>> Lesley Hennen: Hello everyone, thank you so much for joining us today! My name is Lesley Hennen. I am the Entertainment and News Media Associate at RespectAbility. I'll do a quick visual description of myself. I am a white woman. I'm wearing glasses. My hair is up in a bun. I'm wearing a black t-shirt and I -- my zoom background is the RespectAbility logo over a black background. If you would like to view the ASL interpreter in a larger screen, you can pin their video, which will spotlight the video throughout the entire panel. We also have live captioning that is available in the Zoom app by clicking on the CC button or via the web. We have posted that link in the chat box -- my colleague Isabella will drop that in. And this panel is being recorded, so a high resolution recording with open captions and our ASL interpreters will be available after the event. And in today's panel conversation, we will be discussing ways to accurately and authentically represent mental health on screen while also prioritizing your own mental health off screen in an industry that hasn't traditionally given folks the space to do so. And I'm very excited to introduce our partner on this event, Ebony Adams from Women in Film.

>> Ebony Adams: Hi everyone, I am very excited to be here today. As Lesley said, I'm Ebony Adams. I'm Manager of Public Programs at Women in Film. Women in Film is an organization that's been around for almost 50 years. We advocate for gender parity across the screen industries. And these kinds of conversations that we have with partners like RespectAbility really help us advance the mission of paying attention to women from every category, every identity column, and we're just so excited to have a conversation like this today with a partner with such stature as RespectAbility. A short visual description for myself. I am a cisgender Black woman wearing a black jumpsuit, glasses, I have red lipstick and hoop earrings. And just before I pass to our amazing moderator for the event, I do want to take a quick second to thank the West Hollywood Arts Commission, who has been so generous with their partnership over the years and has helped us put together this event. And now I would like to throw things to our event moderator, Nikki Bailey, Emmy-nominated producer and comedy writer.

>> Nikki Bailey: Hi! It's so good to be here. My name is Nikki Bailey. I am a writer, filmmaker, and Emmy nominated producer. My pronouns are she and her. I am African-American and I am -- and I have bright pink hair, I'm sitting in front of a wall in my office that has a bookshelf and a poster for my podcast, and I'm wearing my black lives matter earrings. I'd like to welcome our panelists and have each of them introduce themselves, so please help me welcome Ali MacLean.

>> Ali MacLean: Hello, my name is Ali MacLean. I am a playwright, a TV writer, an actor, former comedian. [chuckles] I have red hair. I'm wearing a bluish-grayish type of velvet shirt. And behind me there are some black and white photos and a poster for my play, "She's Not There." My pronouns are she and her. What did I miss, Nikki?

>> Nikki Bailey: You got it all.

>> Ali MacLean: Oh good, okay.

>> Nikki Bailey: I'd also like to introduce Laquana Lightfoot.

>> Laquana Lightfoot: Hi [coughs] sorry. Hi everyone, I'm Laquana Lightfoot. I am a writer/producer. I have long curly black hair. I'm wearing a bright pink shirt. I have on glasses and I'm sitting in front of a white wall.

>> Nikki Bailey: Thank you Laquana. And last but not least, I'd like to introduce Carmen Vincent.

>> Carmen Vincent: Hi everyone, I'm Carmen Vincent. I'm a documentary filmmaker from northwest Indiana. I am a white woman with short straight blonde hair, a red shirt with a white and gray pattern on it, and behind me is a blurry Zoom background. Thanks for having me.

>> Nikki Bailey: Thank you all so much for introducing yourselves. Let's jump right in. Since we're talking about representing mental health, both on and off screen, let's start with on-screen representation. And so I'll just put this question out to all of you. What are some of the most important aspects do you feel that media needs to get right in terms of accurate representation of people with mental illnesses? Ali, do you want to start us off?

>> Ali MacLean: Sure. Well there's a lot of different -- I could mention a lot of different things. I guess the first would be that -- and I think they're getting better at it, but for a while I think mental illness was only shown as somebody who was being hospitalized for being quote unquote crazy. You know, I think that, for instance Homeland did a really good job portraying Carrie Mathison as somebody who had a mental illness, but that's a little bit to the extreme, and so there's a lot of different areas of gray in between, you know, for some people, you know, it's every day getting your meds -- going to the drugstore and getting your medication, or getting the energy to call a therapist, or dealing with a relationship. There's a lot in between feeling sad and being hospitalized for schizophrenia or bipolar or whatever it is that she was diagnosed with, I don't exactly remember. So I think that shows can kind of zero in on the smaller things, and show the day-to-day, because I think that is sort of skipped over a lot of the time.

>> Nikki Bailey: Yeah. Carmen?

>> Carmen Vincent: Yeah, I agree with Ali. I think she's right that we often see the extremes of mental illness on screen, like, one extreme to another, less of those more minutiae more -- less exciting moments I guess of the mental illness experience. And I think a possible solution to that or just a way to try to authentically represent mental illness better on screen is to have an advisory board or some kind of experience represented behind the screen of people with mental illnesses, and getting a range of those experiences, not just one person's experience, because, you know, I have obsessive compulsive disorder and the next person with obsessive compulsive disorder is going to have a completely different experience with it, and there are so many kinds of mental illnesses and disabilities that I think it's really important to do that research off screen in pre-production, during production, and in post-production to make sure that we're authentically representing those experiences by talking to people who have actually gone through it.

