

NIP
BEYOND
THE BARRIER

*Felicity
Bielovich*

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DEDICATION

To my husband Nicky
and Elizabeth, Cathy,
Linda, Debby and Mum,
without whose love *my house*
would not have been restored.



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FOREWORD

The worst thing about mental illness is that it deprives one of the right to be oneself. Oh, yes....everyone is very sympathetic and concerned. They look at you with sad eyes and they hug you, but behind your back they shake their heads. When you talk, they take about as much notice of you as if you were talking in a strange language and, if you are the subject of their conversation, they act as if you were not there.

Mental health workers do a tremendous amount of good work among people with mental illness, but is it not strange that they are seldom given credit for their efforts? What is often forgotten is that patients with mental illness have human rights and, in fact, are the most important members of the treatment team.

Felicity Bielovich's account is not a typical case. It is far more common for persons with mental illness to cause great harm to themselves by refusing to take their medication, but it alerts us to the fact that mental health workers *do* make mistakes, usually because they do not take their patients into their confidence. To establish rapport with a person who is mentally ill is extremely difficult, but this is no excuse for riding roughshod over the patient's human rights, especially if there is little danger to the property and lives of others. There are many today who believe involuntary treatment should be prohibited and, although I feel this would be difficult to implement, I do believe our mental health services are grossly neglected, forcing professionals to take unwarranted shortcuts.

The author of this delightful book shows us that the solution to our mental health problems often lies within ourselves, and that the main task of the mental health worker is to facilitate the efforts of *the patient to find the solution*, rather than subject them to arbitrary experimentation without their co-operation.

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INTRODUCTION

In our lives, there comes a moment when we are confronted with a traumatic event of such magnitude that our lives are brought dramatically to an end or unsignposted crossroad. The event is so intensely experienced that our future can be altered forever, depending on how we react to it.

Take rape victims for example. Their immediate response may either be by way of denial - burying the incident deep within their subconscious, hoping it never resurfaces to haunt them - or by becoming garrulous to the point where friends start avoiding them.

A similar response may occur when there is a sudden loss of a child, spouse or parent under tragic circumstances. Being unprepared for such a catastrophic event, life stops abruptly until balance is restored. But in some of these cases there may be the added dimension of regrets like not having said goodbye, sorry or I love you. No matter the event, it has to be dealt with to overcome emotional pain.

Most of us, at one time or another, will fall victim to the anguish of being struck numb and dumb in a moment. However, if we are to survive and become authentic people, we need to find a way to reach *wholeness* because, in spite of tragedy, life carries on.

There will also be those moments when, like Martin Luther King, we will be able to say, "I have been to the mountain". Moments of self-encounter when we experience the emotion of exquisite, unadulterated joy and are grateful for being alive. These moments may be fleeting and far apart, but they form the cement essential for rebuilding our lives when they are shattered or broken. For some reason or another, these brief moments are seldom given the prominence they deserve. It is far easier to hold a dinner party captive by relating, sometimes with the goriest details, the accident we witnessed on the way over, with everyone adding a "first hand" experience of their own. Perhaps the reason for this behaviour is that we are wary of revealing our "mountain experiences" because they reveal too much of our interior life.

Bearing that in mind, I invite you to share my trip "to the mountain" on Friday December 11 th 1992, at a sumptuous banquet held in Johannesburg for the finalists in the Perm Prime Club Golden Achiever Awards. This competition was the brain child of Paola Spinazze, founder and Publisher of the bi-monthly, glossy

magazine, TOMORROW. I was a finalist in two of the six categories, and at the end of the formalities was announced the Best Overall Winner!

I was both stunned and elated as I walked across the dance floor to thunderous applause from my husband, daughters, sons-in-law and the audience, to receive the award.

Looking down at my family, seeing their tears of happiness and love, I humbly thanked God for this bright and shining moment of indelible joy. Only 'I was aware of what they had suffered and the support I'd received from them, when I lived in the abyss of darkness and despair where my husband's butcher knife appeared to be the only alternative to my emotional pain. At that moment I felt proud, and oh so grateful, as the thought crystallised that I hadn't left them a legacy of shame and horror, but had instead created a night in Camelot.

