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“Agoraphobia: Behind Closed Doors”

Isolated, petrified, anxious and distraught; these are all words that only surface what everyday life is like surviving with agoraphobia. Agoraphobia has been concealed in society overcasted by the prevalence of other anxiety disorders. However, this should not dismiss the severity and debilitation following agoraphobia and panic disorder symptoms. As agoraphobia is considered a less prominent mental illness, this perpetuates the stigma that must be reassessed and reformed, requiring the urgency to be addressed among our culture. Agoraphobia is a specific type of anxiety disorder where specific places or situations which escape may be difficult, provoking fear, panic attacks or other panic-like symptoms (Roest). Thus public transportation, crowded and exposed environments, and leaving home without someone else provokes immense anxiety, fear and even panic attacks (Pardo). Due to the lack of education, terms such as “lazy” or “unwilling to socialize” have been accentuated dismissing the crippling effects of agoraphobia, but realistically such terms are indefinitely offensive and inaccurate. **The stigma following agoraphobia is exacerbated by the media’s unrealistic portrayals, which deteriorates sympathy, resulting in a lack of comprehension by society further ostracizing victims of agoraphobia. However, self-stigma surrounding this mental illness has the potential to be diminished beyond merely education but through the intervention of support groups and the public promotion of survivors for the purpose of instilling hope and encouraging success.**

As agoraphobia is introduced to our culture, false perceptions through stereotypes have the potential to be ameliorated by addressing the reality of living with agoraphobia aiming to normalize receiving therapy and treatment. One issue in particular is the stigma surrounding the term of being “depressed” enabling assumptions from people who fail to sympathize with agoraphobia. This is explained by the lack of education where faulty generalizations form associating different types of mental illnesses to agoraphobia. As society tends to form anchoring bias through magnified media representation, people with agoraphobia are often plagued with labels such as being “lazy”, “introverted” or “making excuses” (“Agoraphobia”), which is even more debilitating and discouraging than the mental illness alone. As a result, society validates these inaccurate labels initially presented to them, which contributes to immense shame preventing people with agoraphobia to seek treatment. Society must shift their perception and aim to diminish the label of agoraphobic survivors classified as “shut-ins” who never want to talk to others (Pardo). In addition, there should not be a required level of “severity” to seek therapy or treatment. As society assumes “it's all in your head” or advises the afflicted to “just calm down” completely desensitizes and undermines the reality of agoraphobic challenges (“Misconceptions”). This apparent ignorance enables the faulty generalization that social phobia is the same as agoraphobia, though there is a distinct difference. As explained by Women’s Health expert, Susan Mahler, social phobia relates to the fear of human interaction whereas the fear of environments or situations which one cannot easily escape derives from agoraphobia (Mahler). Although “The prevalence of agoraphobia among adolescents was higher for females (3.4%) than for males (1.4%)” (Appendix A), society deems agoraphobia or anxiety disorders more socially acceptable among women than men due to common stereotypes suggesting women

are more “emotional” than men. These contributing factors spiral into how people with agoraphobia are fearful of being alienated by others, further internalizing self-stigma.

Trauma perpetuates symptoms of agoraphobia compelling survivors to refrain from speaking out about their experiences due to the societal contempt towards seeking strong support systems. Survivors of sexual assault, substance abuse and school shootings have been proven to develop agoraphobia due to trauma and ineffective coping mechanisms that have followed. More specifically, “Women are likely to absorb the anxiety and fearfulness of their partners, becoming the family bearer of worry and tension” (Mahler) as asserted by Women’s Health expert, Susan Mahler. Through the lens of a sexual assault survivor, romantic relationships evoke fear of isolation as a result of developing agoraphobia while simultaneously feeling trapped in a sense of learned helplessness to an abusive partner. Therefore, coming forward about agoraphobia can be risky due to potential consequences inflicted by a perpetrator. It is crucial to develop a strong support system from friends and family to alleviate isolation and panic-like symptoms. Another example of trauma emphasized by Kevin Sullivan of *The Washington Post*, existed after “the Parkland shooting enabled a widespread of psychiatric disorders involving roughly a quarter of 8,000 high school and middle school students affected by the attack” (Sullivan). These disorders included symptoms of PTSD, major depression, separation anxiety and panic attacks. Agoraphobia was found to be the most widespread disorder out of all the mental illnesses, threatening the lives of students who no longer feel safe especially in a school environment (Sullivan). Additional trauma such as substance abuse exacerbates agoraphobia symptoms serving as a counterproductive coping mechanism. In juxtaposition to individuals who do not live with this illness, The Brazilian Journal of Psychiatry asserts, “individuals with agoraphobia are found to have a 32% higher prevalence of tobacco abuse or dependency” which ultimately

