The Reason Behind My Tattoo

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Recommended Citation
Available at: https://surface.syr.edu/intertext/vol26/iss1/9

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Picture this: a lovely looking and friendly building. A nice, red brick structure with lots of windows and open spaces. There are people outside conversing and minding their own business. But on the inside, there are broken souls, sad, tired eyes, and skittish teenagers who avoid your eyes when you try to talk to them. They are all housed in what seems like an invitation to satisfaction. But it’s chaos inside.

It was a breezy autumn day on September 24th, 2014. The night before, I had told my mom I didn’t want to live anymore. I was sitting at the dining room table, surrounded by piles of papers. I was trying to do my geometry homework, which was one of those lame memory cue pictures where you had to make a picture out of a word. My word was “cir-
cumference,” and I was making many poor attempts to make a circle out of that word. There were about ten crumpled up pieces of paper next to me; they sat next to each other in defeat. My mom walked into the room with a concerned look on her face.

“Olivia, are you okay? You haven’t been yourself for a while. I’m starting to worry about you.”

“I’m fine, mom. I’m just frustrated with my geometry homework.”

One part of me thought, Yeah, she does. Just tell her how you feel. The other part of me thought, You really are fine. Just keep your feelings to yourself. No one cares. It was like a devil and an angel were sitting on each of my shoulders fighting for attention. Thankfully, I listened to the shoulder that had the angel on it. “Just say it,” I thought. My mom was still standing there, and I knew she wasn’t going to move until she got an answer.

“Mom, I don’t want to live anymore.”

I saw her composed facial expression suddenly drop like a rollercoaster at the top of the hill ready to plummet to the ground. Her face was as white as a ghost. She started to tear up. I hated seeing my mom cry.

Her voice trembled as she said, “Olivia, you’re skipping school tomorrow. You need help.”

Iulked back to my room, ready to face insomnia again for what seemed like months on end. Studies say that approximately 18 to 34 percent of young people with high levels of depression seek professional help (Gulliver et al.). I’m so thankful my mom was able to help me get to a professional. I got out of the car from what seemed like the world’s longest car ride.

“You okay, honey?”

“I guess. I’m just nervous. And tired.”

“Well, this is going to help you.”

We walked through the heavy glass door. A rush of frigid air hit me as I walked into the building. I looked around. The environment was quite bland. It kind of looked like a doctor’s office. My mom walked to the front desk to talk to the receptionist. I sunk into one of the black leather couches. I heard muffled voices as my mom talked to the receptionist. About ten minutes later, I heard my name.

“Olivia, come here. You’re going to meet with a counselor.”

I broke into a sudden sweat. The hallway leading to the room felt like a long, endless tunnel. Finally, we arrived. My mom and I walked in. There were lockers, a couch, and a mysterious door.

The stranger who brought me there said, “Please put your belongings and your coat in the lockers. Olivia, you can follow me into this room.”

A flood of questions entered my mind, like an overflowing river after a hurricane had hit. Why do we have to put our stuff in these lockers? Why is it so cold in here? What’s behind that door? How is this going to help me?

I entered the other room, and the stranger opened a computer. She asked me all the ordinary questions, “When is your birthday?” and “What is your address?” Then came the tough questions. They were like a slap in the face. Have you been experiencing feelings of hopelessness? Are you having trouble sleeping? Do you take medication for anxiety and depression? Do you have trouble focusing?” All the questions were overwhelming
me, and my head began to spin. I answered them timidly. Then it happened. The face drop. “Why is this happening again?” I thought.

The stranger then said, “Based on your answers to these questions, we’re going to have you stay overnight so we can do some more evaluations.”

My stomach dropped so far down it felt like it was never going to come back up. My mind went blank. My breathing became fast and heavy. My world was falling apart and there was nothing I could do about it. I didn’t even notice the stranger leave the room. My mom walked in. She just sat there and looked at me.

I got up in what seemed like slow motion. My mom walked me out of the room, and we retrieved our belongings from the lockers. Then, we walked down that endless hallway again for what seemed like forever. The stranger swiped a card, and a door opened, leading to another hallway. The walls were dark blue, and pictures of “happy things” like puppies, kittens, and flowers were hanging on the walls. Everything felt like a weird, scary dream.

The stranger swiped her card again, and we entered what looked like a typical hospital hallway. It was eerily quiet. Suddenly, a rush of patients came to the side of the nurse’s desk. They were given a Dixie cup full of pills and a larger cup of water. One by one, the patients took their pills. A nurse came up to me, and I was broken out of my trance. “Hi sweetie, I’m going to take you into this private room to check for any scarring on your body.” I reluctantly went into the room, because what other choice did I have? The nurse spoke again.

“I’m going to need you to take off all of your clothes, including your underwear. I know this is awkward and scary, but I promise, it will go by quickly.”

I succumbed to the awkwardness and took off my clothes. The floor tiles were cold. I felt so vulnerable, so weak. She inspected me and saw I had no signs of scarring or cuts. She looked surprised, but in a good, hopeful way. In fact, I’d never self-harmed before. I’d only thought about it, as well as suicide. It’s a term known as “suicide with no intentions.” It’s common.