Like all good things the night of the stars drew to a close, the finalists returning to their suites to re-examine their trophies, bask in their achievement, sleep soundly, awakening refreshed to a celebratory breakfast.

We as a family made our dignified exodus too, but once in the suite we romped around, laughing and hugging each other, as we opened the many envelopes with some R60 000 of fabulous sponsored prizes. Our daughter Elizabeth, never at a loss for words, quipped: "Mummy, if this is what happens when you survive an Institution, everyone will be rushing to get there!"

Regaining our equilibrium we said our goodnights, they returned to their homes and we climbed into bed, my husband falling asleep in minutes. I was still on cloud nine, got up and went to the window, and looked out upon the myriad of lights spreading a starry blanket over the sleeping city. Slowly I opened the window of my mind, giving passage to the pain of the past, reliving the journey I'd undertaken to go Beyond the Barrier; a story I'd like to share with you....

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PART 1

Chapter One

THE JOURNEY DOWN

Looking back to the early 1980's, I was an ordinary housewife with extraordinary stamina. I had four daughters in high school, was on the PTA, involved in charity and church work, did all our sewing, baked every weekend, visited and entertained our friends. Mornings belonged to Me! Afternoons I became a general factotum taxi-ing the girls from one end of town to another for athletics, dancing, swimming and art lessons. I had survived many operations and dramas along the way, and with twenty years of good marriage behind me, I was in control. In fact life was very good to me.

Every night my bed welcomed me with soft sheets and in the morning I was happily up and doing. My husband went off to the family business and came home in time for supper with us, and an account of the day's events. I was an honest-to-goodness, down-to-earth mum. So what went wrong?

My back started giving me chronic pain, affecting all areas of my life. I woke up so stiff and sore that it used to take me 15 minutes to get out of bed and straighten up. Getting in and out of the car was an agonizing exercise, every movement of my legs triggering off more pain.

I visited an orthopaedic surgeon, who carried out a myelogram (dye injected into the spinal cavity) revealing advanced disc damage requiring surgery, from which I made a speedy recovery. But I abused my back, lifting and carrying heavy things, necessitating a spinal fusion the following year.

I spent fourteen weeks flat on my back at home, in a fibre glass cast from chest to knees. It was a period of great self-control and discipline for me, as I was not allowed to put on any weight. During this time I experienced many discomforts, having to eat meals lying on my side, drinking through a straw (only being able to lift my head 15 centimetres) and coming to terms with all the refinements of a bedpan! A very humbling experience for anyone.

My bedroom was like Piccadilly Circus as visitors, friends and family shared our hospitality around our double bed, now raised on two wooden, coffin-like boxes. However, I soon adapted to my changed lifestyle and with a pillow resting on my stomach to prop

up my book, I read, wrote letters and listened to music, living as normally as possible within my limited framework. Every night, when my husband washed me, I used to fantasize about when the cast would come off and I could enjoy my first bath. However when this exciting day arrived my muscles were so weakened from the total lack of exercise, that it was another three weeks before I had my first wallow. With the aid of a brace it took a further three months before my life returned to normal.

I mention these details to emphasize that during all that time of considerable pain and discomfort, I didn't once find a need for any medication other than that which could be purchased over the counter. Even when my father died two days after my cast was removed I attended his funeral, having to lie on a mattress in the side chapel! The support of my family and a sense of humour carried the day.

One year later, as a result of a previous car accident, my knee required surgery. After 10 days in hospital I returned home to hobble around on crutches for six weeks, having also had a tumour the size of a head of garlic, removed from the arch of my foot. I'd always put the pain and discomfort down to ill-fitting shoes. Once again there was no need for any medication.

Six months later, I came down too heavily on a bench at a sports stadium breaking my coccyx, involving further surgery. Any remaining vestige of pride was stripped away, convalescence was slow and painful but having an optimistic disposition I was once more able to avoid medication.

A year later I was X-rayed for acute pain in my pelvis and had to undergo a pelvic fusion. Another three months in bed, with one concession however. I was allowed up once a day for "action stations", which involved getting into a complicated harness for the major event of the day!

