THE CATALYST

When I Tell People About My Mental Illness, This is What Happens

If you wonder whether or not to share your story, read on. I've experienced similar quandaries.

By: Jessica Ward-King | Posted: December 9, 2025

For 15 years, I hid my mental illness from the world, terrified that if anyone should find out my secret, my life as I knew it – the family I had fought for, the friends I had surrounded myself with, the career I was building – would be over.

My self-stigma and shame were overwhelming, thinking that living with mental illness made me broken and defective. My fear of stigma from others was enormous, fearing prejudice and discrimination that would inevitably (in my mind) come from any disclosure about my bipolar disorder.

When a student at the school where I was working died by suicide, and the school's answer was to ask the school community not to talk about suicide "out of respect for the family," I saw the effects that silence around issues of mental health and mental illness can have. The students got the message that mental illness and suicide are not acceptable and should be hidden. I knew I had to do something. So, I began to share my story – my struggles as a student, wrestling with suicidal ideation, undergoing treatments like electroconvulsive therapy, medications, and talk therapy – in the hopes that my sharing could help restart the conversation at that school and make mental illness part of the conversation.

Fear of disclosure

I was terrified to share my story. I didn't know how my colleagues, my superiors, and my students would take my admissions of living with a serious mental illness. Would they lose respect for me? Would they choose to distance themselves from me once they knew? But opening up was also a huge weight off my shoulders – I would no longer have to hide the struggle that was such a huge part of my existence. I could finally bring my whole self to work, where I spent one-third of my life. Sharing my story was not without its risks, but it also stood to bring great benefits.

The first time that I told my story, I was met with overwhelming love and support from my community. It did indeed start the conversation in a meaningful and productive way. It was my students who dubbed me the "StigmaCrusher," and after I got that first taste of success in reducing stigma and inspiring change, I couldn't stop. It felt so empowering and freeing to be open about my mental illness. It still does, every time I share my story.

When I share my story in person, I tend to get a lot of support and very little challenge. But sharing it in print (particularly online) opens me up to a lot of keyboard warriors who do not hesitate to share their uninformed views of my experience with me. As difficult as it is, the best

thing to do is to ignore these prejudiced and ignorant comments as baseless. Even as I try to educate and crush stigma, there are some comments that are just not worth replying to. My lived experience is just that – mine, and I am the expert.

Contact – having genuine interactions with a person with lived experience of mental illness – is the single best way to combat stigma, according to research, and so sharing my story is necessary. But it is not for everyone, every time. In the 12 years that I have been speaking and writing about my experiences with mental illness, I have received my share of negative, stigmatizing, and ignorant feedback. Here is a sample of what I regularly deal with, and how it affects me:

Common responses

“You’re just a slave to Big Pharma.”

Big Pharma is a bit of a boogeyman for people with lived experience of mental illness. In the current medical context in the Western world, medication is the first-line treatment for most mental illnesses, often first prescribed by a family physician with no specialized training. It is the first, best hope for feeling better, but it comes with unwanted side effects and long wait times to see if it is going to work or not. The decision to try medication is often fraught (I know it was for me) and is a defining moment in the struggle with one’s mental health, and so this comment (and other criticisms around medication) can be difficult to take.

“Psychiatry is a sham, and you are just buying into it.”

I get this feedback a lot. There is a whole antipsychiatry subculture that comes out of the woodwork when I share my experiences with treatment for mental illness. When I was new to telling my story, I spent a lot of time and energy justifying the project of psychiatry and my place in it as a patient, but for the antipsychiatry crowd, these justifications fall on deaf ears, so I have given up.

“ECT (electroconvulsive therapy) is barbaric, and you are an idiot for letting them do that to you.”

ECT caused permanent brain damage in me, unfortunately, but it also saved my life. I used to spend a lot of time trying to educate commentators about the modern use of ECT in psychiatry, but now I realize that I am never going to change their minds and just let folks have their say.

“You’re crazy, and they let you adopt a baby?? Isn’t that unfair to the child?”

This is the comment that hurts the most, because my mental health was part of the equation when we were adopting my son. I chose not to carry a child because I did not want to risk passing my bipolar disorder on. So, when we decided we wanted to have a child, adoption was the natural choice. Throughout the process, I was assessed and reassessed for fitness due to my mental illness. I had to have written attestations from my psychiatrist and my therapist stating that, in their opinions, I was fit to parent. And like any parent, I constantly wonder whether I am doing it well (because children do not come with a manual). So, this is a bit of a tender spot for

me, and when commentators poke at it, it is raw. Parenting is an ever-present topic of conversation in my therapy sessions because it is such a big part of my life, but I also counter these types of comments by intentionally spending time with my son and seeing what an amazing kid he is.

“If you are working through your episodes, then you are obviously not that bad. There are a lot of people who are worse off than you.”

I have always been very “high functioning,” which for me looks like being able to continue to work (or study) even when I am very unwell. I completed my PhD in between hospitalizations and ECT treatment. I worked through ketamine therapy and only took two weeks off when I had my deep-brain stimulator implanted. I struggle mightily, but I get the accommodations I need to still manage to do what I need to do to get through at work, even if I collapse into a heap as soon as work is done. Even as I write these sentences, I am feeling the need to justify myself. Having someone – particularly someone who doesn’t even know me – judge how badly I am or am not doing is hard, especially when I am not doing well. There is always going to be someone worse off than me, but that does not negate my suffering in any way. (Also, it’s not a competition).

Swift response

I have been fortunate not to lose friends or employment after I disclosed my mental illness. People do, but I have not. But I have had to grow a bit of a thicker skin to ward off the stigmatizing and ignorant comments that, unchecked, can worsen my mental health. I have had to strike a balance. In the wise words of Taylor Swift – “haters gonna hate…I’m just gonna shake it off.” Most often, my story elicits others to share their own or their loved ones’ experiences of mental illness and prompts good and well-meaning questions about my lived experience. Most people are kind and genuinely curious. It is an overall positive experience, sharing my story, and it has done a lot of good.

Resource: Considerations When Sharing Your Story of Mental Health Challenges.

Resource: Mental Health: Common Myths and Misconceptions.

Resource: Suicide Prevention Tools.

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