>> Nikki Bailey: Great. Laquana, did you want to add anything?

>> Laquana Lightfoot: Yes. I'm just gonna piggyback off what Carmen and Ali said. I definitely agree that you -- that they should have people in the writers room for TV specifically with someone that has that mental illness, because what I have realized outside of it even talking to people like colleagues and stuff like that, they think that someone -- for an example that has depression or has PTSD, they act one way, and that means that everyone that has that mental illness behaves that way, especially when it comes to PTSD. I also don't think a lot of people realize that with PTSD, that it just doesn't stem from being in the war or being a sexual assault victim. I think there's a black and white thing there that really has to be spoken about, and I don't think we'll be able to fully see that in the media until they start putting people that have those types of mental illnesses in the writer's room. I unfortunately think even with the amount of research you do online, you still won't get the exact thing that happens until you speak to someone that actually has that mental illness specifically, and speak to a wide range of people, not just one person.

>> Nikki Bailey: Yeah that's an important point. And Laquana, while we're talking to you I wanted to just briefly talk about the intersection between mental health challenges and race -- race and racism -- and I wondered if you could talk a little bit about what are some of the changes you'd like to see in terms of how women of color or people of color with mental illnesses are portrayed on screen?

>> Laquana Lightfoot: Okay, so that's a great question. When it comes to how black women are portrayed on screen in terms of mental illness, it's like they give us the stigma where we're strong. And I know as someone who has -- I suffer with PTSD and depression myself, and I know that even when talking to friends sometime when they say to me, "but you're so strong, you know?" It's like yeah, I'm, like, strong on the outside, yeah, I went through what I went through but I still go through it every single day. I'm still triggered by stuff that has happened to me in the past and I'm in therapy still working on it, still trying to get myself together. So when someone tells you that you're strong and the way that they've portrayed black people on TV as strong, it's like she's just supposed to get up every single day and be fine. And that's not the reality of it. You know? Like, she has days where she doesn't want to get out of bed. She has days where she can't, for example, postpartum depression -- but she can't even -- which is extremely common in black women -- she cannot get out of bed and -- especially if she's a single mother and take care of her child, you know? And then some of them don't have the resources, unfortunately, to get help. You know? So I think that television needs to do a way better job at portraying that. And again, you'll only get that by speaking to people that's actually going through that.

>> Nikki Bailey: I agree. I feel like one of the challenges for people of color in particular is that mental health challenges and mental health -- mental illness is still kind of taboo in our own communities, so then to even see it on screen and -- is that much more powerful. And this whole sort of strong black woman trope that we're so used to seeing kind of does a disservice to black women in -- in never showing us the vulnerabilities that black women with mental illnesses face. So I think that's a really good point. I wanted to talk a little bit about, like, television genres and movie genres. Are there genres where you see more mental illness, and then how do those genres influence the way mental illness is portrayed? Go ahead, Ali.

>> Ali MacLean: I mean I think at one point in time it was just drama, but now it seems that, you know, it's sort of all genres kind of have broached the subject. I mean, a lot of comedies now deal with it, you know, Bojack Horseman, animated show -- animated comedy deals with it. And Rachel Bloom's show "Crazy Ex-Girlfriend," it was the central theme of it. So I think different shows -- a lot of -- across the genres have dealt with it. I know there's shows I think on Disney and Nick that are are specifically dealing with it for children. So as the subject becomes more approachable, I think different shows are sort of trying to tackle it.

>> Nikki Bailey: Go ahead, Laquana.

>> Laquana Lightfoot: Yeah, I'm gonna piggyback off that again, when she mentioned Disney. I think the latest show -- well the Disney movie I've seen I'm pretty sure everyone's familiar with is Encanto. Like, that's the movie right now -- an animation that talks about all the majority of mental illnesses -- all the characters actually had a mental illness. And I think it's interesting that they put that in an animated show because it's definitely something that children need to learn. I definitely think at that age, that's when you should start to learn about it, especially because there are a lot of children that are depressed. And you know, it needs to be -- it needs to be shown so I definitely wish that it was in a lot more animated shows, and I definitely hope that Encanto is the beginning of something new in animation. But I definitely still see it in more drama but that -- yeah, I definitely see it in more drama movies and drama TV related shows like Euphoria.

>> Nikki Bailey: Yeah there used to -- there used to also be this idea that you would see a lot of mental illness in horror films. Like, that was the -- the trope was that the crazy murderer with whatever mental illness was coming to coming to kill -- you know, kill everyone. And I like that you're starting to see now in comedies like Barry and Bojack Horseman you're starting to see mental illness in more realistic, and also I think more accessible ways in some of those shows.