Not having daily help, there were times when I had to resort to 'phoning my husband at work to come home immediately, and without his understanding and wit on those days I would have become depressed. On maidless days, visitors gained access by using the front door key, which I attached to a walking stick and passed through an open window! When our daughters returned from school, college or university, my problems were over as they took over running the house. Family and friends delivered meals regularly and their support, encouragement and compassion was invaluable, once again preventing my turning to medication!

After twelve weeks in bed, I was "harnessed" for two months, graduating to a corset. I was able to walk around the

house, have a bath and sit for very short breaks. However, the longer I stayed up and the more active I became, pain built up till it became so excruciating that 10 metres became a torture as currents of pain swept into the pelvic area, making me feel as if I was plugged into a live socket. My body finally screamed ENOUGH, and ground to a halt.

Returning to the orthopaedic surgeon who had performed the fusion, I was referred to a gynaecologist who injected me with massive doses of oestrogen. This proving unsuccessful he called in a colleague for a second opinion, who agreed that physiotherapy was the answer. It was not. In desperation our G.P. suggested a leading neurologist who immediately hospitalised me, putting me on a drip for three weeks. A twilight existence, vaguely drifting in and out of sleep for meals or visitors.

After three weeks of this soothing stupor I left the clinic, walking; the pain dulled by medication. It was such a relief to be able to walk again, that I never questioned the therapy. In retrospect, this was my major mistake. However I do believe a dual responsibility lies here, the onus resting with the doctor to inform the patient about the medication and its side effects. This is seldom done because the roles are so clearly defined. "I am the doctor, YOU are the patient," doesn't really allow for argument. I feel that somewhere there must be common ground for simply "talking".

Ignorantly and trustingly I went home armed with an unholy trinity of anti-depressants, sleeping pills and tranquillisers, totally foreign to me and my body. I paid monthly visits to the neurologist for EEG's (electroencephalographs) and nerve monitoring tests. On these visits I complained that I still had pain in my pelvis despite the medication as well as a "funny, thick-feeling head." His response was to increase/decrease/alter dosages, or a combination of these approaches.

These varying cocktails began making insidious inroads into my personality, as a sense of remoteness and detachment settled over me like a blanket. I became agitated and restless in company, avoiding participative listening. I couldn't settle down to anything, my concentration span was very limited. I became anxious and scared without reason, wishing to be left alone in a corner, or preferably buried in a deep, deep hole.

My nights were spent tossing and turning, waking up bathed in sweat, fear oozing from every pore, urging me to the bathroom in search of another pill to return me to oblivion. I dreaded the sunrise, simply wanting to stay in bed doing nothing. I walked around the house aimlessly, invariably ending up in the car to go somewhere....anywhere. Confusion became the order of the day as

I found myself in shopping centres, wondering how I had got there or for what purpose, becoming panicky when I couldn't remember where I had parked the car.

Getting behind the wheel I felt powerful, invincible and invisible, and with caution thrown to the winds watched the needle climb to 180 km, believing that if I pressed down hard enough on the accelerator I would fly over the bridges along the highway. Looking back, I thank God that my recklessness never killed anybody.

Were my family aware of what was happening to me? Only up to a point. Never having indulged in self-pity or talking about myself, I used to gloss over how I really felt, so that I could remain in control. A brave face and stiff upper lip had served me well in the past and earned me respect. I'd overcome major surgery with stoicism and fortitude, made remarkable recoveries and I wasn't about to let anyone know or suspect that FELICITY couldn't handle this latest problem.

I knew I was unravelling like a ball of string. All areas of my life were becoming increasingly disturbed, erratic and fragmented. My vision was blurred and out of focus; voices sounding distant. I was running off to the bathroom to shed copious tears and swallow tablets, trying to stave off being sucked further and further into myself. Stubbornly I held onto my pride and mask of deceit, refusing to ADMIT and SHARE, Felicity was NOT COPING. Another major mistake.

You may wonder if I ever refused the medication? No, I did not! WHY?...WHY? Firstly, because I had been raised to accept, without question, the wisdom of authority figures in my life. They were always RIGHT. Secondly, the most recent blood tests indicated a malfunctioning pituitary gland. The doctor confirmed that this was the seat of my problem and prescribed medication, thus multiplying my unholy trinity tenfold! I was convinced he had arrived at the correct conclusion. The cure lay in the pills....the doctor had SPOKEN.

