

In A Nutshell

"I could be bounded in a nutshell and count myself a king of infinite space..."
Wm. Shakespeare

Autumn, 2007

A Dissident Voice

by Paul Strashok

When I think about my role in society in general and especially within the mental health system, I realize that I still want to speak out against injustice. I realize that my voice is somewhat that of a dissident against the modern status quo.

The dissident's voice is largely underrated within our modern homogeneous culture. Just as John the Baptist came in his day as "The voice of one crying in the wilderness", so our modern spiritual wilderness needs those who will cry out against oppression, corruption and violence. John the Baptist was an example of the dissident in his day. He was brought up in a Levitical, priestly line, but rather than wearing the fine robes and doing the priestly exercises, he retreated to the geographical wilderness outside Jerusalem and wore camel's hair, a leather girdle, and ate locusts and wild honey. In his own way he was a perfect end to an era, the Old Testament age. He stood against the tide of corruption in his culture, speaking out against the rulers of that time.

Now, I would freely admit that I am not perfect, but that cannot prevent me from speaking out and challenging a social order and a psychiatric system to overthrow the stumblingblocks and offences of legally approved violence and systemic error. The day of the use of outdated barbaric techniques of oppression and forced compliance are passing away to be replaced with the new ideals of compassion, tolerance and healthful, meaningful dialogue. There are better techniques in dealing with mental illness, than the old 'trap

and seclude' mentality. Some of these better techniques have been around for a long time, and some of them are newly emerging. The psychiatric profession, as a whole, must become more flexible and allow for the implementation of alternative therapies of choice and the clients of mental health

services must not be afraid to exercise their rights to informed consent for treatment.

In my own journey, I went through a long period of non-compliance with the mental health system and suffered many cruel and torturous periods of incarceration. My own personal epiphany came when I realized that, as an individual who had had so many

'episodes', I was bashing my head against a stone wall. Before that time I was fearless, but then I learned to fear – to fear forced incarceration as a

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"The psychiatric profession, as a whole, must become more flexible..."

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threat to the progress of my life journey. My night torments for many years revolved around the theme that I had been rehospitalized against my will, but I would awaken to find myself safe and comfortable in my own space.

Recently, though, I was rehospitalized for the first time in almost seven years. It came as a shock because I had almost believed that I had finally broken the cycle. I was in an altered (or for those who seek spiritual truth 'altared') state of consciousness that led to damage to my own physical body as well as delusions in my mind. Recovery was rapid, since I found release through music and communication with other 'inmates'. I had plenty of support from my housing workers and my immediate family. And now the thought that comes to me so strong is 'opportunity'. As long as there is life and breath {and freedom outside of hospitalization) there is still 'opportunity'.

As a dissident looking at the general social order of our present day, I would cry out and say – "You cannot measure the value of human beings in terms of dollars and cents – you cannot put a price on human rights!"

And, more honestly as a dissident looking at the state of the mental health system in Vancouver, I actually see many positive events taking place.

Consumers are having a stronger voice in the system. There are organizations that are totally consumer run and consumer driven that allow for a greater voice throughout the mental health community. And, finally there are those exceptional individuals, some of whom I know personally, who have 'broken the mold', the stereotype of the average mental health consumer (if there is

such a thing). They have gone on to lead productive lives and settled down in family situations and they have struggled long and hard to escape the emotional degradation of not having control over their own lives.

As for me, in my darkest moments, I take comfort from the One who is 'touched with the feeling of our infirmities' and 'ever lives to make intercession of our behalf', the

Risen Christ. The promises of God in Him are Yea and Amen (not nay and cursing), which means to me that every positive blessing applies and any negative stuff can just go by the board until it is finally dealt with. This continuing journey of life is to be loved, even if only because of the fact that, while we're alive, we still have opportunity! May we always recognize true opportunity and make the most of it, even as we approach the end of this present age-time. ■

"..every positive blessing applies and any negative stuff can just go by the board..."

Quotes:

"If enacting laws is society's way of enforcing personal virtue, then what becomes of the rights of the individual?"

de Paul

"In a democracy dissent is an act of faith. Like medicine, the test of its value is not in its taste, but its effects."

J. William Fulbright

The Editorial Board of **In A Nutshell** welcomes letters, articles, and poetry on mental health issues from you, our readers.

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In Memory Of A Mentor

by Jim Gifford

Rolf Jonsson, one of Crescent Beach's most notable and recognizable faces, has died one week after turning 75. His simplicity, cheerful attitude and relaxed manner, endeared him to all those who met him.

The son of a Swedish schoolmaster, Rolf attended Agriculture College, served as a weatherman for Sweden's Air Force and, when wanderlust struck, caught a freighter to see the world. He was headwaiter to the Captain's Table. He was stuck in Buenos Aires during the Peron Revolution and recalled street fighting and gunfire.

By the mid '50s, Rolf arrived in Canada and, after a spell in Alberta, landed work in the Lower Mainland as head herdsman on a farm of 600 dairy cows. He recognized each one's name and number simply by looking at their faces and heads.