>> Ali MacLean: Barry is so dark this season. I'm not going to say anything more for people who haven't seen it but it is dark. But something you brought up though is something I think that people are talking about right now how, with the horror movie and it's like the crazy murderer, a lot of people are talking about that right now with, you know, some of these shooters, because the moment of, you know, one of these shootings happens people say oh, his mental illness. And it's like well no, there's a major difference between mental illness and hate. And the media isn't often making that distinction, you know, it's like, I have a mental illness but it isn't my instinct to go shoot up a bank when I feel depressed or upset about something. You know, I'm more likely to lie in bed or eat pirates booty cheese puffs or something, you know. So it's not my go-to to want to go get a weapon and destroy people, and I think that's a very specific thing. It's more anger than it is mental illness. Are they mentally ill? Some of them, probably. But it's a very different thing and the media sort of just melds the two together. And it really makes me angry because it does a disservice to everybody who does have a mental illness, and it makes people who don't understand it think that mentally ill people are violent and dangerous. And you know, I cried a couple days ago when I killed a wasp I was like, I'm so sorry, I'm so sorry, but I don't want -- I can't have you in the house. And so you know, that's where I'm at. Also yeah, I just wanted to agree with Laquana about the animation. You know, if I -- when I was a kid had had things like Inside Out or Soul, I think I would be a lot more well adjusted than being grown up on like Cinderella and Snow White where I'd be waiting for my prince to come, and you know, didn't have much agency over my life. So I'm really glad that a lot of these studios are making animations for kids that include that.

>> Laquana Lightfoot: Yeah, and it makes you feel like you're not alone, because when it comes to mental illness, no matter which one it is, it's very common to feel like you're alone, and it's like, you feel like you're the only one not -- you know you're not the only one going through this like the down time, you know that, but you still feel alone, you know, and if they have, like, Cinderella and Snow White, it's like, you watch that and it doesn't help you not feel the way that you're feeling, but if you watch something like Encanto, it's like okay, I'm seeing something on screen that's like me, and I don't feel by myself anymore. But also I wanted to piggyback again on what you said. Whenever someone brings up violence and mental illness, the first movie that comes to my mind is The Joker. And I still remember when I went to go see that movie and I was going through my own things at the time, and I had no idea that the movie was going to be the way that it was. And what I can say is having depression and PTSD, that movie made me do a whole 180. I think that movie was a terrible depiction of what mental illness is, and it made people feel like, so this is what happened when someone that's not medicated and they have a mental illness doesn't take their medication, they'll just go completely off the rails and become violent. And just like you said, what The Joker did was considered a mass killing, you know, and that's not -- that's not cool.

>> Nikki Bailey: I think that's a really important thing to talk about. Let's pivot and talk a little bit about how treatment and medical intervention for mental illness is portrayed in the media. Like, you know, you look at The Joker and one of the -- one of the scenes in that -- is him talking to a therapist or a social worker about his, you know, his issues. Is it realistic, the way that we're portraying intervention and medical treatment, or is it lending itself to sort of the spread of misinformation about mental illness? Carmen, do you have a thought about that?

>> Carmen Vincent: Yeah. I think this goes along with what we were kind of talking about earlier where there's a lot of representation of the extremes and sensationalizing mental illness, which includes, you know, hospitals -- a lot of -- a lot of the day-to-day experience of mental illness and recovery and healing is actually pretty boring. I mean, it's hard to represent it in an interesting way on screen because it's so -- it's so slow. Like, the healing process for most people is slow and it doesn't look like linear progression, like a narrative film would -- like to write, where you know, at least for me, I take two steps forward and four steps backwards sometimes, and that's not -- that's not fun to watch, because you want to root for them and you want them to succeed and conquer quote-unquote this mental illness. But that's not what day-to-day living with mental illness looks like, at least to me. And I also want to touch base on the question before if that's okay.

>> Nikki Bailey: Sure!

>> Carmen Vincent: I think it's really dangerous when we talk about other people's experience of mental illness like when we talk about the shooters -- it's not them telling -- talking about their own mental illness and that's where we get these stereotypes and the extreme examples of people with mental illness are crazy and they're -- going to harm or shoot up a school, like, that's where we get those extremes. I think why I gravitate towards documentary so much is because it gives agency to the person with the disability or the person with the mental illness to tell their own story, which is so important, because then we get to dive deeper and not have to make assumptions about someone's experience. We get the real, raw, authentic story right in front of us. So I think it's important to either a narrative or documentary or unscripted television to give the agency to the individual with the mental illness to talk about their mental illness, instead of having other people talk about it to them, or about them or make assumptions.

>> Nikki Bailey: Yeah, I think that's a really important point. And it also makes me think about, you know, some shows that have been kind of controversial like 13 Reasons Why, or even the response that people have had to Euphoria. How real or raw should depictions of mental illness be in media? What kinds of depictions are careful versus the depictions that are careless?

