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My schizophrenia has not gone away. I still become psychotic, as happened in class that day in 1991. Today my symptoms, while not as severe, still recur and I struggle to stay in the world, so to speak, doing my work. I have written about my illness in a memoir and much of the narrative takes place after I had accepted a tenure-track appointment at USC.

Barring a medical breakthrough of Nobel-Prize-winning proportions, I will never fully recover from schizophrenia. I will remain on antipsychotic medication and in talk therapy for the rest of my life. Yet I have learned to manage my illness.

[There] are steps that everyone with mental illness should take. First, learn about the illness you have—the typical signs, symptoms, and course. Many excellent sources are available. You may want to start with the Diagnostic and Statistical Manual of Mental Disorders, [DSM-5] Psychiatric textbooks, e.g., Kaplan and Sadock's, can be helpful. I have also discovered excellent lay accounts of mental illness.

Second, understand how your illness affects you. What are your triggers? What are your early warning signs? What can you do to minimize your symptoms when they worsen—e.g., call your therapist, increase your medication, listen to music, exercise? Try to devise some techniques for your own situation. Some colleagues and I are studying how a group of high-functioning people with schizophrenia manage their symptoms. You are in the best position to determine what works for you.

Put a good treatment team in place. You need a therapist you can trust and can turn to in times of difficulty. Does he or she respond if you call in crisis?

The same is true of a psychopharmacologist. Make friends and family members part of your team.

Sometimes your team can see early warning signs before you can. For instance, my closest friend, Steve, and my husband, Will, often identify when I am slipping. Will says I become quieter in a particular way that signals all is not well. It's a blessing to have such people in your life. Seek them out.

We also need to put a face on mental illness. Being open about one's own illness will probably do more good than all the laws we can pass.

My own "outing" of myself was a bit of a risk, but has turned out well. I am glad and relieved I no longer have to hide. And my story seems to be meaningful to people—it has helped people understand mental illness more and perhaps has led to a decrease in the stigma. I was lucky in that my law school accommodated my teaching needs without my having to invoke the ADA. My colleagues are supportive, and I no longer feel ashamed about needing their help.

Perhaps most important: Seek help when you need it. Mental illness is a no-fault disease like any other, such as cancer or diabetes. Help is available, but you need to ask for it. Don't let the threat of stigma deter you. You shouldn't have to suffer.

And you shouldn't allow mental illness to stand in the way of the wonderful contributions you are poised to make to your students and to your field.

Thought Question: What are the important components of Elyn Saks's treatment plan? How do they apply to other psychological disorders?

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