The farm family also had a Crescent Beach home. Rolf would come down regularly and take care of the grounds. Forty years ago he moved to the beach where he became village gardener and caretaker of properties. In the process he developed life-long and close friendships with his clients.

He was a vital spirit in the community, founder of the local Polar Bear Swim Club and

organizer and president of the Halloween bonfire at Camp Alexandra. He was a force in the Neighbourhood House, serving as director on the board of management for many years. For his dedication to volunteering time and energy, Rolf was honoured as an outstanding citizen in the Greater Vancouver Region.

Rolf was a man of honesty, integrity,

reliability, practicality and common sense, yet it was his goodwill that was his hallmark. His warmth was contagious, a twinkle in his eye, always a ready chuckle and, undergirding everything, a mystical sense of inner solitude and serenity.

Rolf possessed the common touch – that special gift of character of one who could walk with princes or paupers. He never dwelt on externals. He connected directly with the hearts of hearts. As an

observer of life, he was as deep as the ocean, noticing the poignancy of little moments in the passing parade – an empty chair, an absent friend.

Rolf, you were the glue that held the village together. You made our day. Now as you depart from our midst, we wish you bon voyage.

"Rolf was a man of honesty, integrity, reliability, practicality and common sense, yet it was his goodwill that was his hallmark."

Quotes:

"Many of us carry memories of an influential teacher who may scarcely know we existed, yet who said something at just the right time in our lives to snap a whole world into focus."

Laurent A. Doloz

"If a man carries many... memories into life with him, he is saved for the rest of his days. And even if only one good memory is left in our hearts, it may also be the instrument of our salvation one day."

Feodor Dostoyevsky

The Sands At Seventy

by Terrence Levesque

He invoked the ghosts of the past to help him in his present day. He knew that they were just a memory. They had no bearing on what he would be doing today or tomorrow. Still the memory was strong.

Over the years he had read extensively and he liked to know of all the significant past writers and poets. He paid close attention to the dates of their births and deaths. He incorporated these facts into his own life until they became part of him as he walked, lived and breathed.

The real people that he had known had now passed on or they had moved away and had gone in a different direction. There were the writers past and present that he had liked. This was the make-up of his life and he had to come to terms with the ghosts of his past.

He was now sixty. He was becoming a senior citizen. Yet the sands at seventy called out to him. What mystery was yet to unfold? Would one live that long? He did not believe in making a plan for the future because the future was unknowable. He was just going to carry on and do the best he could.

He was quite aware of the passing time. He knew that he was now living in another time, a time where the past had separated from the present day. He wanted to keep going. He wanted to live as long as he could. This was the heart of the matter

In his own life he had his family, but he did not see much of them. His mother was still alive and was now ninety-one. Here now, in the 21st century, he had lived in two different times. He was grateful for the time that God had given him.

Would he reach the sands at seventy? He did not know. Live for today, in this moment, right now. That was his philosophy. There is a saying that I have heard in the obituaries that says there

is a bond that time cannot sever, love and remembrance last forever. It has a truthful ring to it and is well said.

I would go about my business in the hustle and bustle of this life. I hope to live unto a ripe old age. We will see if it comes true. Now I leave you in a dream yet to come. Tomorrow will bring another day and I will carry on.

*"In our world
today we must
protect the inner
man."*

We live in an age of mass media, where any significant event goes around the world. The individual is lost in a sea of information. I believe the individual has a part to play. It is his life and death - the fact of his very existence, the fact that he is an individual in the world. What may be important to you may not be important to him. Everyone sees the world from his or her own perspective. This

is not psychology; it is human nature. To view your own life, to get a handle on it is a hard thing to do. In the world around us we are often distracted from the real business of finding out who we are. In our world today we must protect the inner man. But outside there is a lot of traffic in the street. Life goes on.

And I, too, see the world as an individual, from my own personal cares to the larger world. I often spend some time in clearing my mind so that I am not carrying the weight of the world. I often walk quietly on the street, just taking in the atmosphere. I think many things; some of it is trivial. What are we except living human beings?

It is important for me to find a quiet place where I can get in touch with the inner man. The rush of life distracts us. Yes we live in an age of mass media. I do not think that this will change any time soon. And remember, we are all individuals in the world.

Destination Medication

by Frank G. Sterle, Jr.

I sound dopey and medicated, I'm told, as a person taking multiple types of psychiatric medication. Although I usually don't notice my intoxicated state of mind, when I do, I find myself pondering where life has taken me – a man who relies on a disability pension and who consumes that proverbial ball and chain known as mandatory-treatment medication.

But I do readily consume my medication, without exception, for I suffer with chronic anxiety, severe depression and obsessive compulsive disorder (OCD).

Unlike one person I know who endures schizophrenia, amongst other mental illnesses. He sometimes skips taking his medication when he feels like he doesn't need it, as though his medication is like some sort of aspirin.

