

In the Midst of Madness: Mental Health Literacy as Null to Explicit Curriculum in Public Spaces

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Abstract

In the wake of school closings due to COVID-19, public agencies and media have been increasingly relegated to the role of *educator* across publics. The promotion of mental health literacy has moved from null curriculum to explicit, as public agencies have pushed the narrative of an unprecedented mental health crisis, despite the crisis having been evident pre-pandemic. This text questions the motivations of increased mental health literacy campaigns across agencies and publics, recognizing that those with vested interests in keeping the neoliberal system intact lend little help to the most vulnerable populations.

Introduction

In 2020, media outlets such as Forbes magazine referred to the pandemic as an unprecedented mental health crisis (Robinson, 2020), while pre-pandemic, the National Institute of Mental Health (NIMH) and Centers for Disease Control (CDC) corroborated that one in five Americans was living with mental illness (“Data and statistics,” 2021; “Mental illness,” 2019), and suicide was the second leading cause of death in young people (MacPhee and Ponte, 2019). Today, estimates of people experiencing symptoms of anxiety or depressive disorder are as high as 42 percent (Van Boom, 2021), and thoughts of suicidal ideation have increased drastically, especially among young people and minorities (Czeisler, Howard, and Rajaratnam, 2021).

Public mental health (MH) has fallen victim to the pandemic’s wide grasp, and the trauma surrounding systemic racism catalyzed by the death of George Floyd has left many disconsolate. The latter was further exacerbated by the fact that COVID-19 has most affected people of color (Ellis, 2021; “Covid 19,” 2020). While the events of 2020 have contributed to an increase in poor MH, however, publicly available data (e.g. “Data and statistics,” 2021; “Mental illness,” 2019) prior to the pandemic clearly illustrated that today’s MH concerns are not *unprecedented*, having taken root many years prior.

Pre-pandemic, government and mass media messaging touting the importance of MH was either absent or lost in the din of the ever-changing public policies of previous administrations. Compared to the gravity of the problem, the lacking public discourse promoting MH literacy translated to missed opportunities for the creation of more meaningful, comprehensive MH policies, something that particularly affected vulnerable populations such as ethnic minorities and children (Hall and Yee, 2012; Raphel, 2019). In the grips of COVID-19, however, MH legislation and regulation were quickly established to help aid Americans in the fight against COVID-19 (Goldman, 2021), and supportive messaging for those suffering the effects of pandemic-related mental unwellness emerged from global agencies such as the World Health Organization (“Mental health,” 2020).

Mass media began empathizing with the plight of the mentally unwell (e.g., Alonso-Zaldivar, 2021; Brown, 2021). Null curricula supporting MH literacy became explicit and of unequivocal importance in public spaces, though many conservative leaders and media outlets continued to promote neoliberal ideologies by marrying their concern with overt recommendations to open the economy (e.g., Berry, 2020; Farber, 2021).

Neoliberalism and Public Agencies as Pedagogues

Neoliberal policies, which prioritize “economics and market principles in all spheres of governance and indeed human life” (Ornellas and Englebrecht, 2018, p. 300), also serve as weapons against the most vulnerable populations (Giroux, 2019), especially when these policies inform public pedagogical spaces. These sites of public pedagogy—where learning, education, and curricula occur outside educational institutions—can be the most influential (Sandlin, Schultz, and Burdick, 2010). As recent MH messaging has been produced or supported by multiple agencies (commercial, university, government, activist, etc.), their reach goes beyond that of any one institution, and their rhetoric has become a form of curricula for the masses. The result is a structure of learner(s) (citizens), and pedagogue(s) (agencies), and the mass closings of schools relegated an increased importance to these entities as primary providers of education.

There is significant reliance on mass media for knowledge when access to the outside world is restricted (Rimal, Chung, and Dhungana, 2015). The forced closure of many educational institutions and libraries, which previously provided news and internet access to many lower socioeconomic communities (Ashworth, 2020), has contributed to increased reliance

on mass media and social media as a means of distributing important news, education, and information. During this pandemic, the government and media have served as educators, addressing the topics of all things COVID and commenting on (and informing) recent social unrest (“The pandemic,” 2021).

The Null v. Explicit Curricula of MH Literacy

Educational scholars have long argued that null curriculum, or what is *not* taught, may be as educationally significant as what is (Eisner, 2002; Flinders, Noddings, and Thornton, 1986) and is essential in determining the boundaries that define educational equality. Coined in the mid-1990s and considered the “foundation for mental health promotion” (Kutcher et al., 2016, p. 2), MH literacy is “the knowledge and beliefs about mental disorders which aid their recognition, management, or prevention” (Jorm, 2012, p. 231).