>> Ali MacLean: I know that a lot of people were upset by 13 Reasons Why, to the point where they petitioned until the -- what that specific scene was changed, I think, for the -- recording of it or whatever. I personally thought that it was important to show that, because I think that suicide is glamorized, and it was really really rough to watch that. But I'll say this: all those parents that were up in arms about it, they have no problems with their kids watching Romeo and Juliet. That's what I was learning when I was 14, and it was sort of romantic. It was like, oh, that's so sweet, they love each other so much they're gonna kill each other -- kill themselves for each other, and it's like, that is not a great message to send. Now I love Shakespeare. It's what I studied, you know? But if you're going to look at something realistically, then show it realistically. It's -- it's brutal to watch, but it should be, because that's what it really is. Now should the parents be there or should there be a discussion afterwards? Yeah. That's completely what I believe is, like, you don't have -- show somebody something and then just send them off into the night. There should be a discussion afterwards or some type of decompression. But you know, I think that that show is a lot more responsible than, you know, a show that glamorizes it like The Queen's Gambit. I know people thought that was wonderful, but for me it was sort of like she flirted with mental illness and alcoholism. And it was -- she looked very sexy. And then she decided okay, I shouldn't take pills and drink anymore. And she managed to get herself out of it within an episode. That to me is irresponsible, because then if somebody does have those problems, they think why can't I fix myself? What is wrong with me that I'm not over this within an hour's time, or whatever it is. So I think the more realistic you can portray it, the better.

>> Nikki Bailey: Yeah. Carmen?

>> Carmen Vincent: It's really important throughout the stages of pre-production, production, and post-production to be constantly showing your materials to people who have similar experiences, like I was saying before, and take their feedback seriously. And I just lost my train of thought. [laughs] This happens to me a lot because -- I'm constantly, like, questioning and double triple checking the things that are going to come out of my mouth, which is something I like to explain to my employers and my clients. It's an experience I have with my OCD and anxiety, so that might happen sometimes. Can you repeat the question you were asking, Nikki, do you mind?

>> Nikki Bailey: Sure. I was asking about how real or raw depictions of mental illness should be in media and whether some -- some depictions are careless and some depictions are more careful about what they're showing and how.

>> Carmen Vincent: Absolutely, so yes -- so with the advisory board you're getting those first-hand experiences, but also one of my mentors, Heidi Reinberg, she's an amazing producer. I was really struggling with the film I was making because I was getting really conflicting feedback from people. And she said, "the one question you need to ask yourself is are you doing right by your characters?" And so for me with documentary, I can sit my subjects down, have them watch the film, and say, "do you feel like this represents you and your experiences fairly? Do you feel dignified? Do you feel empowered by watching this?" You know, "does this do right by you?" And I think when you're writing a script or working in narrative TV or film, you can also put yourself in that character's shoes, or have someone who has similar experiences to that character, and just think, would this character be happy with the way I'm portraying them? Would they feel like we're doing justice to their story, and who they are as a human being? So I think it's important to ask ourselves that question when we're making film and TV about mental illness and disability.

>> Nikki Bailey: Yeah. You -- you brought up a really great way for us to segue into talking about how we deal with mental illness off screen in an industry that doesn't really support mental wellness. And you talked a little bit about how you like to explain to people that sometimes you lose your train of thought. What are some of the systems that are in place right now that create an environment that leads to sort of negative mental health in this industry, and how can we change them?

>> Ali MacLean: All of them? [laughter]

>> Nikki Bailey: Let's do one at a time, like, let's let's not get crazy.

>> Ali MacLean: TV -- TV and film production -- it is a tough business. It's long hours. You have -- you're expected to have a mental toughness. It's usually kind of like a "suck it up" mentality. It's not warm and fuzzy. It's very competitive. There's always tons of people that want your slot, your position, your job. And so I think people are willing to overlook any, you know, cold or any issues that they have, if they're tired of whatever, they just sort of like power through it. And -- and they'll hide any chinks in their armor so that they don't get knocked down a peg. You know, I was a comedy writer and I was often the only woman in the comedy room writer's room. And so I always put on a, you know, a brave face and never showed any type of weakness, and I never let anybody know that I was -- I had depression. You know, first of all people told me don't ever tell anyone that, you'll never get hired. Second of all, if I did, I felt like I'd just get destroyed, I'd get hazed. And I would have, you know, I recall there's -- there was one day where my cat died, my beloved animal, and I was devastated. But you know, somebody asked me how she was, and I said oh, you know, I literally said, "oh, she died. Anyways." And they're like "oh, well I'm glad you're okay, because we need, you know, 10 jokes about the sex scene." And it was just like, it was completely glossed over, there was no -- there's no humanity in it. And if I had shown that I was upset about this thing that anyone would have been upset about, I just would have been completely destroyed. So I think that this industry is -- it's a business, you know? And you're expected to act a certain way. Now I think things are getting a lot better, but it's kind of few and far between that people are empathetic towards you. And often now when people are hiring people with mental health issues, it's a slot that you're filling because they want your stories for the show, you know? It's not because oh, you might be an interesting person. It's like we need somebody to write for the person with the mental illness. So while it's sort of a catch-22, because it's while, yes, you have this asset, it's also like I don't want to be that token person either.

>> Nikki Bailey: Absolutely. What are -- are there differences between, like, working in film and television, and how does that impact the way that we treat or manage mental health? So like, who are our advocates in those settings, and who sort of sets the tone and the vibe in the workplace? There are a lot of questions there, let me -- let me pick one. I guess let's start with like, how -- is there a difference between television and film in terms of how people manage mental health challenges behind the scenes?