Then there's that other person I know who took herself off of strong psychiatric medications that she'd been prescribed, in both hospital and at home. To this day, she claims that mental illness is basically "a choice" and that mentally-ill folk, like me, need naught but to change our way of thought and need naught but to will or pull ourselves out of the mental-illness rut. I, however, retort that anyone who escapes their medications perhaps should never have been placed on the medication in the first place, but rather given intense treatments of counseling. It's simply not true, I believe, that I could escape my medication cocktails by simple will power. I tried once to escape my anti-psychotic medication (my late-1980's psychiatrist's idea), and I relapsed back into psychosis. Of course I settled down once I was placed back onto the medication.

I was first hospitalized in Spring, 1987, as a 20-year-old person. Matters were bad: I would sit in a downstairs room at home, in the dark, with the rolling-blinds pulled down as far as they'd go. I sat in this pitch black, wearing a large rosary

while listening to the Christian radio station (or the next station up, then-CJOR). For three months or so, I'd either sit in that room or else in my room upstairs in the dark; but I would not leave the house.

Until one day, there was a knock on the locked bedroom door. My father called out to me; however, when I opened the door, there stood Dad, our family doctor and an unfamiliar psychiatrist.

A few days later, after being hospitalized, I was placed on Stelazine, which turned out to be hell. I could not sit still, let alone relax. I literally had to keep moving – whether that be walking, riding a bus, etc. – or sleep, the latter which was aided by the Xanax that I was also prescribed.

The psychiatrist discharged me, and also prescribed a weekly injection of some other anti-psychotic medication that seemed to only make me more restless.

It was only after two or three injections that I told my psychiatrist that I wouldn't be taking that

medication anymore; and not long after that, I quit taking the Stelazine.

A couple of months or so later, he prescribed me an anti-depressant, Imipramine, that seemed to help, while he also left me on the Xanax he'd prescribed months before.

This status lasted a year, until I began to relapse back into psychosis. I then informed my psychiatrist about matters, and he re-admitted me back onto the psychiatric ward. This time, however, he prescribed me Thioridazine, an anti-psychotic medication that worked wonders for me. For the first time in a long while, I wasn't constantly battling my OCD. It truly was great.

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(continued on pg. 13)

Minute Particulars

by Andrew Feldmár

News item: Monday, August 20, The Colbert Report aired a segment on Vancouver psychotherapist Andrew Feldmar's troubles with U.S. Customs.

Linda Solomon broke this story on The Vancouver Observer [<http://www.thevancouverobserver.com>] and the Tyee [<http://thetyee.ca/>], then the story hit the blogosphere. It triggered coverage by The Globe and Mail and the New York Times, and along the way was spotted by someone who worked for The Colbert Report.

The famed satiric right wing talking head Colbert sent a crew from New York to film Feldmar and his son Marcel in Vancouver last week. They filmed the senior and junior Feldmars in the psychologist's Vancouver home and then at the US/Canadian border. What follows is the lead story in both the above web news magazines, an account by Marcel Feldmar of the day:

à Leaving my home in L.A. for a quick almost rock star jaunt to Vancouver, I arrive on a recent Monday night at 10 pm.

My father Andrew picks me up and we go back to the house for a little snack, a couple of his famous Martinis, a little talk about how strange this all is, and then bed...

Andrew wakes me up at 5:30 in the morning to get ready with enough time to have coffee before the film crew arrives. They say they'll be there at 6, and sure enough, at 6 am sharp they are at the door.

They take about an hour to case the joint and set-up, and everyone is really friendly and professional -- taking their shoes off, and being extra polite, which is kind of strange because it seems to me that around L.A. all the people constantly

filming get a little rude and obnoxious. They do a great job at making both Andrew and I feel comfortable and at ease. I think it is probably to make up for the insults that they are going to be throwing at us later.

Keep a straight face

So, the way the Colbert Report seems to operate is pretty much to push as far towards the

Conservative as possible in order to make it come across as just wrong. Jeff, the producer, does the interview, his assistant Aaron is there, a cameraman and a sound guy. Jeff sits with Andrew and asks questions like "How does it feel to be a druggie?" "Where do you hide your stash?" and "Are you high right now?" I'm trying hard to not laugh out loud -- and Andrew holds his own and hams it up -- saying things like: "High? Yes, I am just over six feet high." And "I'm not having flashbacks, you are."

Thinking back on it -- I can see how they could easily edit the clips into some crazy video mash-up of a crazy man in a nice house, but I'm just hoping they don't make too much fun of us.

They have Andrew light and smoke a pipe while arguing about how he doesn't smoke a pipe, stir a cup of tea for about three minutes, meditate, and listen to my iPod while looking a little blissed out. "Do it with great beatitude." Jeff instructs. Little shots for what they call the "B" roll. Then after having referred to me as a "Bongo Poet" they do a little interview with me, outside, as opposed to Andrew -- who was filmed inside, asking if I was teased in school because my dad was a "hippie" and if perhaps it was harder to mail drugs over the border now.

They do a shot of me holding my poetry chapbooks and then standing and looking cool outside.

I do mention my band, the Black Kites, saying how it is a shame that my dad can't even see us play because he's banned from entering the U.S. But who knows what will get cut.

