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Men are sad in silence

By John Head
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On Thursday, Atlanta's Morehouse School of Medicine hosts a screening of "Men Get Depression," a documentary being aired on public broadcasting stations around the country this month. As one of the men featured in the film, I've been asked if it was difficult to do — to be so public about my struggles with depression. The asking of that question shows why the documentary and other efforts to get men to open up about depression are so important.

The public perception that it should be difficult for a man to speak about depression and the fact it is difficult for so many men keep the majority of us from getting effective treatment for an illness that affects almost 20 percent of Americans during their lifetimes. We see clinical depression as a woman's complaint. Research seems to bear this out, with studies consistently showing that women are twice as likely to suffer from depression as men. Yet our refusal to seek help means we pay a higher price. Men are four times more likely than women to die from suicide, and suicide is a reliable marker of untreated severe depression.

Of course, men with untreated depression cannot limit the suffering to themselves. We're less productive at work. Relationships suffer, with the closest — with our families — facing the greatest risk. And our ability to make much-needed positive contributions to our communities is diminished.

If you want a prime example of the toll our society's "don't ask, don't tell" attitude toward men and depression is taking, look at the struggles of our military as it tries to deal with the mental health problems veterans of the Iraq war are facing. Just as the military was unprepared for the number of troops who would survive wounds and return home in need of treatment and rehabilitation, the number of those needing mental health care due to brain injuries or exposure to the trauma of war was not anticipated.

But while the military knew it couldn't ignore the "physical" injuries, it often tried to do just that with injuries to the psyches of fighting men and women.

Eventually, the lack of mental health care and the deplorable conditions in which some mentally ill soldiers received treatment became public knowledge. Both Bush administration officials and military leaders promised immediate change. Mental health care would be available to soldiers, they said, and any barriers that might prevent the troops from seeking help would be removed.

But months later there have not been enough changes in attitudes or actions to address the problem. The

instinct to ignore or deny persists. For example, after the Department of Veterans Affairs told CBS News that there were 790 suicide attempts among vets last year, the VA's head of mental health said in a hush-hush internal e-mail that the real number was an estimated 12,000 attempts.

And while high-ranking officers say they have created an atmosphere in which their troops can get mental health care without fear, a recent survey for the American Psychiatric Association found that of the 32 percent of Iraq and Afghanistan veterans who said they suffered psychological problems, 60 percent said they didn't seek help because doing so would harm their careers.

Chalk up part of the problem to bureaucracy or the slow pace of moving change down the chain of command.

But we also should acknowledge something that's ingrained deep in the military's macho male culture. It is the idea that men don't break mentally. Real men don't get depression. Real men pull themselves together and get on with it.

These attitudes about men and depression are not confined to the military. They are widespread, and so are the damage they do. We can no longer consider suffering in silence a male attribute. It's only when the silence ends that the healing begins.

> John Head, a former Atlanta Constitution editorial board member, is a writer living in Berkeley, Calif. His most recent book is "Black Men and Depression: Saving Our Lives, Healing Our Families and Friends."

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