

# The Biases We hold Against Mental Illness

By Jamie Berube, January 21st 2014

<https://thoughtcatalog.com/jamie-berube/2014/01/the-biases-we-hold-against-mental-illness/>

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## Cia De Foto

There are three details that I will never forget about the night I spent night in a psychiatric hospital:

The carrot-colored plastic chairs in the waiting area.

Stripping naked and removing the underwire from my bra after a nurse explained it could be used as a weapon to harm myself or others.

The echoes of moaning and wailing and screaming bouncing off of the walls from the abyss of a sterile, brightly lit hallway behind the front desk and one voice in particular, that sounded like it belonged to a young man, repeating the words “They can’t kill me!” “They can’t kill me!” over and over.

I nailed down these memories after being asked by my therapist last spring to “dig deep and try to remember any details about the incident.”

“There was a Meatloaf song playing on the radio in my mom’s car the next day when she came to pick me up,” I initially answered.

“Ok...” Dr. Finley replied, “anything else?”

I closed my eyes and brought myself back to that night at the hospital. It was a 911 call gone wrong. I had dialed the police earlier in the night in response to my stepdad’s drunken antics and rage because I was scared. In a twisted turn of events, however, my stepdad had convinced the officers who came out that I was crazy and a threat to myself and others.

After a couple of minutes of thinking more details surfaced. The chairs, the bra, and the wailing man.

I explained it to Dr. Finley. I remembered the chairs because they reminded me of the stackable chairs that I would sit on at school — cold, hard, and impossibly unkind to one’s derriere. And

also because I tried to lie down across a few of them so I could close my eyes. But the chair where I tried to lay my head smelled like urine.

I remember taking the underwire out of my bra because it was the first bra I had ever owned and I had no clue what I was doing. And you're likely not going to easily dismiss an occasion in which you have to deconstruct an undergarment under the nose of a nurse at 4:30 a.m. in a psych ward.

And finally, I remember the echoes of voices coming from the hallway because they terrified me.

I can still hear it in my head... that guy screaming 'They can't kill me! They can't kill me!' I was so young, I had no idea... I just wanted my mom. I just wanted to go home because I didn't think I belonged there. I didn't think I was a crazy person like that. I don't sound or act that way. And that's what mental illness was to me at the time because it was my first exposure to that world.

That experience and those feelings shaped how I would come to perceive mental illness, which is in part why there was so much shame and humiliation regarding my own circumstances. I didn't want to be seen as someone who heard voices and shouted demented things from behind a door in a hospital for "crazy people." And for me, that was what I thought it looked like to be mentally ill. So without knowing it, I had given mental illness an identity — an identity based on an encounter with the more extreme end of the spectrum that caused me to think mental illness was a weakness — a choice to act out of some strange desire to freak people out or attract attention. I assumed it was a fate reserved only for the truly degenerate and damaged.

A lot of people think like this. After all, when the news media covers mental health, it often does so in the most extreme situations. This feeds into and fuels the image of mental disorders and illness as being dangerous and scary, reserved only for the "crazies" of society of whom we polarize from our national consciousness as being a type of "other" which typically results in the treatment of them being marked by caution and pity. After all, someone with mental health problems couldn't possibly look and sound and breathe like us because we are healthy and they are not, right?

These are the types of toxic ideas that do incredible harm and stigmatize those who suffer and make it harder for them to seek help, causing them instead to cower away into their heads — the place they'd probably most like to escape, where they will silently suffer through a type of hell that our society has, to its detriment, failed to try and understand.

It is easy to assume things about a people-group when you view them as inherently and helplessly different from you. But when their reality suddenly becomes even subtly similar to your own, you will regret having regarded them in such a way.

My understanding of mental illness was biased and broken for a long time. It wasn't until my own diagnosis that I cast off my previous misconceptions in favor of the truth. And that truth is this: mental illness is not a choice. Like cancer or diabetes or heart disease, it can befall anyone.

No one is immune. Genetics, upbringing, and other environmental factors play a big part, of course, but those things are out of our control.

I had no choice in choosing which man my mother decided to marry. I had no way of stopping my stepdad from getting drunk. I could not help that large chunks of my childhood were spent in environments of alcoholism, abuse, and neglect. Can I blame my illness on these things? Sure. Can I blame my actions and behavior on them? Absolutely not. Understanding the root of a problem or the cause of an illness does not exempt the sufferer from personal responsibility. However, it can provide the knowledge necessary so that they can begin to heal and learn how to live differently and healthfully and at best, happily.

You would be hard-pressed to find someone who would blame a developmentally delayed person for being born with a disability. Or somebody who would shame a diabetic for having low insulin. They can't help it. They did not ask for it. They can't cure themselves. So why is it so easy to think differently about the mentally ill?

The answer is different for everyone. The media, how we are raised and educated, our political and ethical convictions, or as it was for me, an encounter at a psychiatric hospital that frightened me to the core and stained itself in my memory and forever colored my perception of the mentally ill population as consisting of scary, abnormal people restrained in straight-jackets and locked behind asylum doors.

Through my experience in therapy and with the knowledge I now have, I no longer see mental illness this way. Instead, I see it as not something to feel afraid of or ashamed to admit, but something that came along in our lot in life that we did not ask for or have any choice in deciding. And if we allow it to, it can be used for good and drawn upon for strength. But learning to find strength in what we perceive or our told is our weakness, or what makes us "nuts" or "crazy" by society's standards, or our own, is a hard discipline to learn. Even harder to practice consistently. The rewards, however, are worth it a thousand times over.