My intake by this time was some 15-18 pills a day. My feet, legs and face were swollen. I had lumps in my breasts, sebaceous cysts in the armpit, a blocked urethra (all involving hospitalisation) and so entered the revolving door of urologists, gynaecologists, physicians, cardiologists, radiographers and pathologists.

My emotions, already very distorted, deteriorated drastically at this point when I was told over the telephone that new blood tests

revealed a suspected tumour on the pituitary gland. I didn't share this horror with the family, feeling ashamed of so often being in and out of hospitals and consulting rooms. I kept quiet and WORRIED. All for nothing I may add, because three days later I was 'phoned once more and told the wrong reading had been taken. No apologies for the knotted bowel and extra 1000 grey hairs!

As there was little or no communication between the various disciplines involved, no one had an overview of what was ACTUALLY happening to me as a PERSON. I was treated as a mere "symptom" on the other side of the desk!

Emotionally I was swinging from one side to the other, my energy expended on trying to stay glued together. My mind kept going off at a tangent, a deep-seated urge to jump in front of the "four minutes past five train" surfacing at regular intervals. It took a little while before the significance of the train penetrated my confusion. It had been the train on which I regularly commuted, some 24 years earlier.

I was entering what I now term, "no man's land." An emotionally desolate area with a massive landmine-SUICIDE - only needing the slightest tremor to trigger it off!

However, not realising or recognising the volatility of my emotional state at the time, I undertook to drive our youngest daughter Debby to Springs for her final debutante's dress rehearsal, totally unaware this would release the trigger.

Upon arrival at the hall, all the mothers settled down while the boys and girls nervously waited for instructions. However, as the night wore on and they rehearsed over and over again, the continuous cacophony breached my defences. My thoughts became increasingly irrational, as feelings of agitation, alienation and disorientation surfaced, as well as the urge to jump in front of the "four minutes past five train!"

Intense anxiety and fear gripped me in the bowels and I went to 'phone our eldest daughter Elizabeth to come and fetch me immediately. That evening is still crystal clear in my mind as I remember her arriving with her fiancé' George, a fifth year dental student and while I explained my feelings to them he kept expounding on the effect benzodiazepines (family of tranquillizers) have on the brain, saying, "Mrs. B you have to get off those tablets!" But I never believed him, what did he know? He wasn't a doctor!

I felt calmer when we arrived home and explained to my

husband how I had been overcome with panic at the dress rehearsal, breaking down and sobbing as I told him. He was very concerned, never before having seen me in such an emotional state. Holding me close he tried to comfort me, suggesting a cup of tea, a warm bath, a good night's rest; and I would be fine in the morning!

Grasping at straws, not wanting to alarm him I did exactly that, swallowing my *cocktail* with my tea. Sleep eluded me however, as the "four minutes past five train" kept resurfacing from my subconscious, beckoning me to come for *a ride to nowhere!* I must have fallen asleep because I remember waking up bathed in sweat, going to the bathroom and seeing the haggard face and haunted eyes of a stranger, staring back at me. I walked to the family room, where a crucifix hung, my Catholic upbringing challenged to the limit as an alternative to my agony surfaced....to commit SUICIDE. It stuck like a dirty word to my palate, my tongue thick with loathing, unable to detach it.

Ways of HOW to do it darted furtively, feverishly, frantically around in my head. I could run away, change my name, go to a foreign country, jump in front of THE train, drive the car abandoning it when it ran out of petrol, become a tramp. Options cancelled themselves out so I returned down the passage, stopping to look into the bedrooms and study the innocent, vulnerable faces of my family, peacefully asleep. I felt revulsion, self-loathing, desolate, alienated, nauseous and utterly helpless. By now my whole body was again shaking and sweating profusely.

My head throbbed, my vision blurred and I felt a migraine developing. Irrational as it may seem, I believed if I got it under control I would be back in charge by morning. With tablets for my migraine and an ice-packed face cloth for my head, I returned to bed. In a very short time I heard the family preparing themselves for another day.