After that, I put my clothes on and went back outside to see my mom. The nurse sat us both down and explained that the suicide ward was full, so I’d have to stay in the eating disorder ward until someone got discharged and a room opened. All of this was so foreign to me. The inviting red brick building suddenly made me feel alone. More alone than ever before. As my thoughts wandered, I felt my mom grab my hand.

“Alright,” said the nurse, “We have to take away your shoelaces, your necklace, your sweatshirt string, and the drawstring from your pants, because those are all things you can harm yourself with, even though you haven’t shown any signs that you’ve been self-harming. Also, your mom can bring you more belongings. I gave her a list of acceptable and safe items. I know this is hard, but we’re here to help you.”

I felt my mom squeeze my hand even tighter. The nurse said, “I’ll leave you two alone, so you can say goodbye for the night.”

“Goodbye?” I thought. Then, a new set of questions arose from my brain. Does my dad know I’m here? What about my siblings? What are my friends going to think, and how are they going to react? What about my teachers and peers? I felt so numb inside, so empty. My mom em-
braced me so tightly, I never wanted her to let go. After I said my painful goodbyes to my mom, I was walked down that dark blue hallway again. The happy pictures on the walls seemed to mock me. The nurse swiped her card again and we entered the eating disorder ward. Inside the ward it was quiet, and I was led to my room. I already knew I wasn’t going to be sleeping that night, let alone any night going forward.

The nurse then turned to me and said, “In a couple minutes another nurse is going to come in to do some blood work.”

I looked at her and nodded my head. She left, and I sat on the bed in silence, alone with my thoughts yet again. A knock on the door interrupted my thoughts. A nurse walked in with a rolling machine. The first thing she did was take my blood pressure. She put the gadget around my arm and started pumping. I thought to myself, *This is how I feel right now. Life has a hard grip on me and it keeps getting tighter and tighter and tighter and tighter. I just want it to stop.*

The nurse stopped pumping and it slowly started deflating and losing its grip. *Finally,* I thought.

“Alright, now it’s time to do the blood work. I know needles aren’t fun, but it’ll be over before you know it.”

I had a feeling I’d be hearing that phrase a lot. “It’ll be over before you know it.” Next thing I knew the nurse was saying, “Relax, I’m going to insert the needle now. 1, 2, 3.” It felt painless going in. I was so preoccupied that it was over in a flash. The nurse left with her rolling machine that now held a capsule of my blood. I heard the wheels scrape and drag across the floor until the sound faded away. I fell asleep shortly after.

It was hustling and bustling when I woke up the next morning. I sat up and realized where I was. A feeling of uncertainty and loneliness crept into my mind, like it always did. But this time it was deeper, rooted inside myself.

A nurse walked in and said, “Olivia, your mom brought some more of your things. We can get them to you after you eat breakfast.”

About an hour later, I came back after eating breakfast and a nurse gave me my clothes. She then handed me a folder. Inside of it was a piece of paper with two names on it, a psychiatrist and a counselor.

The nurse said, “You’re going to meet with your psychiatrist today to discuss possible treatment options.” I nodded my head dismally.

An hour later, I met with my psychiatrist. He started saying words like “clinical depression” and “pills” and “lower doses versus higher doses” and “side effects.” All these words gave me extreme anxiety. My stomach started doing somersaults.

“Uh, my mom specifically said she wanted me to try counseling instead of pills,” I said.

“Well, that usually doesn’t work, so pills it is.”

“I want to talk to my mom, you’re not listening to me.”

“Alright,” he said with a tone of annoyance in his voice.

I called my mom and explained the situation. The psychiatrist then tried to speak over me, and my mom stopped him dead in his tracks.

“My daughter will not be taking any pills. Period.”

“Alright,” he said.

I got up and left the room, then it came. Tears flooded my eyes and wouldn’t stop. A
nurse came over to comfort me, and I cried it all out, because that’s all I could do. I later got assigned a room in the suicide ward and transferred my things there. I looked in my folder and saw a calendar. It laid out the things we did each day. I saw “Art Therapy” and “Visiting Hours” and “Individual Sessions.” These words comforted me and made me feel a little better than before.

The next morning, we had breakfast. When we came back there was an art therapy session. The lady was super nice, and she played happy music. We sat there, drew, colored, and discussed releasing our bad thoughts. I could tell the lady’s intentions to make us feel better were genuine, and it made me feel better about being where I was.

After another sleepless night, we had group sessions with our counselors. We filed into a room with our counselor, and he asked us to share our stories. Many of the patients described their addiction to drugs and alcohol, their self-harming problems, or their abusive relationships. Suddenly my problem seemed so insignificant. I didn’t want to even say why I was there. But I had to. And I was dreading it.

“All right Olivia it’s your turn.”

All eyes were on me. I broke into a nervous sweat.

“Umm...uhhh...” I stuttered. “I’m here because I have really bad anxiety and depression. And suicidal thoughts.” Everyone stared at me in awe. It was as if it was difficult for them to understand that I didn’t self-harm.