reduces medication effectiveness (De Matos). This is potentially perceived as a self-medication tactic to temporarily alleviate anxiety that follows trauma, yet is proven to exacerbate psychiatric symptoms. Furthermore, Williemien Langeland, researcher at the University of Amsterdam, observed, “Alcoholic patients who reported childhood abuse - sexual, or sexual and physical - also reported social phobia, [and] agoraphobia..” (Langeland) compared to patients with no background of abuse. Agoraphobic symptoms are intensified as substances become a coping mechanism for experiencing physical abuse. Therefore, support systems and the reformation of societal perceptions are imperative to sympathize with agoraphobic survivors who have faced severe trauma of sexual abuse, school shootings and substance abuse.

The media’s apathy perpetuates stigmatizing representations within social media and the film industry, escalating rapid and inaccurate portrayals of agoraphobic characters out of the selfish aims to maximize views. *Nim’s Island*, a 20th Century Fox film, characterizes Alex Rover as an agoraphobic author who hoards hand sanitizer, rarely leaving her house to even get the mail (Morris). However, the film sensationalizes Alex Rover in an unrealistic manner due to false associations of OCD and hoarding that do not always follow agoraphobia. Critics argue her character is “perched awkwardly between questing heroine and butt-of-the-joke victim” (Morris) providing a sense of ridicule, humor and insensitivity following the media's inaccurate representation. In addition, the comedy known as, “The Benchwarmers” portrays agoraphobia through Howie Goodwin who is fearful of the sun, living in a closet inside his own home. Throughout the film Howie naively claims, “For years I thought the sun was a monster” and, “Richie told me about the serial killers that's loose in our neighborhood killing anyone named Howie!” (“Benchwarmers”) which clearly belittles the challenges faced by an agoraphobic. In this way, surrounding characters dehumanize Howie for comedic and entertainment purposes

intending to produce a film sparking viewers' attention. The film industry's inaccurate portrayal of mental illness enables viewer susceptibility to anchoring bias, where they will assume an agoraphobic is simply "fearful of the sun" or always experience symptoms of OCD exhibited by their first piece of information available through movies. As a result, this does not provoke a sense of sympathy or mental health awareness but instead ridicules survivors of agoraphobia perpetuating the stigma encouraged by filmmakers. As exemplified by the media, twitter users in particular have presented insensitive and ignorant comments mocking agoraphobia. As President Trump and Melania remained at the White House for Thanksgiving during the current pandemic, users criticized their actions through sardonic comments as the dismissively posted, "I like my President without agoraphobia" (Appendix B). Other demeaning comments were followed by, "Afraid the locks will be changed?" (Appendix C) or "He doesn't want to leave the house" (Appendix D) further stigmatizing agoraphobia in the public eye that encourages acts of similar insensitive behavior. It is transparent to see that society is uneducated about agoraphobia, failing to realize how their comments lack empathy further ostracizing victims as outcasts. However, influential leaders in power must promote reformation of how mental illness is stigmatized and perceived as a weakness. Without this sense of urgency, public figures are seen to endorse mockery by failing to promote change to the treatment and media representation of mental illnesses.

