biological factors are associated with mental illnesses, substance use disorders and suicide.

**MENTAL ILLNESS DOES NOT DISCRIMINATE!**

# WHY DISCUSS MENTAL ILLNESS?



1 in 5 U.S. adults are affected by mental illness each year.

1 in 20 U.S. adults experience serious mental illness each year.

1 in 6 U.S. youth aged 6-17 experience a mental health disorder each year.



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# WHY DISCUSS MENTAL ILLNESS?

50%

of all lifetime cases of mental illness begin by age

14



75%

of all lifetime cases of mental illness begin by age

24

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# WHY DISCUSS MENTAL ILLNESS?

**16.5%**

of U.S. youth  
(ages 6-17)  
experienced a  
mental health  
disorder in 2020.

**20%**

of people with  
anxiety disorder  
seek treatment.

**59%**

of students  
report be  
harassed or  
bullied online

**74%**

of students  
identified as  
being stressed to  
the point of  
being unable to  
cope

**19%**

of high school  
students  
seriously  
considered  
suicide in the  
last year.



## WHY DISCUSS MENTAL ILLNESS?

70%

of youth in juvenile justice systems have at least one mental health condition.

20%

of youth in the juvenile justice system live with a serious mental illness.

37%

of state and federal prisoners have a diagnosed mental illness

44%

of local jail prisoners have a recent history with a mental health condition

45%

of adults in the U.S. with a mental health condition received mental health services in the past year.

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# WHY DISCUSS MENTAL ILLNESS?

**11yrs**

average delay  
between onset  
of mental illness  
symptoms and  
treatment

**10.9%**

of U.S. adults  
with mental  
illness had no  
insurance  
coverage in 2019

**55%**

of U.S. counties  
do not have a  
single practicing  
psychiatrist

**18.4%**

of U.S. adults  
with mental  
illness also  
experienced a  
substance use  
disorder in  
2019 (9.5 million  
individuals)

**41%**

of Veteran's  
Health  
Administration  
patients have a  
diagnosed  
mental illness or  
substance use  
disorder

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# WHY DISCUSS MENTAL ILLNESS?

NEARLY

37%

of students ages 14-21  
with a mental illness  
drop out of school.



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## WHAT IS STIGMA?

**STIGMA** is defined as a mark of disgrace associated with a particular circumstance, quality, or person



# WHAT IS STIGMA?

Like mental illness, **STIGMA** does not discriminate. It affects us all, but it does vary by community and culture!

