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Disclosure Blues: Should You Tell Colleagues About Your Mental Illness?



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A few years ago I was thumbing through my latest teaching evaluations. At that point I'd been teaching college-level writing for many years, and reading evaluations was nothing new. Mine were typically strong, and I wasn't expecting anything different that semester.

But then I came across the single worst teaching evaluation I'd ever received. In retrospect, the student's tone resembled a toddler's temper tantrum. But at the time, the words struck in a very sensitive place and left me reeling: "Prof. Pryal was often emotionally eratic," the evaluation read (misspelling and all).

In the pile of 40 evaluations, only Mr. Eratic mentioned my emotional misbehavior. But I felt stripped bare by the words. As a contingent professor, teaching evaluations are the near-

exclusive criteria for job retention. Most days at work, I feel what many academics off the tenure track feel: a persistent, low-grade anxiety about my lack of job security.

But I feel anxiety for another reason as well. I have a psychiatric disability—that is, a mental illness—that I've kept secret since I was diagnosed at the age of 21. So when the teaching evaluation called me "emotionally eratic," I feared that my supervisors would believe the words. And, despite all evidence to the contrary, I feared that Mr. Eratic might be right.

Mostly I feared that everyone at work would learn about my secret disability, and that I would get fired because of it. I feared I would be seen as unreasonable, irrational, and therefore unable to do the work required of a professor. Because of my disability, my career would be over.

Of course, my academic career didn't end with Mr. Eratic's course evaluation. I showed it to the director of my writing program, who pointed out the toddlerish tone and discounted the entire document with a chuckle. I chuckled too, nervously, and went on my way.

It's been years since that course evaluation, but I've never forgotten it. I tucked it away, along with my secret disability, until recently. Now, I've decided to take a leave of absence from teaching and to start writing this column. I've decided to start coming clean, so students like Mr. Eratic won't be able to hurt me any more. (I'm lucky that my disability is invisible enough to allow me to pass as non-disabled. Not everyone has this privilege.)

Academia has had its share of mental-illness disclosure stories. Famously, there is that of <u>Elyn Saks</u>, a professor of law, psychology, and psychiatry and behavioral sciences at the University of Southern California. Saks, who has publicly discussed her schizophrenia in <u>a 2007 memoir</u> and <u>a TED talk</u>, knows about what it means to go public.

Saks points out the most obvious reason to disclose one's mental illness in the academic workplace: "the psychological benefits of not having a secret and being able to be open." But she also writes about the many drawbacks of disclosure: "There is a tremendous stigma, still, around mental illness. People may believe, consciously or not, that you are unreliable or even dangerous, and they may fear you." Disclosure, she adds, may "have a big impact on your work life and your prospects for tenure."

Saks's advice is written from the position of a tenured professor with great academic privilege. For example, she gives the following advice to professors with mental illness: "Schedule your courses carefully. If your meds make you tired in the morning, try not to teach morning classes. Try to choose courses that you like to teach—you will do a better job and feel less stressed." As any adjunct knows, we often choose neither our courses nor our meeting times. Contingency is rarely good for your mental health.

Lisa McElroy, a tenured professor of law at Drexel University, wrote for *Slate* last year about her life as a professor with severe anxiety disorder. McElroy began her academic career off the tenure track, in a stress-inducing, insecure job much like mine. Halfway through her teaching career—as the sole breadwinner for a family of four—she took a job on the tenure track. To her great relief, six years later, she earned tenure. She recognizes the incredible privilege tenure grants her." You see, now that I have tenure, I am one of the very, very few people living with mental illness who does not have to worry about what might happen at work tomorrow," she writes. "I have a job for life."

I asked McElroy if she'd ever considered disclosing her disability prior to earning tenure. "Very few people in my life knew about my disability," she told me. "I was incredibly afraid of how I would be perceived if I told others. Before I got tenure, I just didn't feel safe."

But once she earned tenure, she felt a responsibility to speak on behalf of others who weren't so lucky: "Finally, I realized that many are truly prevented from disclosing because they don't have job security. Once I had tenure, I wasn't. I thought that I had a responsibility to speak out for those who couldn't." McElroy no longer worries that others will discover her disability—which is a big relief—but she still can "feel the panic in professional situations." Disclosure isn't the same as a cure.

For every Saks or McElroy, though, there are many more academics who choose not to disclose their disabilities. I reached out to colleagues who have chosen to keep their disabilities secret, asking them if they have any advice for others. They all expressed a strong fear of being discovered, even despite my assurances that I would treat their words with the utmost privacy. Most of these folks are contingent professors.

One professor who teaches in a full-time contingent position at an R1 university said she would only disclose her mental health issues "under subpoena." She believes that disclosing would hurt her job security because "contingent faculty can be so easily terminated." In her opinion, contingent—and even pre-tenure—professors simply don't have "the luxury to volunteer stigmatizing personal information."

"They hired you for your mind," she told me. "Why would you volunteer that there's

something wrong with it?" (She was quick to point out, though, that she doesn't "actually believe that a psych disability necessarily means there is something wrong with your mind," just that other people can be "thoughtless.")

One contingent humanities professor at an R1 university noted that "some behaviors—such as obsessive-compulsive tendencies and social anxiety—are expected and even praised as the

hallmarks of a serious thinker." She told me that she might even "joke about my 'neuroses' with colleagues with whom I am personal friends, but I will very rarely discuss (and certainly not in its entirety) treatment I have sought for these 'neuroses."

Furthermore, she never discusses more serious mental health issues, such as medication or depression, because of the stigma that tends to accompany them. Although this stigma is common everywhere, she told me, "in academia, one's brain is supposed to be the most essential asset one has."

Speaking with my colleagues, reading their words alongside McElroy's pre-tenure fears, remembering how anxious I felt reading the teaching evaluation that labeled me "emotionally eratic"—it's hard for me to suggest that graduate students, contingent faculty, or pre-tenure faculty disclose their mental illnesses to their academic colleagues. We are, in academia, often still devoted to the mythos of the good man speaking well, the professor as bastion of reason, the *cogito ergo sum*.

However, as McElroy told me, "every faculty is different." Reaching out in private to someone you trust to get a feel for the culture around you might help you make the best decision. And as Saks's and McElroy's stories—and my own—have shown, living out in the open has its benefits. Do your research. Figure out what feels safe to you, and act accordingly.



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