I saw them off, with the ice-pack pressed onto my eye, but said nothing about the previous night's desperation, believing "I" was back in control. I returned to bed, but within minutes of their departure my anxiety and fear returned with a vengeance. Once again I was back at the crucifix begging, pleading for what I no longer knew and convinced I would not be attending Debby's debutante ball that evening. I had to be gone before she returned from school....had to, HAD TO.

I went off to the kitchen to make myself a cup of tea, and when I opened the drawer for a teaspoon my husband's butcher knife, all 35 centimetres of it, stared benignly up at me. I returned to bed with the tea and the knife, which for some mysterious reason gave me a measure of comfort. My frantic search was over, I didn't have to run away, I could drop anchor. The knife crystallised, with searing clarity,

where my solution lay.

My emotions suddenly veered like a weather vane, hysteria mounting and conflict raging I saw my Bible still lying open from the previous night's desperate search for help, and heard the echo of where my roots lay. I belonged to Christ and, picking up the telephone before I changed my mind, spoke to my husband, pouring out my torment and telling him I had his knife in my hand.

His reaction was calm and immediate, "I'm on my way, cookala!" Replacing the telephone, I felt emotionally drained and exhausted, the tears streaming down my face, the knife still in my hands. The battle was over, I had lost.

My husband realising the time it would take him to reach me, telephoned a very dear friend down the road who arrived within minutes, very shortly followed by my husband, my mother and a priest! The curtains were still drawn and I was still in my nightdress, knife in hand. My face must have told them the story for no one asked for the knife. My mum's presence was very comforting as she offered me tea, repeating several times, "Nicky, it's those damned pills."

For me it was the longest day of my life.

Chapter Two

PURGATORY

Living outside the Johannesburg area, my husband had to pull strings get me admitted to a city wing outside hospital with psychiatric facilities. I remember that night well, as I was admitted via "Emergencies." There were accident victims being treated and a hive of activity and I was very frightened, not knowing what was going to happen to me. While my husband filled in endless forms, I was led off to a doctor who repeatedly asked me if I was hearing voices in my head, making me feel there was some underlying factor of which I was not aware; perhaps he thought I was crazy. I felt threatened and uncertain of what was happening and when the formalities were completed, I wasn't reassured on entering the psychiatric ward, where another round of questions had to be faced from the sister in charge.

She told my husband to leave and when I asked that he be allowed to stay and see me settled in, she refused on the grounds that I had already caused him enough trouble, couldn't I see how tired he was and where was my consideration? At my most vulnerable, the burden of guilt was placed on me. I pleaded and begged her, becoming hysterical as I saw the door closing behind him. It was a physical wrench and I performed like a banshee screaming "Nicky come back, come back," banging on the closed door. The male nurse and the guard were summoned to restrain me, while the sister sedated me.

In the morning, feeling worse than ever and much subdued, I was interviewed by two psychiatrists. I was asked over and over again if I was hearing voices in my head. I was not, but didn't know how to convince them, so kept breaking down and crying. In the days that followed I underwent many different evaluations and tests. There were dozens of multiple choice questions to answer with little ticks in boxes, completing puzzles and pictures, much like an IQ test. If they were searching for some mental disorder, I am sure they could have found one because I was in no state to be accurate. My husband and our four daughters were subsequently interviewed individually to see whether they could add to or subtract from my pitiful contribution, and give a reason for my behaviour.

Meeting with no success in this, I was brought before a panel of students where I was probed and analysed like some impersonal, abstract artifact. I found this humiliating in the extreme, never discovering what their learned findings were. I was led back to my ward like a goat on a string, nervously

chewing through all the medical jargon I'd only partially digested during their analyses.

One thing became self-evident. I wasn't making any progress; in fact I was worse. Whereas at home I had been trying to cope, fighting for survival against all odds, here I had totally given up. My well-groomed appearance disappeared and like an old building I fell into a state of neglect and disrepair.

However I wasn't conspicuous in any way, everyone looking much the same. Spending three months in the ward I saw "them" come and go; young girls arriving hysterical after failed attempts to end it all, unemployed who'd overdosed, manic depressives, psychotics, schizophrenics. It must have been traumatic for my family to see me as part of all these broken people. But they never criticized me, always encouraging me in every possible way, heroically visiting me every day, never showing what they were feeling.