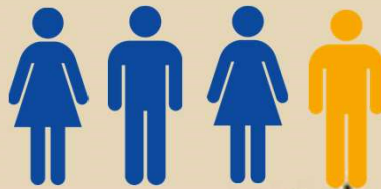


# WHAT IS STIGMA?

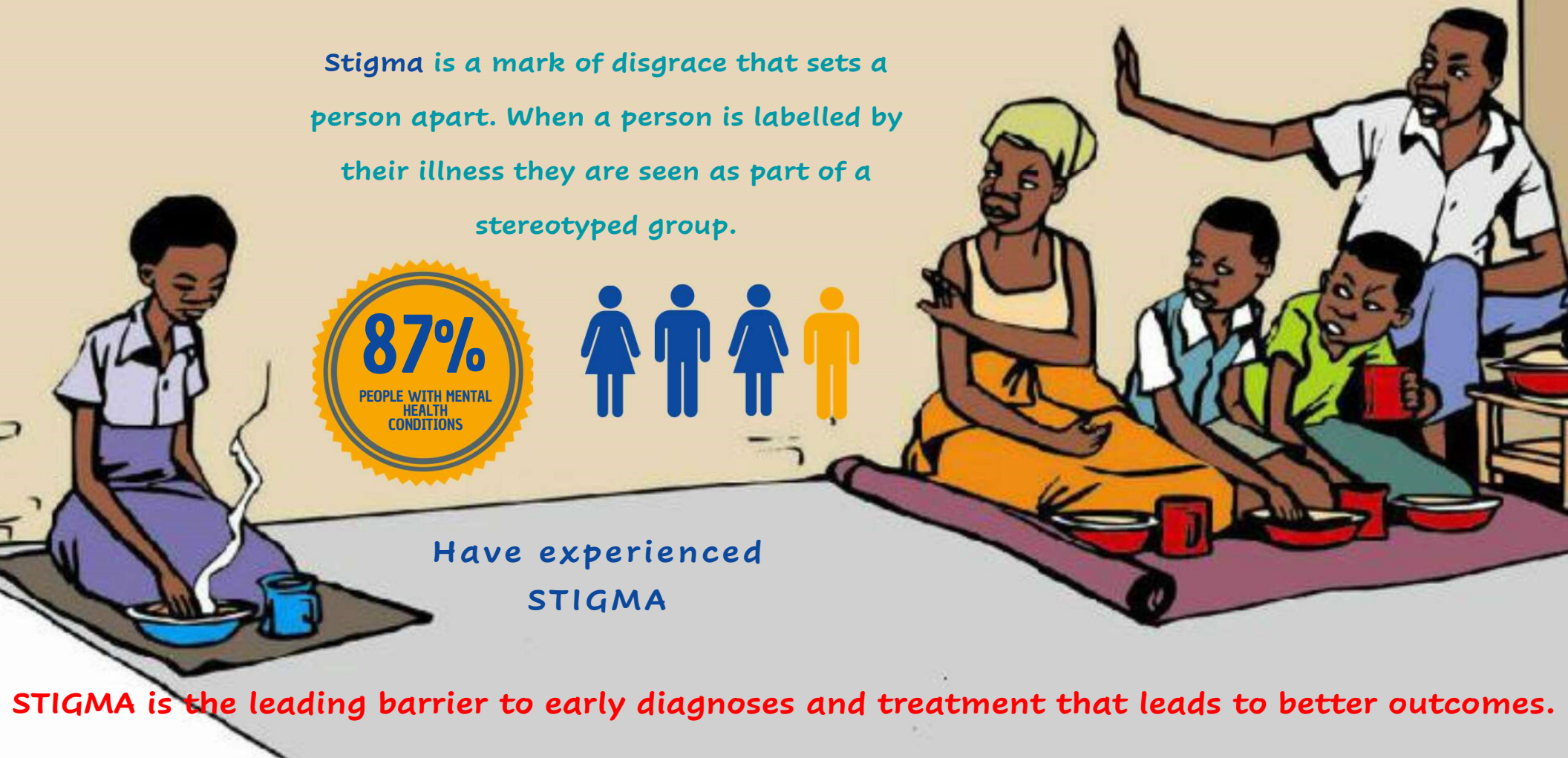
Stigma is a mark of disgrace that sets a person apart. When a person is labelled by their illness they are seen as part of a stereotyped group.

87%

PEOPLE WITH MENTAL HEALTH CONDITIONS



Have experienced  
STIGMA



**STIGMA is the leading barrier to early diagnoses and treatment that leads to better outcomes.**



# STIGMA KILLED MY SON!





# “Racism is a public health crisis!”

“While there is much we need to do to address racism in our country, we must not forget the importance of mental health as we do so.”

“The effect of racism and racial trauma on mental health is real and cannot be ignored. The disparity in access to mental health care in communities of color cannot be ignored. The inequality and lack of cultural competency in mental health treatment cannot be ignored.”

**Daniel H. Gillison, Jr., CEO NAMI**



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Daniel H. Gillison, Jr., CEO NAMI

# “Racial Disparities in Mental Healthcare!”

While rates of mental illnesses in African Americans are similar with those of the general population, disparities exist in regard to mental health care services. African Americans often receive poorer quality of care and lack access to culturally competent care.

Compared with non-Hispanic whites, African Americans with any mental illness have lower rates of any mental health service use including prescriptions medications and outpatient services, but higher use of inpatient services.