They mention they might want to use some of our music, but nothing else is said about that so I don't think it will happen. They might have used up their Canadian Drug Story budget on airplane tickets.

To the border

I manage to get a few nice pictures, sort of behind the scenes style. It is definitely interesting seeing my parent's house transformed into a small set location.

They do a couple of cheesy things – like hang a Canadian flag behind Andrew and a U.S. flag behind me. (I was supposedly supposed to be “on location in Los Angeles” so the flag is there to prove it, I guess).

Then, speaking of cheesy, they have me play a silly little drum thing – definitely not my style, and not my sound – but I figure I've played the Bongo Poet role and I just go with it. I state that if my band sees this they will be so making fun of me... (The band has confirmed this fact). I don't manage to be as clever or as witty as Andrew, but that's ok. I think I hold my own.

Then we go for a drive, past Crescent Beach, down to 0 Avenue, to do some filming by the little border statues, or metal posts, that I had never seen before, but I guess they run along the road as border markers every couple of miles. It is all fields and farmland where we end up, and the posts are stamped with United States on one side and Canada on the other. They film Andrew standing at one, after leading the camera crew through the brush, saying “follow me, it's over here. This is it, as far as I can go”. Then to a different border spot where Andrew looks forlornly into the distance, and then they have him looking through binoculars and it all sort of has that bad after-school special or Hallmark movie-of-the-week feel to it.

A shocking turn

There is a barbed wire fence running all along the field by the second border stop, about four feet high, and I am bending down trying to get some

“artsy” photos, when all of a sudden I am literally knocked over by what feels like a kick to the head. I sit on the ground slightly stunned, and the only person who notices is the soundman, who looks over at me and mouths “Electric?” I sigh and nod, whispering back, “Electric.”

I think my cell phone got a bit frazzled by the experience, but I am all right, and very thankful that it wasn't captured on film.

Then they have me stand on one side of the marker, and him on the other. The camera is framing a close-up on Andrew so you can't tell that I am there, and then like the end of a sad movie, they reveal me standing there -- so close -- but we can't touch.

“I love you son.” “I Love you too, dad.”

And then sigh, turn, and walk away in opposite directions.

That's a wrap

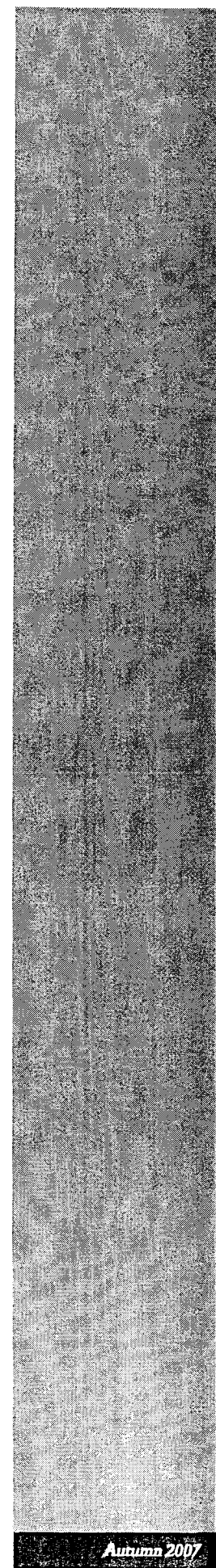
After all of this, the hours of footage they shot will have to be cut down to 3.5 minutes. That's where, I guess, the magic comes in. For all I know they will show Andrew stirring a cup of tea, and me playing a bongo badly, and leave it at that.

Seriously though, I think Andrew did really well. It should be a pretty funny segment -- and a little bit silly too (hopefully in a good way).

We leave the crew at the border stop because they are going off to interview a U.S. border guard, probably to ask him if he got a medal for keeping out the undesirables, and if his family is really proud of him, and Andrew and I go straight to the airport. I manage to get a seat on an earlier flight, so we part ways at the airport -- him off to London, me to L.A.

A surreal and strange adventure, and definitely worth the trip. Even if this doesn't solve the border issues, I hope it helps get the word out there, and maybe someday (soon) they will allow Andrew to travel freely in the States, to help people who need help, to visit his children, to just be who he is.

[The episode in its final form can be seen at <http://www.ifilm.com/episode/22227>]



My Schizo-Poetic Soul

by Alex Winstanley

Uncle! your golden skin is taut like a bow

You fill a stained glass jar with liquid light.

You gut me like a fish
and leave me to dry beneath the jungle moon;
an orchestra of crickets
sings me back.

Words like arrows shoot from me:

Paradise is a moment of incomprehension,
expanded over thousands of periods of time,
overpowering the rational mind,
and giving birth to the moment of wordless understanding
that our minds transcend this dirty street,
this treeless landscape.

I swore I would ride the heaving waves
of colossal divinity that crest on this earth
and swell to the sky from the sea.

But all my misplaced sanctity drained away from me
and left me stranded in the artificial light
of a lime-green room.

“Where is God?
God is in my head.
Please get him out!”

Six months pressed
against the cold stone wall,
normal again, set free.

