

By Charles G. Hoogstraten

Fighting through the darkness

During the fourth year of my Ph.D. program, I found myself walking through the door of my university's counseling center, seeking help for a dangerously strong urge to commit suicide. With the help of the compassionate people in that office, I pulled through the immediate crisis. Long-term counseling helped me understand it as the climax of a tendency to clinical depression that has plagued me for much of my life. It has been many years since I was a danger to myself. But ongoing low-level depression, the sense that I don't deserve my success, and periodic more serious bouts of psychological disease still haunt me, even as I have done work that I am proud of.

My career in academia, with its flexibility and self-direction but also its daunting stress levels, has been both a blessing and a burden in my battle with depression. Depression, in turn, has not made it any easier to meet the challenges of academic life. I am fortunate to work in a department and at an institution that see younger faculty members as individuals to be invested in and supported. But the cost of depression to my career—in students' manuscripts that sat on my desk too long, in editors disappointed by unfinished reviews, in productivity gaps that give funders pause—has been real.

Every individual's experience with mental illness is unique. Nevertheless, I will hazard sharing some of my own hard-won lessons with others who find themselves grappling with their own recalcitrant minds.

FIRST AND FOREMOST, GET HELP. If you encounter a problem in your research that you lack the expertise to solve, you don't hesitate to collaborate. Taking care of your mind is just the same. There are talented experts out there, and you need to take advantage of them. I have benefited enormously from group and individual cognitive behavioral therapy. I know others who describe going on the right antidepressant as "when the lights came on." What works best is different for everyone, so be persistent.

Many health insurance plans have good mental health coverage, and most universities have in-house counselors familiar with the particular stresses of academic life. The phone number for the U.S. Suicide Prevention Lifeline is 1-800-273-8255. If you need it, use it. Today.

STEP OUT OF THE CLOSET—THOUGHTFULLY. I was loath to disclose my struggles to my advisers because I worried that



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openness would limit my future opportunities. I have since seen that advisers often realize that something is up even if you don't tell them, and—depending on the individual—things may go better if they know what is happening and that you are working to deal with the problem. Now that I am a faculty member, I have been surprised and gratified at my colleagues' compassionate, supportive responses whenever I have chosen to discuss my illness with them. Experiences like these help lift the shame that is a key part of the depressive cycle.

That said, there is certainly a time and a place for confidences. It may be wise to start by telling a trusted mentor who is not immediately responsible for evaluating you. Look for a

group of peers who face similar challenges and can provide mutual support. Learning that you share your experiences with people you respect can be the most powerful tonic of all.

REALIZE THAT THE ROAD IS LONG. One of the worst mistakes I made was repeatedly assuming that, when I was feeling well and productive, I was home free—only to be caught flat-footed when my depression flared again. Staying ahead of the situation by keeping a support network in place, even across the frequent relocations that are part of an academic's life, is critical.

ALWAYS REMEMBER THAT YOU ARE NOT ALONE. There are more people who care about you and want to help you than you realize, and more people who have fought the same fight than you can imagine. ■

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