

Teach the three Rs ... plus P for psychology

Children need to know how their minds and feelings operate, explains a Pittsburgh psychiatrist

By Marnin E. Fischbach

The goal of our education system is to equip us with the skills and information essential to living an enjoyable and worthwhile life. To this end, we are exposed early on to the three basic disciplines of reading, writing and arithmetic — all of which are vital for us to cope in society and to continue learning.

In my experience, one educational track just as vital as the “three Rs” has been omitted from our educational system: psychology — a basic understanding of how the mind and emotions work.

It is estimated that half of Americans suffer from diagnosable and potentially treatable mental, emotional or behavioral symptoms. But only half of these individuals ever seek help and, of those who do, 70 percent are treated by non-behavioral physicians whose net effect is estimated, unfortunately, to hover near zero. Only 30 percent of those in need of behavioral health care ever see a mental-health practitioner.

People suffering from quite treatable mental symptoms commonly say they never defined them as aberrations or had any idea that they could be treated successfully: “I’ve been like this all my life. This is what I thought was normal. This has always been me!”

Given the ubiquity of psychological problems and the paucity of care for them, it is unfortunate that most Americans have so little understanding, and therefore so little control, over their own mental and psychological health.

Many years ago, a 23-year-old woman came to my office, dragged in by her mother. She was sweating, flushed and obviously extremely anxious.

“Are you having difficulty with me looking at you?” I asked. She nodded yes.

I eventually discerned that the young woman suffered from social phobia, an anxiety disorder characterized by excessive self-consciousness and avoidance of

social interaction. Indeed, she had not been out of her house for seven years, except to get supplies at a convenience store at 2 a.m. when she would encounter the fewest people.

I conducted all of her treatment by telephone until her anxiety had abated enough so that she would sit with me in person. I was shocked that this young woman had lost nearly a third of her developing life in part because she was unaware she had a “condition.”

Her treatment was, fortunately, successful. One year after she began medication therapy she was married and had moved out of state with her husband. Still, nothing was going to bring back those seven lost years.

Another patient with the same diagnosis came to me with great resistance at the behest of his wife. He was a brilliant educator earning far less than his job and performance would merit. When I inquired about his low income, he explained that he'd been unable for his entire professional life to ask for a raise, owing to his extreme self-consciousness.

Eight months later he came to see me for the last time. He no longer hesitated to express his point of view and had landed a new job as manager of a brokerage firm. His income had virtually quadrupled. He also realized that he'd been suffering symptoms of social phobia his entire adolescent and adult life. Timely treatment might have spared him 20 years of professional and financial stagnation, not to mention personal torment.

I've seen scores of middle-aged and older patients who come for treatment with depression, bipolar disorder or ADHD and are largely symptom-free within weeks or months of treatment. Once they improve, these patients all say, “I feel wonderful. Why didn't I get say, “I feel wonderful. Why didn't I get treatment ages ago?” Then they follow up with grief therapy to come to grips with the 20 lost years of dysfunction and pain they had suffered needlessly.

Eighteen percent of Americans will suffer a “major depressive disorder” during their lifetimes, 13 percent will suffer social phobia, 4.4 percent will develop bipolar disorder. Given just these numbers, which represent a small fraction of all psychiatric conditions, it seems reasonable that our education system should include some formal training in the recognition of these disorders, their underlying symptoms and the possibilities of treatment.

A behavioral-health track in schools could begin in kindergarten by teaching children how to describe their various emotions (even many adults, surprisingly, cannot do this or do so with little facility). Kindergarteners might also learn to identify the other two pillars of the psychological triad: thoughts and behaviors.

Children could then advance to role-playing appropriate, adaptive ways to interact with one another and adults, with emphasis on how to express their emotions, especially negative emotions, in ways that will be understood and

respected by others instead of causing unintended reactions.

Later grades could emphasize more complex interpersonal interactions, including the role-playing of real-life, school-based scenarios. Adolescents, who are for the first time developing the capacity for abstract thought, could be introduced to internal psychological phenomena such as defense mechanisms, mental conflict, impulsiveness, the “self,” transference phenomena, dreams and their functions and meanings, catharsis, grief and conflict resolution.

The final years of high school could include an introduction into the major psychiatric disorders and the biology of the mind.

Reading, writing and arithmetic undoubtedly are crucial to developing individuals prepared to cope with — and thrive in — a dynamically changing world. Yet none of these subjects has the moment-to-moment importance of understanding how our minds and feelings operate. Tragically, this vital fourth pillar of education has been relegated to one of many “majors” available to college sophomores.

The importance of psychological education is amplified in our techno-centric world. Technology is lionized in business, education and entertainment. We spend ever more time relating to our electronic devices, which limits our real-life interpersonal connectivity. We will never learn what we are all about from a computer or a robot.

For ourselves, our nation and our world, let us arm students with what they probably need most to become fulfilled persons and contributing members of society: an education in how their own minds work.