After several interviews and still on medication, with no positive results, the last resort was TRIED. ECT (electro-convulsive-therapy). I emphasize tried, because no guarantees come with it. Some people have very dramatic, positive and beneficial results, while others do not respond at all.

So I was subjected to a procedure over which I had no control (my husband's consent sufficed) no guarantees, no information - left ignorant of FACTS! Once again I felt like a goat on a string, only this time I was being led to a foreign pasture.

The procedure itself was unthreatening. Lying on an examination bed with the doctor standing at the head, a rubber snorkel-like mask is placed over the nose and mouth, an anaesthetic is administered in the arm....and it's over! Physically I felt nothing, but emotionally I felt scarred. Being left in ignorance, I associated myself with the Jack Nicholson character in "One Flew over the Cuckoo's Nest" believing I would end up having a frontal lobotomy!

I never voiced these fears, giving them power to fester and breed like a fungi in the dark recesses of my mind, to resurrect and then later haunt me. Feeling tainted and stigmatised, I wouldn't admit to anyone that I'd undergone this procedure, being resentful and angry with myself that I had lost control of my brain for those brief moments.

Months later, an article appeared on ECT in a magazine, notorious for sensationalism, confirming my hidden fears of memory impairment, convulsions, premature death, probabilities

of Alzheimer's or Parkinson's diseases and other horrors. Having learned to share my fears by this time I discussed it with my GP who reassured me, saying that the predictions were gross misrepresentation and untrue, but unfortunately the article was never repudiated by the medical profession.

In my case the procedure was unsuccessful so it was back to more questions, digging and searching into my uneventful past for hidden clues. I was taken back to early childhood and adolescence and asked to recall relationships with family, teachers, peers. A cross examination of feelings and reactions which had been long dealt with but now relived and scrutinized, only adding further to my diminishment.

I mention this, not as a criticism or judgment of the psychiatric discipline *per se*, but rather to point out the general lack of communication between doctor and patient in all disciplines. The psychiatrists tried so hard to get to the root of my problem, that I felt guilty being unable to give the answers. Somewhere a meeting point must be found where patients don't feel they are on trial.

During the three months I spent at the city hospital, I made several observations and comparisons between general and psychiatric wards.

The most obvious was the absence of smells and noises peculiar to a general or surgical ward. There were no sisters or nurses aides going off to the sluice room with covered pans or bowls bearing emptied syringes, no red lights alerting the staff to crises. Neither were there any gurneys lined up waiting to take their supine, toothless, capped, half-gowned, sedated patients to the theatre. Nor were there any muttering, groaning, whimpering, crying patients waiting to be re-deposited corpse-like onto beds prepared and waiting to receive them behind drawn curtains to the soothing, hushed whispers of spouse, family or friend standing at the foot of the bed. Having "someone on the scene" is a fantastic support system, enfolding the patient in an envelope of security.

Another glaring comparison was the almost total lack of flowers in the psychiatric ward, confirming my growing suspicion that, depressed persons seldom receive them because they fail to meet the obvious criteria...EXTERNALS. It is the bandages, plaster casts, pulleys, weights, or gallstones in a jar which evoke sympathy, compassion and flowers. Better still is the five-in-one drip or a monitor beeping out to all and sundry that the Reaper is on standby. Suddenly everyone is *bonded*, regaling their own nearly fatal epic, ad nauseum! Another comparison between the different wards was that the *externally* sick had all the services rendered to them. Beds made up, meals delivered to the bed, ice-water next to

the bed. The patient is Mrs. Smith/gallstones; Mr. Brown/prostate; Baby Jones/hernia....Identity and Status!

What chance does a depressed patient have against such odds? He or she cannot evoke positive responses, as anyone who has suffered in this way knows, because it is all INTERNAL. Yet it is worse than any *external* illness, because only when it has slowly corroded and eaten into the core of one's psyche and emotional well-being, destroying the will to live, does it reveal its malignancy in personality changes abhorrent to those around. Their simple, ignorant and often glib response is an admonition to "snap out of it," "pull yourself together," "its all in the mind," compounding the diminishment further.