With an arrow in my side
I explore tentatively
but my soul is sore.

One day a bolt of lightning hits my home.
I jump up excitedly and look out the window.
My uncle holds words like arrows.
I tell him I stutter and speak softly and can't form
my words

One Year After Psychosis

by Alex Winstanley

Elijah – my former self –
give me a ticket into the past;
remind me of your word-passion, your confidence,
your understanding of the Light.

I dread I will be trapped here, alone, without expression...

Time spreads her magical wind about my soul and
moves me through her dimension.

Tears wash over the aether
as I move slowly, painfully, through her gentleness.

I am alone in this ocean of misery,
with but memories to remind me.
And the scented embrace
of a former lover.

Out of the sunrise the past twenty-one years
shine at me.
What end could there be
if someone has taken scissors to this picture
and separated the moments into sterile mundane suffering?

I know my words are trained like dog
to follow the scent of love.

Red mists flow past me over the waters;
unknown truth shimmers before my gaze, enticing.
If I reach too far I will fall
into
that old night.

ECT - I Don't Think It's For Me

by Frank G. Sterle, Jr.

"I don't want to go that way," I said to my psychiatrist. "I don't want to do that."

Why not? Because they actually induce an artificial seizure in the patient's brain and then send countless volts of electricity through his/her brain. Granted, they put you to sleep before hand; however, it affects your brain to the point of leaving you with an allegedly-limited memory loss. Then you're left with a headache, which is one reason that I refuse to undergo such treatment.

In October/November 1983, I suffered a brain aneurysm, which caused enough of a build-up of clotted blood in my head, according to the CT scanner screen, to leave my brain in the shape of a crescent moon. And one of the symptoms of this ordeal, both before and after surgery, was a headache. Even to this day, a headache, simply put, worries me.

But my psychiatrist says that because I'm "over-medicated already," he won't prescribe me any more medications – and I don't blame him; and the only next step he's willing to take with my mental-health condition is electro-convulsive therapy (i.e., ECT).

ECT, unfairly, is often compared to a brain lobotomy, the barbaric form of treatment that, as far as I know, is no longer practiced in psychiatric institutions. And, to be objective, one must admit that there are cases in which ECT works wonders.

One person very close to me – one who received ECT during the 1960s when ECT treatment technology was more invasive (and, in my opinion, damaging) than the current, more moderate ECT technology and treatment – said that ECT worked wonders in treating her nervous breakdowns. She received a few treatments in her days, which she does not regret; however, her thinking process and memory, to this day, have much to be desired. To be fair, though, she's on a fairly stringent cocktail of psychiatric medications, which might be negatively affecting her brain's thought process and memory capacity.

In another case of ECT's apparent potential for success is that of the fellow patient of mine at Surrey Memorial Hospital's (SMH) psychiatric ward back in Spring, 1988, with whom a I shared

a room. His bed was right across the room from my bed, and some days, he would do naught but sleep – literally. Finally, nurses came in and rolled him away to an ECT division at SMH. When he'd return a couple days later, he was up and lively, dressed up for an outing with a friend — all as though he was never hospitalized and treated in the first place.

Although, unfortunately, about a week later, I came into my room and he was back there in the same bed to, again, sleep for days. Relapse, apparently. And likely, many ECT patients would agree.

In an essay published in the Winter 2007 edition of *Whale Tales*, a publication of White Rock Whale House, the author recounted his rather ordeal-like experience with ECT:

"I was taken into the ward and told to lie down on a bed. There were two doctors and four nursing staff present. I was completely alert, because I had not been given any pre-medication, and thus I was not anaesthetized at the time. Naturally, I was interested in what was going on around me; and, despite the fact that a nurse was standing at the foot of the bed calling my name in order to distract me, I looked up and saw the apparatus being placed on my head (and above it, the grinning face of the doctor). Then, nothingness. I came to some time later, with an appalling headache and in a state of utter confusion. After this first experience of E.C.T., I begged not to be given any more; however, I was told that I had signed for a course of eight E.C.T. sessions. Accordingly, I suffered this again, seven more times. I cannot describe each one in detail, but I can only say that I have never known anything as frightening as being in a waiting-room for E.C.T.

And I'm sure many other patients will back me up on this."

Of course it's only fair to hear the hopefully-objective findings and opinions of experts on the topic of ECT.

In a book, *The Clinical Science of Electroconvulsive Therapy*, about the effects, both positive and negative, of ECT treatment, the reader is told (on pages 5 and 6) that the, "... diagnoses for which ECT is effective: Major depression ... Bipolar major depression ... Mania ... Schizophrenia ... Atypical psychosis ... Organic delusional disorder ... Organic mood disorder ... Psychotic disorder ... Obsessive-compulsive disorder ... Dysthymia ... [and conditions not regularly related to ECT treatment] Parkinson's disease ... Neuroleptic malignant syndrome ... Secondary catatonia ... Lethal catatonia."