Publicizing those living with agoraphobia has the ability to defy stereotypes as survivors manage the illness effectively through the exhibition of success and instilling hope among those who are suffering. At the age of 20, contributing author of *The Guardian*, Charlotte Levin developed agoraphobia, recently self-publicizing her illness to combat fallacies. Levin claims, "I don't want to let other people down" but continues to "remain[s] hopeful it will change for the

better while making peace with the fact it may not” (Levin). Here, Levin serves as an exemplary survivor and role model of agoraphobia, which is necessary exposure to eliminate self-stigma and disdain from society. Although she is confronted by challenges, Levin instills hope by disclosing, “If I hadn’t had endless therapy, I wouldn’t understand the complexities of humans to the extent I do, enabling me to write my book” (Levin). As a result, Levin normalizes seeking therapy and defies stereotypes that “agoraphobics are not all housebound” (Levin) revealing her success in journalism. Similarly, Linda Bussey shares her story of living with agoraphobia through a *Ted Talk* exposing she, “would only leave [her] bedroom to go to therapy” (Bussey) while suffering from severe panic attacks. She emphasized how at times she felt, “I was the only person who believed in myself” (Bussey), demonstrating how crucial it is to gain a strong support system instead of suffering alone. The media has the potential to serve as an effective platform to bring awareness to such disorders, opening up the conversation that has been concealed for some time. The lack of exposure regarding agoraphobia proves how difficult it can be to come forward exemplified through celebrities such as Paula Deen and Kristen Bell. In an interview with Oprah Winfrey, Paula reveals how she became so traumatized by the death of both of her parents, commencing her agoraphobia at the age of 19 (Paula). Shortly after developing this disorder she “woke up every day waiting to die” (Paula) as it became a profound fear for approximately 20 years. Publicizing her story opens the conversation for other agoraphobics in search for inspiration and hope, recognizing how difficult it is to come forward in fear of public scrutiny. In comparison, Kristen Bell divulges into her anxiety disorder in a podcast describing her anxiety as a “spiral of shame” that “can be very debilitating” (Bell). She claims she often felt, “I was going to drown” and often questioned “what is wrong with me?” (Bell). Despite living with mental illnesses discussion through the media is imperative to defy

stereotypes, promote advocacy and reform traditional perceptions that stigmatize anxiety and agoraphobia.

Stigma surrounding agoraphobia must be eliminated and introduced to society beyond merely education, but through interventions of support groups and publicizing success stories within the media to prevent isolation and suffering in silence. Schools should implement future resources such as helplines and introductions in the health curriculum dedicated to agoraphobia aiming to deter offensive language and misconceptions. The ADAA (Anxiety and Depression Association of America) should be included as a school resource to reference webinars, podcasts, blog posts and peer support groups regarding anxiety serving as an additional helpline. The media has potential as an adequate resource to disperse inspiring stories of those afflicted with agoraphobia as exemplified through Ted Talks, podcasts, and interviews. In addition, specific types of therapy such as group, individual or exposure therapy should be normalized and encouraged instead of condemned. Studies have proven that cognitive and exposure therapy have been effective in treating agoraphobia with or without panic disorder. Asle Hoffart of Clinical Psychology and Psychotherapy examined “female agoraphobic patients 3–9 years after exposure therapy and found that 76% had improved and that about half of these attained complete remission” (Hoffart). As a result, survivors of agoraphobia should not be ostracized, but treated with a sense of empathy and inclusion. Therapy should not be stigmatized, as it has the power to improve managing mental illnesses, benefitting great quantities who participate. As this disorder is further discussed, potential survivors will have the ability to find more comfort in seeking help or coming forward about their stories to inspire and promote advocacy.

Agoraphobia has been concealed through education and inaccurately represented through the media, proving how crucial it is to address this in high school health curriculum. High school

students would therefore have the ability to take advantage of their learning and reduce the stigma that dehumanizes victims of agoraphobia by ameliorating offensive language seen in social media. Helpline resources, group therapy and interventions have the potential to be effective by sharing success stories that promote inclusion and diminishing the stigma.

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Hoffart, Asle. "Cognitive and Guided Mastery Therapies for Panic Disorder: 18 Year Long-Term Outcome and Predictors of Long-Term Change." *Clinical Psychology and Psychotherapy*. EBSCOhost, [search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,cpid&custid=s9391381&db=aph&AN=112463379&site=eds-live](http://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,cpid&custid=s9391381&db=aph&AN=112463379&site=eds-live). Accessed 20 Dec. 2020.