>> Ali MacLean: Well I mean a film has -- you know -- whatever, 30, 60 whatever days and it's sort of a sprint. And I guess the producer or the director would be the one who's sort of leading the charge and setting the tone. And then a TV show will probably be the show runner and it's a little bit more elongated, it's not as fast paced, but I don't know. I guess I would ask Carmen or Laquana what they think. It's different.

>> Laquana Lightfoot: I -- I'm not really sure. I would just say that in TV -- like in terms from a writer's perspective, you know, you're -- you might not get as stressed out when you have to write something, just because you have other co-writers there to help you. But if you're writing, like, a film you might get more -- like you might feel more pressure. And in terms of mental illness, like, if you have anxiety, the more pressure you feel the more harder it is. So if you're doing it by yourself it would probably be a lot more harder. And then -- yeah I would say that's the only difference, which is actually a big difference when you think about it. But I would say that that would just make TV a lot more -- less anxiety driven because you have people that are your co-writers, from a writer's perspective.

>> Nikki Bailey: What about -- when we're thinking about -- one of the things that Ali talked about was how she didn't -- she would never tell anyone that she was dealing with depression. What about -- let's talk a little bit about disclosing your mental health issues in the workplace. Like, do you do you disclose, and if so, how and to whom?

>> Laquana Lightfoot: So for me I don't disclose specifically what I have, but if I'm asked, I'm very open about my mental health. So I will inform someone. But I know -- everyone isn't like that. But I -- when whenever I go to a job or something like that or a gig, I always say mental health is extremely important for me and I would want the same thing for people that's surrounding me. An example I can give is when I made my short film, there was a young lady there who also had mental illnesses. And the film that we were working on was very triggering based, and I had -- me and the director, we had a one-on-one meeting with her and informed her that if she needs to take a break then we can take a break, because we know that this is hard. Every time we had -- time to -- every time we had, like, practice to read the script, we would always tell them hey, if you're not feeling it today because it's so triggering, if you need to -- this is when everything was virtual -- if you need to turn your camera off because this is so hard to listen to right now, feel free to do that. So I feel like it's when it comes to situations like this, it's up to whoever is in charge to make sure that they're letting their -- the people know that's working for them that they're fine when it comes to their mental health. They do not have to disclose what their mental health is, but they know that if they're having a depressed day, and they can't -- they can't focus because they're so depressed over something, that they're given the option to either, A, work from home if that's possible, or they're given the option of, B, to just take it easy that day. So when it comes to situations like this I just really think that it falls on whoever is in charge to make the person feel comfortable about, just their mental health in general.

>> Nikki Bailey: I agree with you, and I think often about how people in hiring positions can create more accessible processes for people who are dealing with mental illness. And I'm wondering, like, if we could each maybe speak a little bit to how -- to accommodations that we've asked for or -- other things that we've done to advocate for ourselves or with an employee -- with an employer within the industry. And I'll speak for myself first. I'm with you, Laquana, I like to tell people up front hey, mental health is really important to me. It's really important to have a balance between work and -- my work life and my home life. But I don't tell them necessarily that I have bipolar 2, I just tell them that mental health is really important. And one of the things that I've noticed is that when I've had to disclose that I have a mental illness, I've had people who were very very supportive at first, but then later it came up and was used against me. Like, so I'm wondering if people have had experiences like that, or if they've had experiences where they've disclosed and it was met with positivity and they were able to manage in that way.

>> Carmen Vincent: I agree with what you guys have been saying. I don't really disclose upfront. I do have it in my professional bio on my website, so if an employer is interested they can find it there. But if I am asked about it I am upfront, just because -- the creative work we do is so personal often times, I think it's important for someone to support me for who I am on their team. And if I get the chance to talk about that I will. Some accommodations I've asked for -- I really like having reassurance if I'm on the right path, having specific expectations set for me, so I know I'm meeting or exceeding people's expectations. There are definitely boundaries that I like respected, and just an awareness that I'll probably be an over communicator versus an under communicator. I'm a very active brain -- and what makes me feel weird is when I disclose that I have OCD, a lot of times people will come back with oh, that's great! You're going to be so detail-oriented, you're going to be a perfectionist, I'm going to get perfect work from you every time. That makes me feel really weird. I don't know how to respond to that I kind of --

>> Nikki Bailey: Yeah, like, no pressure!

>> Carmen Vincent: Yeah, like no pressure now that you just made my OCD worse, thank you! [laughs] But I do try to also, when I'm talking about the accommodations I need, bring up that, you know, this makes me a great divergent thinker and problem solver. It does make me detail oriented. But I have high enough expectations on myself every day, so just -- I need you to trust me to do the work that I know I'm good at doing, and just be able to communicate with me when I need to talk or have expectations discussed or anything like that. So I'm a very open communicator, and I like to set that as the tone from day one. That doesn't necessarily mean I'll disclose I have OCD, but people can find it on my website, so if they know they know.