Before the pandemic, many larger US media outlets did little to increase MH literacy across publics, instead encouraging false narratives predicated on the idea that those living with mental illness were dangerous or had a greater propensity for violence (Jorm and Reavley, 2014; McGinty, 2016), even though those living with mental illness were more likely to be the victims of violence than its perpetrators (Wilson, Ballman, and Buczek, 2016). Now, as increased importance has been placed on them as educators in these public spaces, these agencies have taken aim at increasing MH literacy, and curricula has been recalibrated to include messages of empathy, coping, and concern (e.g., Blum, 2021; Caron, 2021).

As a result of this shift, two new camps of MH conversation have emerged. Some media outlets have discussed how the effects of COVID have exposed a nation’s lack of resources in combatting the ever-spreading phenomena of poor mental wellness (e.g., Ellis, 2021; Tinker, 2021), and others have used failing MH as a reason to call for opening schools and the economy by marking stay-at-home orders as the primary contributor to the problem (e.g., Berry, 2020; Farber, 2021). To that aim, the Trump administration used Twitter to call for the reopening of schools at the height of the pandemic, stressing the benefit to the economy (Pence, 2020; Trump, 2020).

Similarly, the new curricula supporting MH literacy have also been used as capital during the pandemic. Maybelline’s “Brave Together” campaign aspired to destigmatize anxiety and depression (“Brave together,” 2021). JanSport’s “Lighten the Load” Twitter campaign aimed to connect Gen Z consumers with MH resources (“Lighten the Load,” 2021). Vogue Business recently reported on the importance of brands engaging with the emotional needs of young consumers including on issues surrounding mental health (Gaffney, 2020). Curricula supporting MH literacy have become both a means to inform and influence publics as well as a way to communicate social adherence to a new norm that equates greater MH literacy with greater social responsibility. Consequently, the marketing surrounding MH literacy has become a form of “woke capitalism” as companies profit from marginalized identities (Kanai and Gill, 2021).

While greater MH literacy is undoubtedly crucial, as is the creation of curricula supporting its understanding, it is paramount to question the neoliberal motivations of many large agencies who gave far less attention to the issue pre-pandemic when mental illness was already a pervasive crisis.

The Neoliberal Context and Curricula of U.S. Healthcare

In the United States, where privatized healthcare has long been favored by government over a comprehensive public option, the MH crisis has been further exacerbated by an atrophied healthcare system too dysfunctional to accommodate it (Mojtabai, 2021). As recently as 10 years ago, the high cost of medical care led 50 percent of Americans to circumscribe it; med-

ical bills were a major component of half of all personal bankruptcy filings (Sipe et al., 2015). In recent years, those living with mental illness have experienced increased financial hardship and frequently have underutilized health services because MH benefits often pay less than physical health benefits (Sipe et al., 2015).

The state of US. healthcare is important to note because it points to the US government's neoliberalist ideals. Its continued support of a majority privatized system where many citizens are underserved points to a prioritization of big business over options that ensure the well-being of all citizens. To that effect, many media-promoted health campaigns pre-pandemic often stressed the importance of self-management of mental illness over community management (Brijnath and Antoniadou, 2016), celebrating individual goals over those of the greater community.

Neoliberal ideals continue to inform curricula in these spaces where government serves as educator, and neoliberalism does little to benefit those living with mental illness (Ornellas and Englebrecht, 2018). The indirect costs of poor MH have never been more salient than in this moment. Poor mental health was already leading to increased absenteeism, decreased productivity, and increased use of disability or family leave ("Workplace Health," 2016; Goetzel et al., 2019; Rajgopal, 2010) across publics. During the pandemic, stay-at-home orders, civil unrest, and fear of illness and death, any one of which could contribute to poor MH, have forced many citizens to make unusual if not radical concessions to their livelihood. It was noted pre-pandemic that mental illness could negatively affect productivity and profit (Rajgopal, 2010). Current evidence reinforces this and pushes against neoliberal goals.

Conclusion

Today, because those of privilege have been affected directly or indirectly by MH concerns, either by experiencing decreased MH themselves or experiencing the disruption that increased illness across publics can bring to a neoliberal regime (Iyer, 2020), the previously null curricula on MH literacy that promotes recognition and compassion has become explicit and purposeful. As MH literacy is the key to improving population health (Kutcher et al., 2016), promotion of MH literacy has moved from a place of null curriculum to explicit, and the public *en masse* has been edified as a space of educational endeavor. Still, public agencies have pushed the narrative of an unprecedented MH crisis (Robinson, 2020), despite the crisis having been clear pre-pandemic ("Data and statistics," 2021; "Mental illness," 2019).

Though US media had previously reported on MH under a frame of violence (McGinty, 2016), some outlets now report on how the pandemic has revealed disparity among those afflicted, while others insist opening schools will help rectify the crisis among youth. In the end, despite organizations having the perception of increased MH literacy, motivations should be questioned, as those with a vested interest in keeping the neoliberal system intact lend little help to the most at risk such as minorities and young people, as was the case pre-pandemic.

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