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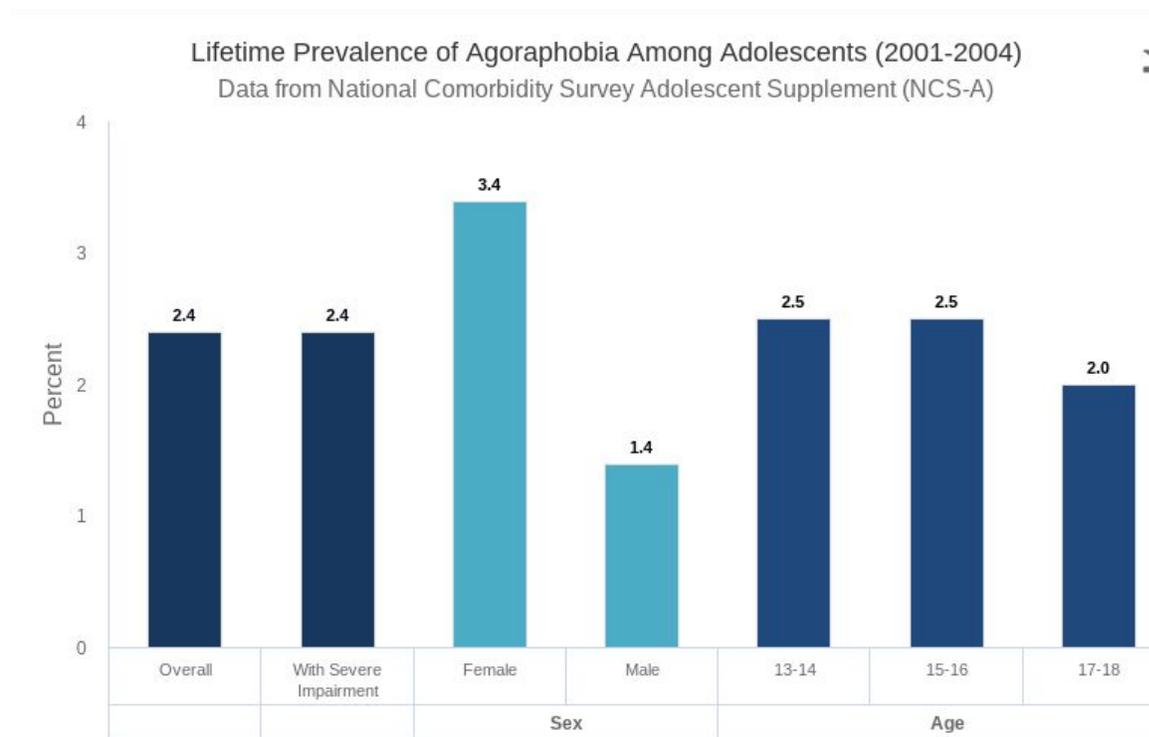
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## Appendix



## Appendix A

"Agoraphobia." *National Institute of Mental Health*, Nov. 2017,

[www.nimh.nih.gov/health/statistics/agoraphobia.shtml](http://www.nimh.nih.gov/health/statistics/agoraphobia.shtml). Accessed 15 Dec. 2020.

This graph reveals that women are more likely to develop lifetime prevalence of agoraphobia (3.4%) compared to men (1.4%) in a 2001-2004 study. The graph reduces the stigma by displaying how both men and women can experience agoraphobia and its lifetime

prevalence. Despite the fact that women are more likely to develop agoraphobia, this does not mean women are simply more “emotional” than men or face more severe symptoms.



## Appendix B

"I like my President without agoraphobia." *Twitter*, 17 Nov. 2020, 6:44, [meaww.com/trump-melania-mocked-staying-white-house-thanksgiving-going-mar-a-lago-afraid-locks-changed](https://meaww.com/trump-melania-mocked-staying-white-house-thanksgiving-going-mar-a-lago-afraid-locks-changed)

This Tweet contributes to the stigma surrounding agoraphobia by simply characterizing the President as such merely due to his decision to remain at home for Thanksgiving. The deploring tone of the Tweet demonstrates how the media perpetuates stigma by mocking and shaming agoraphobia, encouraging other users to behave or comment in a similar manner.



### Appendix C

"Afraid the locks will be changed?" *Twitter*, 17 Nov. 2020, 6:40, meaww.com/

trump-melania-mocked-staying-white-house-thanksgiving-going-mar-a-lago-afraid-locks-changed.