My counselor looked at me and said, “Good Olivia. Thank you for sharing.”

Visiting hours arrived, and I felt relief for the first time in what felt like forever when I saw my mom. She hugged me with tears in her eyes.

“Mom, I’m scared. I feel so out of place.”

“I know honey, I know. It’ll be over before you know it.”

The visit felt like two minutes rather than an hour and half. I said my goodbyes once again, and it was time for bed. Yet another sleepless night was upon me. The next morning, I felt extra sluggish. Not getting any sleep was catching up to me. Today we had individual sessions with our counselors, and I wasn’t looking forward to it. I’m not good at being vulnerable. I walked into the room and sank into the leather arm chair.

“Hi Olivia. How are you today?”

“Tired,” I responded.

“Have you been having suicidal thoughts lately?”

I sat there and pondered my answer to this
question for a couple of minutes.

“I haven’t as much,” I said. “I just feel anxious all the time, especially about my schoolwork and catching up.”

“Well that’s a nice improvement. You know Olivia, a lot of the patients look up to you. They see how strong you are.”

But I didn’t feel strong. I felt the exact opposite.

“Oh,” I mumbled, looking down at my feet.

I suddenly understood why the other patients thought I was strong. They saw I was somehow okay, and so did my counselor. I was a ray of hope in this chaos.

My counselor spoke again and said, “Since your suicidal thoughts are beginning to subside, we are going to discharge you, and have you go to the outpatient center associated with the hospital, so you can slowly transition back into school. I think it’s going to help you tremendously.”

I let those words sink in. I felt like I was perpetually falling again. Why? Because it wasn’t going to be “over before I knew it.” I had a whole other stage to go through, and I’d just gotten used to this one. I looked at my counselor and nodded my head quietly.

I was discharged the next day. My belongings were picked up and put into bags. I sat there waiting for my parents to be done talking to the nurses about slowly transitioning me back into school, and what it would be like for me to catch up with my peers. About twenty minutes later, I was allowed into the room. My mom held my hand. My counselor and the nurse explained to me what they had just discussed with my parents. Then, my dad started crying. Never in my life before that moment had I seen my dad cry. It was extremely painful. We were then allowed to leave. I walked down that damned dark blue hallway one last time. The happy pictures didn’t mock me this time. It felt relieving to finally escape what seemed like a scary, never-ending dream.

We walked out of the heavy door and I felt the cool, crisp air of fall. I still felt helpless, but I felt at peace in a sense. My mom started the car, and the song “Rather Be,” by the band Clean Bandit played on the radio. To this day, when I hear this song, it reminds me of my time at the mental hospital. The car ride home that day didn’t feel like it dragged on like when I first arrived. Maybe I was going to be okay, and maybe this was going to be over before I knew it.

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Anxiety, depression, and mental illnesses are very serious, and it’s time we stop romanticizing them and discrediting people’s feelings. It’s time to break all the negative stigmas concerning mental illness. You’re never alone and getting help doesn’t mean that you’re weak. I hope my essay shed some light on how serious mental illnesses are, and what it’s like to have one.

Please see my brochure on mental illnesses and how to help people who have them on the Intertext site. An adaptation of the brochure appears on the next page.

Works Cited

Mental Health:

Breaking the Stigma

Olivia Velazquez

Types of Mental Illness

There are multiple forms of mental illness. The most common four are depression, anxiety, Obsessive Compulsive Disorder (OCD) and eating disorders. Depression consists of feeling severe despondency and dejection. Anxiety is a constant or reoccurring feeling of worry, nervousness, or unease that typically arises in an imminent event or something with an uncertain outcome. OCD is an anxiety disorder in which people have unwanted obsessions and engage in behaviors or mental acts in response to such obsessions. Any range of psychological disorder characterized by abnormal or disturbed eating habits is known as an eating disorder.

How to Break the Stigma

Get Educated! Know that a person struggling with mental health does not choose to have a mental illness. Mental illness does NOT equal “crazy.” Being able to recognize mental illness is the first step in helping.
What is Mental Illness?
disorders that affect your mood, thinking, and behavior

Possible Treatments

There are plenty of ways to help someone with mental illness. One thing many people resort to is counseling. While counseling is generally a helpful resource for many people, it doesn’t work for everyone. There are different types of therapy, such as DBT Therapy, Art Therapy and Music Therapy. It is suggested to try counseling and different types of therapy before considering medication. Like most antibiotics, certain medications have side effects which have the potential to hurt a patient instead of helping him or her. If you or a friend are seeking out treatment options, refer to the resource information below.

Campus Resources
Syracuse University Counseling Center
315.443.4715
200 Walnut Place
Syracuse, NY 13244

Syracuse University Health Services
315.443.9005
health@syr.edu
111 Waverly Avenue
Syracuse, NY 13244

Other Resources

Suicide Prevention Lifeline
1.800.273.8255

Substance Abuse and Mental Health Services Administration
1.877.726.4727

To see Olivia Velazquez’s brochure, visit Intertext online at http://wrt.syr.edu/Intertext