"Criteria for primary use of ECT. Situations where ECT may be used prior to a trial of psychotropic agents include, but are not necessarily limited to, the following: a) Where a need for rapid, definitive response exists on either medical or psychiatric grounds; or b) When the risks of other treatments outweigh the risks of ECT; or c) When a history of poor drug response and/or good ECT response exists for previous episodes of the illness; or d) Patient preference.

Criteria for secondary use of ECT. In other situations, a trial of an alternative therapy should

be considered prior to referral for ECT. Subsequent referral for ECT should be based on at least one of the following: a) Treatment failure (taking into account issues such as choice of agent, dosage, and duration of trial); b) Adverse effects which are unavoidable and which are deemed less likely and/or less severe with ECT; c) Deterioration of the patient's condition such that ... is met."

On page 138, the reader is told, "It is important to know that ECT is likely to affect functions other than memory. Memory can thus be viewed as part of a global deficit. Indeed, [ECT profes-

sionals] recently presented suggestive evidence of adverse effects of ECT on intelligence. [It was] reported that right-hemispheric rather than left-hemispheric non-memory functions as well as memory functions improved after ECT. The fact that improvement was limited to right-hemispheric tasks may suggest poorer cognitive functioning after ECT in areas other than memory. Other studies using

extensive assessments ... tend to find no effect of ECT on a great variety of neuropsychological measures."

To this day, and I bet until I die, I won't – willingly, at least – undergo ECT. I believe that ECT, simply put, is not for me.

mentalhealthconsumer.net/FrankGSterleJr

*"It is important
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memory."*

Quote:

"When the psychiatrist approves of a person's actions, he judges that person to have acted with "free choice"; when he disapproves, he judges him to have acted without "free choice." It is small wonder that people find "free choice" a confusing idea: "free choice" appears to refer to what the person being judged (often called the "patient") does, whereas it is actually what the person making the judgment (often a psychiatrist or other mental health worker) thinks."

Thomas Szasz

Bookworm

Becoming Human

Jean Vanier

Anansi, Toronto, 1998

Reviewed by Andrew Feldmár

Jean Vanier was 70 when these lectures were first broadcast as part of CBC Radio's *Ideas* series. He is the son of George Vanier, former governor general of Canada, and the founder of L'Arche, "an international network of communities for people with developmental disabilities." Over a hundred communities exist now in thirty countries. This book is filled with wisdom distilled from over 30 years of experience working with people in these settings. L'Arche, in spirit, is very close to the communities dreamed of and initiated by R. D. Laing, which he called true asylums. Both Vanier and Laing opened hearts and doors to outsiders, people we perceive as different, disturbing, inferior, weak, in a word: very Other, not one of us, one of those...

By opening to the spirit of inclusion, by realizing that we are all in the same boat, that there is only us, we get transformed and discover greater compassion, trust, and understanding. True personal and societal freedom cannot be achieved without embracing the ethics of deferring to the infinite otherness of the Other, to decide to treat well those we cannot understand, those whose sensibilities may be drastically different from our own.

In a recent issue of *The New Yorker*, Tim Page, who was diagnosed with Asperger's syndrome, writes: "There is no cure for Asperger's syndrome, and there is even some question whether it should be considered an affliction or merely a 'difference' – one of many human variants... A group called Aspies for Freedom runs a Web site that celebrates what it calls "neurodiversity," arguing that there are advantages as well as disadvantages in an autistic condition."

Vanier says a lot about loneliness. It is so easy to feel isolated when one is different. Loneliness "can be a source of apathy and depression, and even of a desire to die. It can push us into escapes and addictions in the need to forget our inner pain and emptiness." Later, he

states, "Reality is the first principle of truth. To be human means to remain connected to our humanness and to reality. It means to abandon the loneliness of being closed up in illusions, dreams, and ideologies, frightened of reality, and to choose to move towards connectedness... To be human is not to be crushed by reality, or to be angry about it or to try to hammer it into what we think it is or should be, but to commit ourselves as individuals, and as a species, to an evolution that will be for the good of all."

Vanier considers forgiveness an important aspect of love. Without it, one cannot come together in true communion, and loneliness remains, "a feeling of not being part of anything, of being cut off. It is a feeling of being unworthy, of not being able to cope in the face of a universe that seems to work against us... Loneliness is a taste of death."

I recently heard a Cambodian man, now living in Richmond, BC, tell his story in CBC radio. The Khmer Rouge executed his family, dumping each and every one of them into a mass grave. He was a young boy, and after witnessing his father being shot, the man who did that, using the same rifle, hit him on the head and shoved him so that losing consciousness he too fell into the grave. Later, he came to, climbed out, and survived. The faces of the four men who annihilated his family were permanently etched in his memory. He swore revenge.

He worked hard to become a policeman. Years later, he tracked down one of the murderers, dragged him to a forest, put a gun to his head, but couldn't bring himself to pull the trigger. He felt so ashamed of his presumed lack of guts that he escaped, and immigrated to Canada. After some years he saved up some money and collected donations from other Cambodians in BC, then returned to his native land. Three of the four executioners were dead by then. He tracked down the fourth, which happened to be the one who shot

his father and bonked him on the head with the butt of the rifle.