## “Racial Disparities in Mental Healthcare!”

- Annual treatment rates among U.S. adults with any mental illness, by demographic group:
  - Asian-Americans: 25.4%
  - Non-Hispanic black or African-American: 39.4%
  - Non-Hispanic mixed/multiracial: 52.2%
  - Hispanic or Latino: 36.1%
  - Non-Hispanic White: 52.4%
- \* there is NO good data for Arab-Americans

# “Barriers to Care”

Physician-patient communication differs for African Americans and whites. One study found that physicians were 23% more verbally dominant and engaged in 33% less patient-centered communication with African American patients than with white patients.

Black people with mental health conditions, particularly schizophrenia, bipolar disorders, and other psychoses are more likely to be incarcerated than people of other races.



# WHY DISCUSS MENTAL ILLNESS?

Suicide

**2nd**

Leading cause of  
death for young  
people between  
10-14.



# WHY DISCUSS MENTAL ILLNESS?

Suicide

**3rd**

Leading cause of  
death for young  
people between  
15-34.





WHY TALK  
ABOUT  
MENTAL  
ILLNESS ?

- Suicide is the 11<sup>th</sup> leading cause of death in the U.S.
- The overall suicide rate in the U.S. has increased by 35% since 1999; by **78%** for African-Americans
- 46%** of people who die by suicide had a diagnosed mental health condition
- 90%** of people who die by suicide had shown symptoms of a mental health condition, according to interviews with family, friends and medical professionals (*also known as psychological autopsy*)
- 78%** of people who die by suicide are male
- Lesbian, gay and bisexual youth are 4x more likely to attempt suicide than straight youth
- Transgender adults are nearly 12x more likely to attempt suicide than the general population

ACCORDING TO THE CDC.....



WHY TALK  
ABOUT  
MENTAL  
ILLNESS ?

## Suicide by the Numbers

49,499 people died by suicide in 2022, the highest in U.S. history (47,646 in 2021). There are almost twice as many suicides in the United States as there were homicides (26,031). In 2022, suicide rates among American Indians, Black and Latino increased, while the overall rate declined. In Michigan we lost 1,485 to suicide.

ACCORDING TO THE CDC.....



# WHY DISCUSS MENTAL ILLNESS?

WHY TALK  
ABOUT  
MENTAL  
ILLNESS ?

## Facts About SUICIDE:

Most people who die by suicide **DO NOT** want to **die**; they just don't want to **live** with the pain they are experiencing at that time!

PRO-ACTIVE MENTAL HEALTHCARE  
"IS"

**SUICIDE PREVENTION!**



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# The words we use matter!

The words you use matter. You can break down negative stereotypes and give people hope by choosing words that are more relatable and promote understanding. This simple but caring approach may help people feel more comfortable and willing to talk openly about mental health and to reach out for support early.

When talking about suicide, consider other meanings your words may have. For example, “committed suicide” implies that suicide is a crime. You can help eliminate the misunderstanding and stigma that prevent people from speaking up and getting support by choosing words that are clearer and more neutral.



# The words we use matter!

## Consider Saying:

Mental health condition

The weather is unpredictable

My daughter has schizophrenia

Person with a mental health condition

Lives with, has or experiences

## Instead of:

Brain disorder or brain disease

The weather is bipolar

My daughter is schizophrenic

Consumer, client or patient

Suffers from, afflicted with or mentally ill

# The words we use matter!

## Consider Saying:

Suicide attempt/attempted suicide

Died by suicide/ suicide death

Took their own life

Died as the result of self-inflicted injury

Disclosed

## Instead of:

Failed suicide or unsuccessful attempt

Successful or completed suicide

Committed suicide

Chose to kill him/herself

Threatened





National Alliance on Mental Illness

**NAMI**

**Michigan**

Every year people overcome the challenges of mental illness to do the things they enjoy. Through developing and following a treatment plan, you can dramatically reduce many of your symptoms. People with mental health conditions can and do pursue higher education, succeed in their careers, make friends and have relationships. Mental illness can slow us down, but we don't need to let it stop us.