Twitter users desensitize the severity of agoraphobia as exemplified through this Tweet aiming to ridicule people who remain in their homes despite the current pandemic. The Tweet proves that users are ignorant to that fact that agoraphobia is more than just a “fear” or staying inside. In an attempt to ridicule the President, users are actually mocking survivors of agoraphobia who face severe hardships beyond leaving their homes.



### Appendix D

"He doesn't want to leave the house." *Twitter*, 17 Nov. 2020, 6:33, meaww.com/

trump-melania-mocked-staying-white-house-thanksgiving-going-mar-a-lago-afraid-loc

Ks-changed.

This Twitter comment is an example of how the media enables faulty assumptions and misconceptions about mental illnesses, inaccurately generalizing the President as an agoraphobic because he remains in the White House for Thanksgiving. Social media has the ability for users to form anchoring bias due to the information rapidly dispersing across platforms despite misconceptions that exist surrounding agoraphobia.

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Aaronson, Cindy. "About Us." *Anxiety and Depression Association of America*, 2010, [adaa.org/who-we-are](http://adaa.org/who-we-are). Accessed 14 Dec. 2020.

This source derives from the ADAA, a nonprofit organization dedicated to advocate for mental illness treatment and prevention through education and additional resources. The ADAA is credible as more than 1,500 professional members are psychiatrists, therapists, researchers, nurses and social workers. Information provided on their website encourages free resources such as webinars, podcasts, peer support and blog posts to provide examples of how to overcome living with mental illnesses. The ADAA consists of both quantitative and qualitative data to explain a plethora of mental illnesses and opportunities to seek helplines, ensuring resilience. This source is an effective helpline and informative resource with contributions from a variety of reputable medical and mental health professionals.

"Agoraphobia: The Fear of Fear." *TEDx Talks*, Jan. 2019,

[www.youtube.com/watch?v=oFtZUvf1K74](https://www.youtube.com/watch?v=oFtZUvf1K74). Accessed 20 Dec. 2020.

This source is an example of a Ted Talk, provided by a woman who has first-hand

experience of living with agoraphobia. She shares her life story of how she has managed her illness and different types of coping methods that work for her.

Linda Bussey describes surviving with agoraphobia, defying common stereotypes represented in the media. Providing insight through Linda's personal struggles, the Ted Talk consists mostly of qualitative data that is effective in displaying the reality and severity of living with agoraphobia, though it can be managed.

Bell, Rob, host. "Kristen Bell on Anxiety- Part 1." *The Robcast*, episode 226. *Apple Podcasts*,

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Rob Bell is a credible author of 10 New York Times best selling books and founder of the

Robcast podcast. His podcast provides qualitative data with a guest speaker,

Kristen Bell, who reveals her story of living with anxiety. This episode inspires

hope as Kristen Bell is an influential public figure and actress, discussing her

ability to cope with anxiety. She proves how despite living with a mental illness,

survivors can present resilience and perseverance helping others to overcome their

illness. This podcast best fits with examples of celebrities and other forms of

media to promote advocacy and the ability to succeed.

"The Benchwarmers." *IMDB*, 2006, [www.imdb.com/title/tt0437863/characters/nm0841910](https://www.imdb.com/title/tt0437863/characters/nm0841910).

Accessed 20 Dec. 2020.

IMDB is a popular source to access movie, celebrity and TV content aiming to provide information for entertainment programs. This source was only used to research the background of the comedy “The Benchwarmers” using direct quotes from the movie to display the media’s representation of agoraphobia. With the help of IMDB, this source fits in the section of the film industry’s role in stigmatizing mental illnesses such as agoraphobia.

De Matos, Mariana B. "Psychoactive substance abuse and dependence and its association with anxiety disorders: a population-based study of young adults in Brazil." *Scielo Analytics*, 15 Feb. 2018, [www.scielo.br/scielo.php?pid=S1516-44462018005002102&script=sci\\_arttext](http://www.scielo.br/scielo.php?pid=S1516-44462018005002102&script=sci_arttext). Accessed 20 Dec. 2020.