>> Ali MacLean: I mean, I sort of outed myself when I wrote this play which was about depression. And that was sort of my big declaration that I went through this. And before that I didn't tell anybody. I mean I -- I have a chronic illness which I think some people knew about and some people didn't. But most of the time I didn't tell anyone and that was part of the problem. Because I think back about jobs that I had, some of which I wasn't hired back to, where I think the people I was working with thought either that I was just a jerk or I was always hungover. Because I was always, you know, like, head down on my desk or, like, in the back of the room like this -- and there might have been a couple times where I was hungover, let's be honest. [laughs] But as -- on the whole it was, you know, I was -- I was depressed or I was just trying to hold it together. And I would never take a day off because you just don't do that. And so if I had been up front and honest about it, it would made it a lot more sense, rather than thinking I was just lazy and I didn't want to be there, which was not the case. So I wish I had felt comfortable enough with disclosing. Now a lot of people know, because I talk about it all the time. But I still find that I have an issue asking for things. I -- as an actor I asked once for an intimacy coordinator, and I was sort of talked down when I asked for it. I was, you know, not laughed at, but sort of just like, oh, you know, kind of, just made to feel like I was being too sensitive. And so, I guess I just haven't had a great track record with getting the accommodations that I feel that I need -- and I don't really ask for much! It's not like I need, you know, I haven't asked to bring my cat to work yet, let's just say that. There may come a time, just warning the entire universe. But you know -- I just, I don't really ask for much, but when I have, I feel like I've been let down a bit.

>> Carmen Vincent: Is it okay if I piggy back off of that?

>> Nikki Bailey: Sure!

>> Carmen Vincent: I think it's important for people to know that when we do disclose, suddenly there is a big pressure to perform better than anyone else, and to prove that this mental illness doesn't get in the way of our skills, our talents, our products. I think that's a pressure felt by any marginalized group: disabled, race, sexuality, gender. I think it's just that added pressure. So when we do disclose to be treated with empathy and kindness, and to not trivialize our mental illness or underestimate us, but to give us realistic expectations and value the work we do, because we are going up against that extra hurdle of we need to prove ourselves.

>> Nikki Bailey: Hear hear, that should be on a t-shirt, Carmen!

>> Carmen Vincent: [Laughter] Thank you!

>> Nikki Bailey: I know some of you have projects that deal specifically with mental health. Ali, you mentioned your play. What is it like to work on a project related to mental health, and how do you bring yourself and your own experiences to that kind of work?

>> Ali MacLean: Well first I have to tell everybody that comes to see it that they aren't the other characters in the play, so that they don't freak out, especially -- no -- you know, I -- for a long time I was writing for other TV shows and other projects and I was, you know, writing for other people and it was fine, but it just didn't kind of -- fulfill me. And so then I started writing these projects that were things that were important to me and they were very scary and dark and vulnerable things I was talking about. And I found that that resonated more than anything, because it's like the more specific and vulnerable I was, the more universal it was. And so I wrote this -- one play about depression and then the next one I wrote was about toxic love, and it also has themes of depression and addiction. And for those, what I've done is when I have a production of it, I always link up with a non-profit and then I have a talk back afterwards, which is sort of what I was saying before is I don't want to ever have this show which is, you know, just sort of opens people up, you know, makes them feel, you know, empathetic or whatever or vulnerable, and then send them out into the L.A. street or what have you. I want them to be able to process the information or talk to people. So there's always a resource whether it's NAMI, or it's Music Cares, or it's, you know, a facility or there's, you know, pamphlets or some number they can call because I -- I just feel like, you know, I want to start a dialogue with the audience and I want the dialogue -- to continue once they leave the theater, because that's sort of what it's about. You know, I'm -- I'm giving them my side or my perspective on what's going on, and they have another perspective, and if we all start talking about it then it's, you know, it's not gonna be so scary. So yeah, I have this model set up where I always include a professional in the mix so that people can talk about it afterward.

>> Nikki Bailey: That's great. I wanted to pivot a little bit and take some questions from the audience, and I know we have a couple of questions that have been sent in. So one question from Kim. She asked, "can you think of any comedy shows that have dealt with mental -- health issues well?" Laquana, do you want to go?

>> Laquana Lightfoot: Hold on, let me think first.

>> Ali MacLean: Like a TV show or a movie?

>> Nikki Bailey: She asked if there were any comedy shows that have dealt with mental health issues well. I mean, I think the fact that we're all kind of paused for a moment speaks to --

>> Ali MacLean: I think "You're the Worst" is a comedy, and I thought that dealt with it fantastically. There were certain episodes of "Crazy Ex-Girlfriend" I thought did well. I think "Bojack Horseman" is great. There's a British show called -- oh man what's it called -- "This Way Up" by Aisling Bea, which I thought touched on it well. Ted Leo. The way that they dealt with his anxiety, I thought --

>> Nikki Bailey: Ted Lasso? Yeah.

>> Ali MacLean: Ted Lasso -- I mean Ted Leo. Ted Leo, the singer. Ted Lasso, thank you. The scene with the karaoke bar and he has this anxiety just come down on him and he has to leave and sit outside and he's shaking -- I've had that. So I thought that was pretty -- a pretty accurate portrayal. So there are some comedies that do do well with it. Others?

>> Nikki Bailey: Yeah. Another question from Mara Lynne. She asks "it's hard enough to get -- for me to get accessibility for disability let alone my mental health on set. Is there someone I can talk to one-on-one?" So who would you recommend that someone speaks to when they're working on a project or a set, that they talk -- that they should talk to about accommodations -- and their needs -- being met?

