As many as 42.5 million Americans suffer from mental illnesses, many of which show no obvious signs. CW | Layton Dudley

Editor's note: This story contains frank and honest discussions of mental health issues and UA students. The contents may be disturbing to some readers. The intent of these stories is to raise awareness to the very real and concrete nature of mental illness as a public health issue on university campuses.

In the crowded Ferguson Center, she sits staring at notes saved to her phone she can only vaguely recall writing. She wants to compile them together one day and use them to educate others, but for now, they're a reminder of that overwhelming sense of numbness, of the lies her brain told her and how far she's progressed over the past few years.

“It's like everything is muted, like you're sitting to a chair being held hostage with tape and ropes. Your mouth is taped shut, but you can still hear and see and feel everything,” she reads, her words taking a poetic quality as she describes a mood swing. “The emotions are muted, just a little blurry. They're farther in the distance instead of in your face. I can feel them underneath, but I'm helpless. There's nothing I can do. It's like being paralyzed.”
Another note is full of nonsense, words that don't connect like flashlight and phone booth, repetitions of “numb” over and over.

“I have nonsense words coming through my mind. It's just noise and syllables,” she said, unsure of why she wrote them down.

On her arms among faded scars is a diagonal cross. Sometimes, she'll stop and tell people about the tattoo and the scars—about the nights she cut herself or when she burnt her arm with a cigarette at a friend’s house or the time she repelled from a parking garage and broke her ankle. She wears her old wounds like a badge.

“You're so numb, and you feel something, and you see something,” she said. “You feel like you're getting things out of your body.”

When she was in high school, Catherine Reynolds, a junior majoring in psychology, was diagnosed with bipolar disorder. According to the National Institute of Mental Health website, bipolar disorder is a brain disorder that causes unusual shifts in mood, energy, activity levels and the ability to carry out daily tasks. The disorder often starts in someone’s late teens or early adult years, with almost half of all cases starting before age 25.

“It was one of the most liberating things because there was finally a name for what I was going through,” Reynolds said. “A lot of times I thought it was all in my head because I couldn’t understand how I could yell at my mom and cuss her out and then be fine.”

Reynolds is just one of many Americans who have a mental illness. According to data compiled by the Substance Abuse and Mental Health Administration, 42.5 million Americans suffer from mental illnesses like depression, schizophrenia and bipolar disorder.
“If they have something like this, they’re going to have to go to a clinic or something and have it diagnosed and treated,” said Dr. James Dilday, a psychiatrist at Premier Psychiatry. “At least addressed in some fashion. It depends on the severity of the disorder, how disabling it is.”

Beverly Roskos-Ewoldsen, a cognitive psychology professor at the University, said mental illnesses are caused by a chemical imbalance or the wiring in the brain affecting a person’s memory and ability to function.

Reynolds has to be aware of her emotions and environmental stressors, constantly questioning whether she’s acting in a rational way. Once, she didn’t hit a ball during a softball game, causing her to freak out, try to cut herself and wind up hospitalized, but such occurrences are in the past.

If she didn’t tell people, many would never know Reynolds suffers from bipolar disorder. When she wakes, she takes four different kinds of antidepressants. Roskos-Ewoldsen said certain medications can help, but there’s no rule book suggesting what a person should take. Finding the right cocktail can take years of trial and error. A bad reaction once caused Reynolds to have racing thoughts and become so drowsy she had to pull over while driving.

Reynolds studies addiction and how drugs affect the chemical makeup of the brain. For class, she’s attended the Alcoholic Anonymous meetings held on campus and wonders why there aren’t accountability partners for the mentally ill, why there aren’t on-campus support groups so they don’t feel alone and crazy.

But Reynolds is not alone in her struggles. During her sophomore year, she became friends with Hannah, whose name has been changed for privacy. The two bonded over their mutual struggles. Hannah suffers from anxiety and depression. In a way, Reynolds acts as a mentor for Hannah, though she doesn’t consider herself one, helping Hannah with the steps of facing her problems. They both see the same counselor, and they’re both doing better nowadays, but that wasn’t always the case.

Hannah feels embarrassed. She doesn’t like to talk about her wreck, and she doesn’t want people to know because she’s afraid they’ll see her differently or weaker. During her extreme lows, she’d feel like her brain was attacking her, racing thoughts of self-degradation such as, “You’re a loser. You don’t deserve to live.”

“I would feel like a 16-year-old hormonal girl. Hannah said, “I could drop a pencil, and be like, ‘AHHH, I hate my life today,’ ” “People would handle situations so much better. It would knock them down, but they would get back up.”