This source is credible because the author incorporates a variety of quantitative and qualitative data from multiple psychiatrist experts. The author conducts a study in this academic journal to evaluate the role of substances and mental illnesses in young adults of Southern Brazil. This is most quantitative data such as “Individuals with agoraphobia had a 32% higher prevalence of tobacco abuse/dependence” relating this to trauma associated with agoraphobia.

"Misconceptions about Agoraphobia." *Florida Behavioral Health*, 13 Oct. 2019, [www.behavioralhealthflorida.com/blog/misconceptions-about-agoraphobia/#:~:text=About%20in%20every%20100,live%20with%20generalized%20anxiety%20disorder.](http://www.behavioralhealthflorida.com/blog/misconceptions-about-agoraphobia/#:~:text=About%20in%20every%20100,live%20with%20generalized%20anxiety%20disorder.) Accessed 20 Dec. 2020.

Florida Behavioral Health works with psychiatrists, medicinal doctors, psychologists and other behavioral health experts to provide mental health care in private practice.

Psychologists of the FBH are certified by the American Board of Professional Psychology. This source addresses the misconceptions about agoraphobia through qualitative examples demonstrating how people dismiss the severity of this mental illness. By using primarily qualitative data, the FBH defies stereotypes and challenges the stigma that agoraphobia is not merely “all in your head” or to “just calm down”.

Hoffart, Asle. "Cognitive and Guided Mastery Therapies for Panic Disorder: 18 Year Long-Term Outcome and Predictors of Long-Term Change." *Clinical Psychology and Psychotherapy*. EBSCOhost, [search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,cpid&custid=s9391381&db=aph&AN=112463379&site=eds-live](https://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,cpid&custid=s9391381&db=aph&AN=112463379&site=eds-live). Accessed 20 Dec. 2020.

This source is an academic journal supported by Clinical Psychology and Psychotherapy including a balance of quantitative and qualitative data. This source addresses the effectiveness of therapy and exposure therapy in particular to combat the stigma and disdain behind viewing therapy. One example of quantitative data includes “female agoraphobic patients 3–9 years after exposure therapy and found that 76% had improved and that about half of these attained complete remission” providing a sense of hope and encouragement that agoraphobia can be combated and even enable success.

Langeland, Willemien. "Childhood abuse may predict social phobia, agoraphobia, and PTSD among adult alcoholics." *EurekaAlert*, 14 Mar. 2004, [www.eurekaalert.org/pub\\_releases/2004-03/ace-cam030804.php](http://www.eurekaalert.org/pub_releases/2004-03/ace-cam030804.php). Accessed 19 Dec. 2020.

Willemien Langeland is an author with a PH. D in trauma research at the University of Amsterdam. This source is an experimental research design that examines the association between alcoholism and abuse coinciding with mental illnesses such as PTSD, social phobia and agoraphobia. This source propels the trauma paragraph to display how child abuse and substances perpetuate symptoms of agoraphobia through primarily qualitative data such as “Alcoholic patients who reported childhood abuse - sexual, or sexual and physical - also reported social phobia, [and] agoraphobia”. By offering this correlation, Langeland shows how urgent stigma must be diminished and instead encourages survivors to seek help and strong support systems.

Levin, Charlotte. "Having anxiety and agoraphobia holds you back. But there are positives to be found." *The Guardian*, July 2020, [www.theguardian.com/society/2020/jul/04/having-anxiety-and-agoraphobia-can-hold-you-back-but-there-are-positives-to-be-found-](http://www.theguardian.com/society/2020/jul/04/having-anxiety-and-agoraphobia-can-hold-you-back-but-there-are-positives-to-be-found-). Accessed 20 Dec. 2020.

Charlotte Levin is an author and contributing journalist to *The Guardian* writing about her personal encounter with agoraphobia. She provides primarily qualitative data that combats common stereotypes and misconceptions following the mental illness. This is a credible source as she provides her story without any outside bias, revealing her struggle with travelling and relationships. However, she inspires hope by encouraging therapy and seeking support from friends and family.

Mahler, Susan. "Women Are More Susceptible to Developing Anxiety Disorders than Men." *Women's Health*, 2006. *Gale in Context: Opposing Viewpoints*,

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Accessed 20 Dec. 2020.

Susan Mahler is a credible author of “Anxiety Disorders” and a Women’s Health expert.