>> Laquana Lightfoot: I think depending on who you are, like, what's your position on set I think you -- the closest person I would go to would be the producer or the director. If you can get to them I definitely say go to them because they're the overhead, and if -- if you need accommodations, they should be able to give that to you. I cannot speak for -- I noticed someone asked this in the chat as well, I'm not sure if I've just read it wrong because I was glancing -- I cannot speak for everyone's situation but I can speak for mine, and I know I have had a job where my therapist actually -- if I have to -- if I'm having a really really bad like breakdown but I'm just all smiles and giggles at work, you wouldn't know that. So I would tell my therapist that and she would actually give me a note to give to whoever is my boss at the time, and they're supposed to keep it confidential, to let them know how I'm feeling and that I might need such and such. So if you can do that, I recommend doing that, because I think that might also be a best approach legally. And yeah, like I said, if you can get to the producer/director, I really recommend just going straight to them because they're the one that's in charge.

>> Nikki Bailey: I would say too, think about who on set you trust. Like, who are your -- your set homies, like, the people who you know are like -- the person you bonded with the most on set -- think about who that is and if they can support you or help you in advocating for yourself on set. I've had the experience of like, you know, I didn't have a direct link to the producer or the director, but I had a direct supervisor who was maybe a little lower down on the totem pole that I could talk to about it, and we could work out something where -- where I could get my needs met -- and they could make sure that the people who needed to know knew what they had -- only the people who needed to know knew what they needed to know. So I would say look for that person that you can trust on set to sort of help you advocate for yourself. [crosstalk] Another question -- go ahead Ali.

>> Ali MacLean: I will say if all else fails, I always feel comfortable talking to crafty. Crafty always listens to you and they have snacks, so.

>> Nikki Bailey: [Laughs] Crafty is your -- your onset bartender, therapist, kind of --

>> Ali MacLean: Wardrobe and crafty, those are my peeps.

>> Nikki Bailey: One -- another question from Audrey. "In trying to raise awareness about ugly aspects of mental disorders, how should the industry approach the line of being truthful, as opposed to exploiting the mental illness or disorder for plot development or entertainment?"

>> Ali MacLean: I mean that's hard. That's what sort of we were talking about before with like "13 Reasons Why" and I know "Euphoria" is really -- I haven't seen season two, but I mean, I thought it was graphic, but it also was -- it kind of made it kind of cool they have cool eyeshadow, you know? So it's like if I were a teenager I'd be like I want to be like them. So it's sort of a double-edged sword. I mean, there's one show that I thought was spot on, but it was also sort of glossy, so you know, it's -- a little bit of both. It was the show "Modern Love" on Amazon Prime and it was one episode called I think it was, like, "Take Me As I Am," and it was with Anne Hathaway. I believe she's bipolar. And when she felt good and she was in her upstate stage, it was like a musical. She was wearing bright clothes and everything was great. And then when it wasn't, it was sort of like the colors were muted. And there was one scene where she had this date coming, and she was all excited and she wore this big sparkly dress, and she was in the bathroom and she's putting on her makeup. And all of a sudden it was just like -- it hit her and boom, and she was on the floor crying in a party dress. And if that wasn't me to a tee, like I have just had that happen so many times. And yeah -- the show itself was very glamour and glossy and it's Anne Hathaway, but I thought that that specific moment was so excellent because it was so specific. You know, just the idea of, like, you have to go to a party, you have to kind of get yourself together, you have a date coming and you just can't do it. I thought that was fantastic.

>> Nikki Bailey: Another question from Katherine. "How has the pandemic affected your experiences of mental -- of experiences of workplaces dealing with mental health? It seems many more people are experiencing issues like anxiety, grief, and trauma over the past couple of years. Has that led to more openness and accommodation, or is the rush to return to normal making it as hard as ever?"

>> Laquana Lightfoot: I think that's an individual question because it would vary for who specifically you work for. Let me think first.

>> Nikki Bailey: I will say I'm in the -- I'm in the process of -- I'm in pre-production for a short film and I will say one of the things that I'm noticing is that people are much less willing to work 12-hour days for -- for not a lot of money. People are not as willing to -- to put in the time and effort to -- to do things that maybe before the pandemic they did because they felt like they had to. Now people have much more -- much stricter boundaries about what they're willing to do.

>> Ali MacLean: I think that's across the country and across the globe, I think, you know, it's -- it's strange to say but, you know, this was sort of kind of -- it leveled the playing field a little bit because there's these people who have been extremely healthy their entire lives who now have long haul COVID and now know what it's like to be very very sick and very vulnerable, and I think it's made them a little bit more sympathetic towards people who have mental health issues or chronic illnesses. And it's like, oh okay, now I needed people to help me and I needed accommodations when I was very sick with COVID. I understand now that these people need accommodations too. And I think that they're more open to it, whereas before, they might have been like, "just get over it." So I think there's just a little -- a smidgen more sympathy in the country, and I hope we can hold on to that. I hope it's not a fad, praying it's not a fad.