Were it as easy as that, there would be no need for psychologists or psychiatrists. There are whole areas and types of depression which only these highly-skilled professionals can recognise and treat, and it would be irresponsible for me to generalise over-simplistically under my singular frame of reference. Having said that however, I still found depression to be an orphan, pariah-like illness when it came to its treatment and believe it is an area where the Hippocratic Oath could be more vigorously applied, embracing empathy and compassion in a more positive, humanistic way.

My major obstacle to overcome was that, as a patient, I never had any RIGHTS to which I believe one is entitled. Patients should be given adequate information about their clinical status; they have the right to know and share in the decision and choice of therapy being suggested. Many doctors, aware that they are often seen as "gods" should step down and see their patients as people, not merely submissive, silent subjects or mere symptoms. Their understanding and recognition of these rights would certainly improve the psychosocial rehabilitation of stigmatised patients.

In the psychiatric wards where everyone is *internally* sick, you do everything for yourself and there is little distinction between one long, sour, juiceless lemon-like face and another. We rose at 6 am, made our beds, used spotless communal ablution facilities, exercised and received our medication at the nurses' station in an atmosphere of non-verbal communication. Meals were served in a community dining room, in polystyrene subdivided trays, under supervision to discourage anorexia and avoid malnourishment, most of us preferring to be dead. The staff certainly tried to encourage us to eat and were always polite and understanding.

We signed ourselves in and out whenever attending occupational therapy, chapel or other departments for tests.

After our main meal at lunchtime came the highlight of the day, a holy hour on the bed! Anyone who has ever been depressed would agree that the ideal would be 24 of these, but this was *pie-in-the-sky*. Being such a sorry lot, no one interested in dialogue or reading, we could thus indulge our miseries to the maximum. It was the only hour when we were in control.

I acquired new hobbies and skills in the Occupational Therapy Department, where every conceivable field of interest was on hand to develop skills, co-ordination, encourage relaxation and rehabilitation. The therapists worked tirelessly and patiently, teaching us macrame, basket and tray making, with all the messy, necessary paraphernalia; wet cane soaking in huge tubs of water, and so on.

One could turn pottery at the wheel, weave on a loom, sew at a machine, knit, embroider or learn the art of mosaic laying. There was a little kitchenette nearby, where scones and cakes could be made and served later with tea. There were the fascinating arts of woodburning and leather work; purses, belts, keyrings and wallets being the order of the day. The sexes were not encouraged to fraternize but if women chose leather work or woodburning, they went to the toolbench in the corner where the men were invariably huddled.

Aside from the soothing voices of the therapists, explaining various techniques for the chosen therapy, there was little or no talking; unlike the usual curiosity of patients in a general ward where husbands, children and other minutiae are discussed. Here, everyone was rooted in their own misery, their apathy apparent, yet left undisturbed as each stayed entombed in SELF.

There were also therapeutic activities like painting and drawing. Everyone was given large sheets of paper and huge, fat crayons to draw pictures, explaining them later while sitting on the floor in small groups. Being like a lump of yeastless dough at this stage, I would take a handful of these crayons, scribble away and then refuse to participate in the verbalisation, believing the therapists were looking to read a deeper psychological meaning into them, thus labelling and pigeon-holing me.

Working with a person like me must have been frustrating and unrewarding, but the therapists never showed disapproval or criticised me, always remaining patient. From my experience, I believe they deserve better recognition for their valuable contribution in the field of rehabilitation and mental health.

I spent three months in the occupational therapy department and being very capable with my hands, I soon mastered the many domestic hobbies. Feeling particularly bored one day, I ambled over to

the toolbench and sat down alongside the obvious *outsider* in the group. Rumour had it he was an ex-convict. The therapists had said not to fraternise but being anti-establishment, anti-everything in fact, I befriended him, not merely out of curiosity but because I also felt like an outsider.

I initiated our first conversation, asking him to teach me woodburning which he did with such consummate skill. Feeling neither threatened nor superior, he agreed and an immediate affinity sprung up between us which I think lay in our perceived worthlessness. In no time we were confiding and sharing our innermost thoughts and feelings with each other. Our backgrounds were irrelevant and unimportant, our conversation always focusing on the NOW. I learned he had been in prison on a drug offence and was at the hospital for psychological evaluation.