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# EVERYBODY-VS-STIGMA!

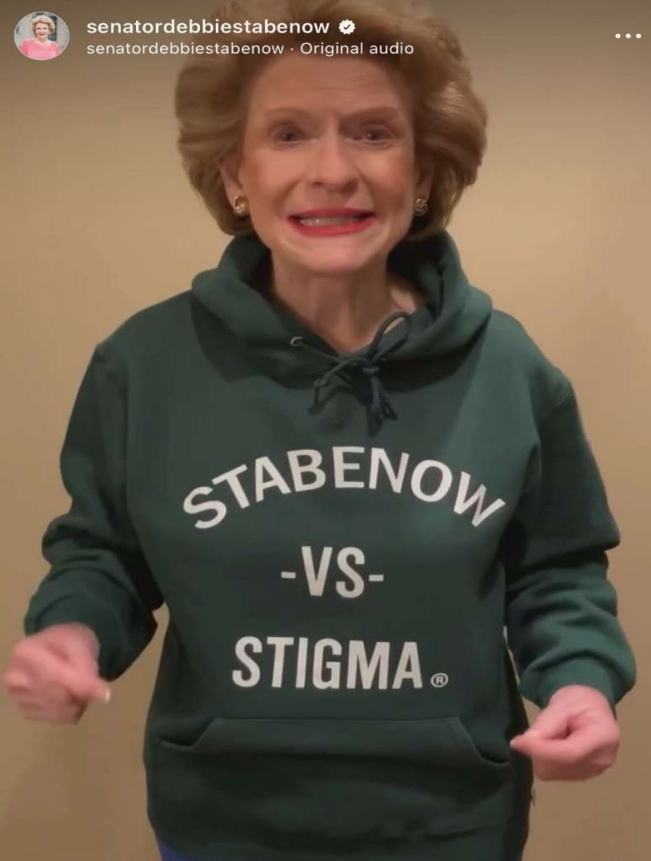
[everybodyvsstigma.com](http://everybodyvsstigma.com)

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# TOGETHER WE CAN DEFEAT STIGMA!



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# WHY IS MENTAL HEALTH IMPORTANT TO ME?





# “Where do we go from HERE?”

## WE EDUCATE:

We must confront and really address systemic racial discrimination and racial disparities in behavioral healthcare.

We must encourage young people of color to pursue careers in behavioral healthcare.

We must educate and advocate in communities of color; eliminating the STIGMA of mental illness.

When people of color are ready to receive behavioral healthcare treatment, we must be treated with dignity and respect as others.





National Alliance on Mental Illness

# NAMI Michigan

**How can YOU support NAMI?**

1. Volunteer/join your NAMI local affiliate.
2. Support upcoming events:
  - 22nd Annual NAMIWalks: August 17<sup>th</sup> @ The Commons in Traverse City
  - September 8<sup>th</sup> @ U of M Ann Arbor
  - September 21st University of Detroit Mercy
  - September 28<sup>th</sup> @ Davenport University Grand Rapids



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National Alliance on Mental Illness

**NAMI**

**Michigan**

## RESOURCES

**National Mental  
Health Crisis Line  
988**

**Text NAMI  
to  
741741**

**NAMI Helpline  
800-950-NAMI (6264)  
[www.nami.org](http://www.nami.org)**

**LGBTQ youth at  
866-488-7386**

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National Alliance on Mental Illness

**NAMI**

**Michigan**

**CONTACT INFORMATION:**

**KEVIN FISCHER**

**CEO of EVERYBODY-VS-STIGMA.COM**

**Executive Director NAMI Michigan**

**Email: [kfischer@namimi.org](mailto:kfischer@namimi.org)**

**[info@everybodyvsstigma.com](mailto:info@everybodyvsstigma.com)**

**Phone number: (517) 853-0951**

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