>> Laquana Lightfoot: Yeah because I recently came across an article that said that there are more people now quitting jobs that is not good for their mental health. So I definitely think that it's a huge turnaround, since the pandemic, and I definitely think people are starting to realize that their mental health is just as important as their physical well-being. And they're just saying, like, they're just leaving jobs where they're not -- they're not mentally okay, and they're not being accommodated.

>> Ali MacLean: Yeah I mean you wouldn't take a job that -- you know, a few months or whatever ago, you wouldn't take a job if they weren't wearing masks, you know, or you wouldn't take a job during the lockdown if people were saying you have to come in. You'd be like, "absolutely not!" So there's there's a certain set of standards now that I think people are setting for themselves.

>> Carmen Vincent: My personal revelation through the pandemic was that my value as a human being is not tied to -- or solely tied to the work I do, or what I produce as a worker in America, like, that there's more to me than that and there's more value in other parts of my life that I -- that I can, you know, find joy in -- which is hard for us creatives because our heart and soul goes into the projects we work on a lot of the times, and I think that can be an argument for people to say well, you should -- "why don't you want to work 12 hour days? Don't you love what you do?" You know, phrases like you don't work a day -- "if you do what you love, you don't work a day in your life" are harmful, at least to me, because it kind of undervalues the sweat, blood, and tears we put into our work. So I think when -- I don't think I'm alone in the revelation that my whole value as a human being does not have to be on my career, does not have to be on the things that I produce or the work I'm getting done. And hopefully there that also, you know, snowballs into us being able to advocate for ourselves in the workplace, because there's less quote-unquote less to lose, even though you know a lot of us don't have the privilege of advocating with the risk of losing our jobs because we can't afford to pay rent. So it's a tough balance to find and I don't know if the pandemic has solved much. I do think it's normalized the conversation among us workers and employees, but I think still at the top, systems haven't really been put in place universally to -- to really deal with those concerns.

>> Nikki Bailey: Yeah, I agree with that. So I want to just close out with a general question for all of us. What do you want people to take away from this conversation about mental health? If you could sort of pick one or two things that you really wanted to make sure people left here understanding, what would that be?

>> Laquana Lightfoot: So two things for me. The first one would be, if you are ever in a position where you are in charge, please make sure you're taking care of your workers' mental health. If you know that they're not okay or they're acting a certain way, ask them. Some people don't just flat out tell you, like we discussed here. Ask them. Because like I said, I believe in a work environment it all starts with whoever is in charge, the hierarchy. Start there. And secondly, like, from the first conversation we had or the first question, if you are a writer and you're writing about a specific mental health illness, then you need to ask people who have that specific thing so that they're able to give you information about it, and make sure you go to many different people to get a perspective.

>> Nikki Bailey: Great, thank you Laquana. Carmen?

>> Carmen Vincent: We need to build into our pre-production time to do our due diligence and research when we're telling these marginalized stories or stories about mental illness and disability so that we have time to sit down and grab coffee with people who have similar experiences to make sure we're representing them well on screen. We also need to build time into the post-production schedule to do those rough cut screenings for the audiences represented in the film and TV shows we're producing. I think with the hustle culture, the overworked culture we have in this industry, it's tough to find, you know, productions that are able to build in that time, and I think we need to start prioritizing it. I also think it's important to -- to normalize this conversation, but not trivialize it, to not try to boil it down into labels but to really take each individual person as an individual, and know that one person's experience with X mental illness is going to be different than the next person's. And lastly just for me personally, when I talk about my mental illness I don't want sympathy from people, which is what I often get. I just want to feel understood and accepted for who I am, because it's part of me and -- and that's okay.

>> Nikki Bailey: Absolutely. Ali?

>> Ali MacLean: Yeah, along similar themes, I think first of all, everybody's mental health looks different. You know, there's lots of different mental issues, and each person has a different way where they -- it's portrayed or it shows up. So you know, my depression may look different than yours, so there's no one way that it should look, so that's very important when, you know, people in the media are portraying it. Also I think it's what Carmen was saying before, like, you are more important than any job, like, you are more important than any gig or role or what have you. I have to remind myself that when I take on a role that's, like, very emotionally taxing. Like, just, your mental health is more important than anything like that. Because after the job is over, you're still there. So to take care of that and guard your mental health. And I guess overall I think that I would like to take away that one day, we won't even have to have these panels, because mental health is gonna just be equated with like having allergies. It's like, wait, why are we gonna talk about allergies? So what? Everybody has allergies. It's like, it's just something you have. You can't help it. You know, everyone has to take an allergy pill when they get bad allergies, and it's seasonal and then, you know, sometimes you feel okay, sometimes you don't, and it's just a thing that people go through because of the weather or whatever. So it would be great if, like you know, that was just the way that it was handled and not something where we had to, you know, be careful around people or we had to make, you know, shows about -- the episode about the allergy, you know. I think it would just be great if it just became something that was human.

>> Nikki Bailey: And with that I will say thank you all so much for coming to this panel, for this amazing conversation. I know the chat was was moving strong the entire time. Thank you to our panelists: Ali MacLean, Carmen Vincent, and Laquana Lightfoot. Thank you to Women In Film and RespectAbility for putting on this amazing panel. This webinar will be available on -- our website and on social media to watch again soon. Thank you so much for joining us and everyone have a great day!