After identifying himself, he embraced his enemy, and gave him the shirt that he was wearing as a token of forgiveness. Then he proceeded to use the money he brought to build a school in the village of the murderer, so that the children of this former enemy would have the chance to get an education.

"The Greek word for forgiveness is *asphesis*," writes Vanier, "which means to liberate, to release from bondage; it means the remission of debt, guilt, and punishment. It is used when the prison door is opened and the prisoner can go free." The ultimate secret of liberation, according to Vanier, is "to forgive and to be forgiven, and thus to become free, like little children." In my experience, forgiveness is not under voluntary control. There is no muscle I can move to forgive. So, I think of it as grace. One can hope and pray to be able to forgive, until, if lucky, one morning one notices that in one's heart something has melted, and where once rage and revenge dwelt, now there is forgiveness.

Vanier lists some principles and steps towards forgiveness. He doesn't say this, but I believe the steps he names are *necessary* but not *sufficient* for forgiveness to occur. As I said before, forgiveness is a grace, a miracle. Among the principles you'll find: no one is superior, no one is inferior, we are all vulnerable, and we are all death-bound; everyone can evolve, redemption *is* possible; unity is the ultimate treasure, deep love engenders forgiveness.

Jealously guarded expertise is not what those who feel excluded need. Vanier states, "It is not just a question of performing good deeds for those who are excluded but of being open and vulnerable to them in order to receive the life that they can offer; it is to become their friends." Truly opening to the Other transforms the self in unpredictable ways. The first Europeans ever to enter China tried to assimilate the foreign culture to what they already knew. The resulting reports could only depict the prejudices of the travelers, and said nothing of the new, the Other. Those few who settled in China, learned the language, made accommodations to the strange, the unknown, who allowed themselves to be transformed, their

reports were more accurate, their stories more trustworthy.

Fear closes us down; love opens us up. To move from fear and shame and exclusion to love and oneness and communion is to move from hell to heaven. Vanier's book is badly needed encouragement to make the move. It takes the courage of lions to dare to come into the light, to claim one's place in love and

acceptance. The danger is that one will be rejected, refused, and hurled back into shame and separateness. We dare not hope for mercy, we fear we do not deserve to be loved.

Vanier shows through his work in L'Arche that love is stronger than death, that mercy is real and shame is the illusion. This book is filled with hope and encouragement.

*"It takes the
courage of lions...
...to claim one's
place in love and
acceptance."*

Destination Medication

(continued from pg. 5)

I stayed on this medication, at some level or another, for some years before one psychiatrist I was then seeing strongly suggested that I wean myself off of the Thioridazine and try a newer, more-effective Zyprexa, an anti-psychotic medication known as mostly successful in treating mental illnesses like schizophrenia and OCD. The psychiatrist was concerned about medicinal research that found that Thioridazine could be linked to ear/hearing damage.

I told him I'd comply. He then told me that he'd like me to start seeing my current psychiatrist

who's known to be a quality mind with treating mental illness. Again, I said I'd comply.

Since then, matters and medications have gone this way and that way, along with a very large increase in my intake of Zyprexa; and I still struggle, even with the plethora of meds I'm consuming every day. I've also found that a person suffering with mental illness must work with the medication(s) he or she is prescribed in order to have any real, lasting positive psychological effect.

mentalhealthconsumer.net/FrankGSterleJr

Autumn 2007

Websites of Interest to Consumers/Survivors/Ex-Mental Patients

This list is not intended to be comprehensive or exhaustive, and has left out many well-known sites that are widely available and easily accessible from local directories. This entire page in separate e-form for easy clickability will be sent upon request from: duhring@shaw.ca)

Organizations (General)

www.mind.org.uk www.power2u.org www.mhselfhelp.org www.wnusp.org www.tao.ca/~pact
www.u-kan.co.uk www.mentalhealth.com www.icspp.org www.oikos.org www.icomm.ca/csinfo
www.aapd-dc.org www.mindfreedom.org www.geocities.com www.mdri.org www.breggin.com
www.cvdinfobase.ca/mh-atlas/ www.szasz.com www.antipsychiatry.org www.peoplewho.org
www.walnet.org/llf www.mentalhealth.org.uk www.fsu.edu/~trauma/ip.html www.radpsynet.org
www.contac.org www.buildfreedom.com/ft/psychiatric_survivors.htm www.samhsa.gov
www.nucknfts.com/index.php www.cam.org www.lino.com/~raiddat <http://en.wikipedia.org/wiki/Antipsychiatry> <http://aix1.uottawa.ca/~nstaman/alternatives/OVNVinternational.htm>

Advocacy and Activism

www.mental-health-matters.com/activist.html www.m-power.org www.narpa.org
www.protectionandadvocacy.com www.cchr.org www.popan.org.uk www.advocateweb.com
www.gamian-europe.com www.hri.ca www.hrweb.org www.iahf.com www.benzo.org.uk/prawi.htm
<http://members.aol.com/jimhofw/jimho.htm>