Because of the major role he played in my recovery, he will always be very special to me. He was thirty-something, lean of body, olive skinned, with dark brown, penetrating eyesand gently spoken. His strong, bony hands were constantly fidgeting in and out of the pockets of his multi-zipped motor bike jacket, like a squirrel foraging for nuts. He always wore tatty, faded blue jeans and liked to impress upon me that his tapered shoes were genuine leather. They certainly looked it, his pride lying in keeping them spit and polish clean.

The more we shared our experiences, *sotto voce*, the more relaxed and trusting we became, intimately describing our emotions to each other. Having been through a similar experience to mine when he was still heavily into drugs, he concluded my problem lay with the medication. All I needed to do was stop. But how could I achieve this, constantly being under supervision? He simply replied, "Walk out!" If I did this, he said, I would be sent to a State psychiatric institution where he "knew" rehabilitation didn't include drugs.

He was so convincing, my emotional ground so fertile, that the seed didn't even need time to germinate. I decided to go *that day!* I waited until the night staff were due knowing that during those few minutes when they handed over, I could slip out. I went to the guard standing at the door, saying I had permission to go to the chapel and would be back in 20 minutes, and he let me go without any fuss.

Once outside the hospital however, I had no idea where to go. I had no money and was dressed in winter clothes in the middle of summer, the air conditioning always being so cold. The first place that came to mind because of its proximity was an isolated Johannesburg park, notorious for vagrants.

When I arrived there I found the entrance locked but undaunted climbed over a 6ft fence; quite a feat for a 43 year old in a straight dress to boot! Normally I'm scared of the dark, but the night held no terrors for me; that was to come later. I felt I held some mysterious, hidden power which not only protected me but also made me invisible, because from the rock on which I sat I could see my ward in the hospital, but they couldn't see me! I was so totally out of touch with reality that when I saw a shooting star I thought I had inspired it!

After several hours, I heard my name being called over and over again by my husband, brothers-in-law and a posse of policemen. Momentarily panic-stricken I hid in a bush, watching their torches flashing up the steep pathway, peering and poking into the dense shrubbery. Suddenly the shrub, behind which I was hiding, was pushed aside and I came face to face with my husband! I don't know who got the biggest shock.

Emotions were running high and I heard comments about how irresponsible my behaviour was, should be ashamed of myself for the anxiety caused and other caustic remarks, compounding the guilt already imposed upon me the night of my admittance. My husband's reaction was extraordinarily kind and non-judgmental. He was so relieved at finding me unharmed. His major concern was being unable to take me home with him, because he had to inform the hospital and another police posse in the area where I'd been found. His love and empathy healed the guilt that I was to feel later when I returned home.

However when we returned to the hospital I had to face the music.... when a doctor is summoned from his bed at 1:00 a.m. to deal with a runaway patient, it's a high-pitched tune! He read the riot act, slating me for having placed him, the staff and hospital in such an invidious position, adding that if the sister in charge hadn't deduced (from our obvious association) that my leather-jacketed friend may have known my whereabouts and questioned him, I may have been a statistic in the Sunday papers! This was probably true and partially excuses his lack of concern regarding my personal well-being.

Once more I was to blame for HOW I behaved rather than WHY! I was peremptorily dismissed with his words ringing in my ears; in the morning I was to be committed to a State facility where I could be held at the discretion of the President for two years. My friend's prediction was correct.

Coming out of the office I saw him standing in pyjamas in the corridor. Our eyes met and he said, "Jeez man, you got me into big trouble!" I apologised for the trouble I'd caused, but

failed to thank him for his sound advice. The only one who showed any concern for me that night was the male nurse in the ward who brought me a cup of warm Milo and some biscuits (I'd eaten nothing since midday) and said, "things could have been worse!" When I asked him what he meant, he said that having easy access, he was on drugs himself and *understood!*

In the morning my husband and daughter Cathy, now in her final year at the College of Education, arrived to take me to the State facility. I wasn't sorry to leave the hospital and the hostile atmosphere engendered by the staff, which made me feel like an expelled pupil who had blotted her copy book.

Hope you enjoyed the first 22 pages of my book. Go ahead and read the rest of my story by going to the following webpage and order ***Beyond the Barrier***. I promise it will change your life

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