Her depression got worse. Tired of the thoughts racing in her head and the feeling of being down, Hannah rammed her car into a tree with the intention of killing herself. She was airlifted to the hospital at The University of Alabama at Birmingham. After her accident, the thoughts only intensified.
“I was so embarrassed about it. Afterwards, it kind of got worse,” she said. “I’m such a weak person. I can’t believe I did that. I knew I was f--ked up in the head. I’m really messed up.”

According to the American Association of Suicidology, 4,822 youth age 15-24 committed suicide in 2011. More people die by suicide each year than homicide. Hannah’s therapist told her that one in four people think about suicide, a statistic that made her realize she wasn’t alone in her struggles.

“It sucks that I can’t open up to people and be honest about my whole past because I’m worried because they’ll think I’m weak,” she said.

Roskos-Ewoldsen said depression is caused when neurons don’t fire in the brain, either because not enough of the neurotransmitters dopamine or serotonin are released or because a neuron doesn’t pick them up. Certain people can be genetically predisposed to depression.

While Reynolds is in a much better place, she still remembers the semester that both her and Hannah had to medically withdraw from the University. She still remembers the car wreck and the conflicting feelings of guilt and fear. Reynolds’s mother had been driving, the three coming back from What-A-Burger to Reynolds’s home in Texas when a car t-boned them, careening into their side. Hannah was ejected from the car, fracturing her hip in three places and cracking open her skull. She only remembers headlights then the hospital, but Reynolds remembers it all.

The experience was traumatic. Reynolds was scared to go back to school. She was scared of what she might do. She started cutting herself again. She felt guilty, an irrational shame because her mother had been driving, because they were in her neighborhood when the accident happened. It upset Reynolds even more when Hannah medically withdrew for the semester. She said she felt like her soul was being sucked from her body.

“That sparked me going into a psychotic bad point. I withdrew for psychological reasons,” Reynolds said. “It changed both of our lives for the better.”

Deciding she owed it to her friends and herself to get better, Reynolds enrolled herself in an outpatient group therapy program in Birmingham.

“It was hard. At first, I was sad,” Hannah said. “At first we were hanging out everyday, and then she was gone from 7 a.m. to 4 or 5. It sucked not having your best friend there. Every time she came home she would take a nap. Some days would be bad. You want to help, but don’t want to bring up what she’s going through. Some of those days were really scary. She was just in her room.”

But there were good days, too. Hannah would act like a proud mother when Reynolds would bring home her art work and talk about the progress she was making in therapy. A woman in therapy who hasn’t cut herself in ten years gave Reynolds a stone to rub on her wrist if she ever felt like cutting herself again.

http://www.cw.ua.edu/article/2016/02/the-scars-remind-me-living-with-long-term-mental-illness
Reynolds and Hannah want to end the stigma regarding mental illnesses. Just because they're suffering from a disorder, they don't want to be defined by it. Hannah doesn't like to tell people she goes to therapy because of fear that their perception of her would change. She remembers an encounter she had with her brother about her disorder.

“You’re not going to be taking this medicine forever,” he told her.

“I kinda think I am,” she said with a laugh. “The chemical imbalance in my head isn’t going to go away. I’m not working toward not being on medicine because I have a chemical imbalance in my head, and it’s probably going to be that way the rest of my life.”

At his office in Northport, Dilday sees around 90 clients. While he believes the stigma has lessened over time, Dilday said the idea of a mental disorder is still stigmatized socially and culturally in America. For Roskos-Ewoldsen, the stigma hits close to home because her son was diagnosed with bipolar disorder. Turning on the news and seeing mass shootings presents a grim reality of how the world views mental illnesses and a darker ‘what if.’

“For me personally, I see these mass shooters that have mental illness that’s not treated or don’t want to be treated,” Roskos-Ewoldsen said. “I think that could have been my son if we hadn’t found it and got him to the right doctors and the right medicine.”

Reynolds wants to create a world where people won’t be afraid to talk openly about their problems, where less people would feel crazy because they are alone. She’s open about her struggles, about the fact that she goes to therapy or takes medication and the scars on her arms, but she insists she’s just a normal college student like everyone else.

“I do tell people about the struggles I’ve been in, but I make sure to tell them I’m normal. I’m living a great life,” she said. “People with mental illnesses aren’t to be pitied. They’re just like everyone else. Everyone has things in their life they have to deal with, and that’s just an aspect of that.”