Alternatives

www.talkingcure.com/index.asp www.alternativementalhealth.com www.medsfree.com www.moshersoteria.com
www.transtherapy.org www.patchadams.org www.healthfreedommovement.com
www.weglaufhaus.de www.elcollie.com www.stopshrinks.org www.lstpm.org
www.emotiosinbalance.com www.the-bright-side.org/site/thebrightside/ www.doctoryourself.com
www.emotionsanonymous.org www.projectresilience.com www.bu.edu/cpr/rr/alternative/
www.religiousfreedoms.org www.wildestcolts.com <http://stopbadtherapy.com> http://nht_amh11.blogspot.com <http://essence-euro.org/iasp/> <http://myweb.tiscali.co.uk/erthworks/nonmain.htm>

Drug Information

www.larsmartensson.com www.drugs-and-medications.com www.drugawareness.org
www.outlookcities.com/psych/ www.canadiandimension.mb.ca/v35/v35_5ab.htm#three
www.nmsis.org www.antidepressantsfacts.com www.socialaudit.org.uk/1.4.html
www.chemsense.com www.prozactruth.com www.quitpaxil.org www.talkingcure.com/archive/drugs.htm
www.truehope.com www.astrocyte-design.com/pseudoscience/index.html <http://members.fortunecity.com/siriusw/Biochemical-Imbalance.htm> <http://groups.msn.com/SIDEEFFECTS>
www.benzo.org.uk

Children & Youth

www.voice4kids.org www.aspire.us www.hearmyvoice.org www.ritalindeath.com www.p-a-r.org
www.adhdfraud.org

Tardive Dyskinesia/Dystonia

www.power2u.org/selfhlep/tardive.html www.wemove.org www.dystonia-support.org www.dystonia-foundation.org
www.iatrogenic.org/index.html www.breggin.com/tardivedysk.html
www.caromont.org/16036.cfm www.emedicine.com/neuro/topic362.htm www.drugdigest.org/DD/Articles/News/0.10141.513136.00.html
www.psyweb.com/Diction/tardived.html www.thebody.com/pinf/phenos.html www.reglan-lawsuit.com www.ninds.nih.gov/healthandmedical/disorders/tardivedoc.htm
www.easyweb.easynet.co.uk/simplpsych/tardive.html

Bulletin Board

The Self-Help Resource Association of BC (SHRA) conducts regular Facilitator Training Workshops for Self-Help and Mutual Aid Support Groups. They also publish a Directory of Self Help/Support Groups in Greater Vancouver with over 600 listings, many of them dealing with mental health. SHRA is located at suite 306 - 1212 West Broadway, Van. BC V6H 3V1 Tel. 604-733-6186 Fax. 604-730-1015 e-mail shra@telus.net . Website - www.selfhelpresource.bc.ca

Vancouver/Richmond Mental Health Network sponsors many self-help groups and has recently moved to its new office at #201 - 1300 Richards Street, Vancouver, BC V6B 3G6 Tel. 604-733-5570 Fax: 604-733-9556 e-mail vrnmhn@vcn.bc.ca

Named after Vincent van Gough's homeopathic doctor, Paul Gachet, **Gallery Gachet** works to provide a safe, borderless, place of artistic expression. It is located at 88 E. Cordova, Vancouver. Tel. 604-687-2468

Ron Carten, former Executive Director of Vancouver /Richmond Mental Health Network has a new blog on-line at www.aimstest.ca. Check it out for interesting information and dialogue on consumer/survivor issues.

Websites of Interest to Consumers/Survivors/Ex-Mental Patients

(continued from previous page)

Electroshock

www.ect.org www.banshock.org www.idiom.com/~drjohn/review.html <http://bmj.com/cgi/content/full/bmj.326/7403/1363>

Forced Treatment

www.freedom-center.org www.namisc.org/newsletters/August01/MindAid.htm www.hri/doccentre/docs/gosden.shtml www.garynull.com/issues/Psych/Index.htm www.psychlaws.org www.kqed.org/w/hope/involuntarytreatment.html

Mental Health Law

www.bazon.org www.ac.wvu.edu/~knecht/law.htm www.psych.org/public_info/insanity.cfm www.forensic-psych.com/pubs/pubADment.html www.psychlaws.org www.imhl.com www.ialmh.org www.justiceseekers.com www.safe-trak.com/main/competency1.htm www.abanet.org/disability/sites.html www.experts.com www.expertpages.com/psychiatry-psychology.htm www.psych.org/advocacy-policy/leg_res/apa_testimony/testimonysub-crimeposted91800.cfm www.ilppp.virginia.edu/www.law.cornell.edu/topics/mental_health.html www.helpforparents.net/LegalResources/1LegalResources.htm

History of Mental Health Care

www.psychiatricurvivorsarchives.com www.webcom.com/thrive/schizo/kdarch.html www.cwu.edu/~warren/addenda.html www.epub.org.br/cm/n02/historia/psicocirg_i.htm

Online Publications

www.mentalmagazine.co.uk <http://members.aol.com/asylumpub> <http://userpage.fu-berlin.de/~expert/psychnews/>



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