Inside a psychiatric ward

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Rather than working on strengthening these patients’ sense of self, this psychiatric hospital seemed to rob them of what little they had left.*Photo: Getty*

‘Everybody hates being here. People talk about killing themselves, not because they want to die but because they want to get out of the hospital’, said my friend Julie.

It’s not the sentiments you’d ordinarily expect from a hospital patient. But then this is no ordinary hospital. It’s a psychiatric hospital in inner-city Melbourne. Patients spend around $9500 per week to be there but it ain’t no Golden Door health retreat.

Many are there against their own will. My friend Julie is one of the lucky ones. She admitted herself in order to come off anti-depressants and so was able to leave (although even then, she had to insist on leaving). Detoxing from anti-depressants is no picnic. In fact some people find the withdrawal so difficult they are unable to cease their medication.

Julie suffered from postnatal depression and anxiety after the birth of her son four years ago, but is otherwise a fully functioning mother, wife, university lecturer and professional painter.

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If your idea of psychiatric wards comes from *One Flew Over the Cuckoo’s Nest*, then you’re not wide of the mark.

Many of the patients — most of who were women — looked scared and unsure. They either stared blankly into space or were looking around skittishly like kittens that have been kicked.

And it’s not surprising. Many of the patients are infantilised. During one of my visits, a nurse commented on a landscape Julie had painted in an art therapy class.

‘Oh you’ve got a little bit of artistic flair, haven’t you?’ she said. Aside from the fact that Julie is a professional artist, the nurse’s tone was what you’d expect when praising a three year old’s finger painting.

Patients are also forced to assume child-like behaviours, such as being ‘allowed’ to walk once around the oval once a day, and lining up together four times a day for their medication. One night Julie sat in line for over two hours.

‘Patients were becoming anxious, crying and shaking because they were waiting in line so long and because their bodies where craving the medication they were expecting two hours ago.’

And it wasn’t just her artistic accomplishments that Julie was patronised about. Due to some error, Julie’s admission paperwork stated that she suffered anxiety. Yes, she was anxious when she arrived — who wouldn’t be anxious at the thought of spending a week in a mental hospital? — but she was not ‘suffering from anxiety’.

Nonetheless, every day, staff asked about her anxiety. When she clarified that she was not suffering from anxiety, they looked at her like she was delusional, as if she didn’t even know why she was there.

When Julie expressed frustration that she wasn’t being listened to she was told by a doctor that she was presenting as anxious and he suggested prescribing some medication for her anxiety disorder.

‘I quickly realised I had to monitor my body language and expression so I wouldn’t come across as manic or emotional, otherwise they would diagnose me with something else and try to prescribe more medication’, said Julie. ‘When you question authority you’re told that this behaviour is part of why you’re there. But whole point of being there was that I wanted to get off the drugs.’

This wasn’t the only case of over-prescribing. At night Julie wanted some medication to help her sleep — a not uncommon procedure in hospitals. But, rather than giving her valium or a sleeping tablet as she requested, she was told that she could only have Seroquel.

Seroquel is an antipsychotic drug used to treat schizophrenia**,** bipolar disorder, and recurrent major depressive disorder. It also turns you into a walking zombie, unable to focus, remember or have clear thoughts.

‘You do feel crazy when you are doped up on Seroquel and you can’t remember anything or can’t think clearly. You can’t focus when you’re on that sort of medication. All you can do is colour in. All these women are just sitting around colouring in mandalas.’

A big part of mental illness is losing your agency, feeling as though you have no control over your life. If you end up in a mental health facility then you are probably already doubting yourself.

But rather than working on strengthening these patients’ sense of self, this psychiatric hospital seemed to rob them of what little they had left.

‘The patients have no control over their lives.’ Julie said. ‘They have no idea how long they are going to be in hospital, the doctor only visits a couple of times a week and they have no idea when that will be. There doesn’t seem to be any one-to-one tailored sessions according to patient’s needs or progress and there is no emotional support. The staff seem to be suffering from compassion fatigue.’

With all the debates about mental health funding and the efforts to de-stigmatise mental health problems, we also need to focus on the type of care mental health patients are receiving.

If what I witnessed during my time visiting Julie over a week is any indication, then it’s likely that the ‘cure’ will be worse than the disease.

**Kasey Edwards is the best-selling author of 4 books *30-Something and Over It, 30-Something and The Clock is Ticking, OMG! That's Not My Husband,*and *OMG! That's Not My Child.***[**www.kaseyedwards.com**](http://www.kaseyedwards.com/)