This source looks at a balance of quantitative and qualitative data, but mainly focuses on the contrast between other anxiety disorders in contrast to agoraphobia. This source is effective in defying stereotyping and generalizing other mental illnesses with agoraphobia. Women’s Health is intended for students while looking at health care and family medicine through personal accounts, case studies and other articles.

"Nim's Island: Where's the magic?" *East Bay Times*, 3 Apr. 2003,

[www.eastbaytimes.com/2008/04/03/nims-island-wheres-the-magic/](http://www.eastbaytimes.com/2008/04/03/nims-island-wheres-the-magic/). Accessed 20 Dec. 2020.

East Bay Times is a news page utilizing background information about “Nim’s Island” and agoraphobic character portrayals. This news article provides insight of what agoraphobia is and how the movie industry associates it with hoarding and OCD. This source is effective to use as background information, recognizing that agoraphobia does not truly reflect the character’s portrayal.

"Agoraphobia." *Georgia Behavioral Health Professionals*, 1 Aug. 2020,

[www.mygbhp.com/condition/agoraphobia/#:~:text=The%20stigma%20surrounding%20agoraphobia%20keeps,with%20stereotypes%20or%20other%20people](http://www.mygbhp.com/condition/agoraphobia/#:~:text=The%20stigma%20surrounding%20agoraphobia%20keeps,with%20stereotypes%20or%20other%20people). Accessed 20 Dec. 2020.

Georgia Behavioral Health practices private mental health care integrated with psychiatrists, psychologists, physicians and nurses of behavioral health. All

psychologists are certified by the American Board of Professional Psychology and have master's degrees in psychology. This source provides qualitative data of myths symptoms and characteristics between agoraphobia and panic disorder.

"Paula Deen's Agoraphobia and Fear of Death." *Oprah Winfrey Network*, 4 Mar. 2012, [www.youtube.com/watch?v=sbjxAJaoaTA](http://www.youtube.com/watch?v=sbjxAJaoaTA). Accessed 20 Dec. 2020.

This source derives from the *Oprah Winfrey Network*, a talk show host, actress and public figure of her own talk show. IN this video clip. Oprah discusses agoraphobia confronted by cooking show host and TV personality, Paula Deen. Paula serves as a credible source due to her personal experience with agoraphobia at the age of 19 shortly after the death of both her parents. Deen's story is also effective to demonstrate success, resilience, and hope for future survivors of agoraphobia.

Sullivan, Kevin. "Funeral after funeral, an emotional marathon for survivors of the Parkland school shooting." *The Washington Post*. *Gale in Context: Opposing Viewpoints*, [link.gale.com/apps/doc/A528046385/OVIC?u=cove19574&sid=OVIC&xid=26d94fb1](http://link.gale.com/apps/doc/A528046385/OVIC?u=cove19574&sid=OVIC&xid=26d94fb1). Accessed 20 Dec. 2020.

Kevin Sullivan is a contributing author of *The Washington Post*, breaking news on business, politics, current events and entertainment. In this source, quantitative and qualitative data is used to describe trauma associated with PTSD, agoraphobia and other mental illnesses. This source directly aligns with contributing factors to agoraphobia and trauma as it relates to the Parkland shooting. The source provides quantitative data such as "8,000 middle school and high school students who were affected by the attacks, more than a quarter suffered from psychiatric disorders that impaired them in their daily lives".

Wexler, Barbara. "Mental Health and Illness." *Health and Wellness: Illness among Americans*, 2013. *Gale in Context: Opposing Viewpoints*, [link.gale.com/apps/doc/EJ2062200108/OVIC?u=cove19574&sid=OVIC&xid=e7551ef0](http://link.gale.com/apps/doc/EJ2062200108/OVIC?u=cove19574&sid=OVIC&xid=e7551ef0). Accessed 20 Dec. 2020

Barbara Wexler is a writer of medicine and a chronic disease epidemiologist, with over 30 years of experience as a clinician, researcher and administrator. She is a contributor to the *Health and Wellness: Illness among Americans* defining agoraphobia and the symptoms that follow. This source propels information to clearly address the difference between myth and reality of mental illnesses or agoraphobia in particular.