

Travels to the Psych Ward: A Story of Comfort and Grief

Gina Nicoll

When my doctor first said she was sending me to the hospital, I tried to talk her out of it. Running my thumb over and over the spot on my ring finger I'd already worried into a bruise, I told her the timing was all wrong. I said that antidepressants took months to reach their full effect, but the hospital would only keep me in for a week or two. So it would just make things worse. I knew I needed to go on antidepressants, but I couldn't get rid of the idea that if I did anything good for myself, then I had to punish myself to make up for it, like atonement for my sins. By that point, I was already cutting twice a day for punishment. If I went on antidepressants, I'd have to do even more. I didn't know how much more I could take.

Neither did my doctor. She explained that while we didn't know how long antidepressants would take to work for me, we did know that I couldn't guarantee I'd be alive for our next appointment. Something had to give. While I cried and continued my half-hearted protests, speech



> slowed and broken from depression and lack of sleep, my doctor wrote a letter with my history for the emergency room staff. I was going the next morning. If I didn't, she'd call the cops and have them take me.

> It took one day, six hours in the ER, and many conversations—with the receptionist, the triage nurse, the ER nurse, the medical student, the psychiatrist, and the psychiatrist again—before I was admitted to an inpatient psychiatric unit. I was terrified. I didn't understand how I had fallen this far, this fast, and I had no idea where I was going or what it would be like. My only frame of reference was from movies like *One Flew over the Cuckoo's Nest* and *Girl, Interrupted*. I imagined padded walls and shackles on beds. Or, at best, a grumpy nurse who'd check that I didn't cheek my meds in the morning and then would ignore me the rest of the time, simply waiting for the antidepressants to do their work.

The difference between my expectations and reality wasn't a dramatic revelation but a slow unfolding of moments. It was the admitting nurse who had reached the end of his shift but stayed to give me a tour of the unit and who reassured me that I could keep my cell phone with me and have visitors. It was the evening nurse who validated that I must be emotionally and physically tired and confused about how to tell people where I was. It was the quiet older woman who was my roommate, her soft snoring on the other side of



the curtain the comforting white noise that I fell asleep to. It was the psychiatry resident who, after assessing me and hearing how I couldn't even walk home from work without my thoughts drifting to the appalling comfort of stepping off the sidewalk and into traffic and having everything end, said, "That sounds really hard. I'm sorry you've had to deal with this. I hope we can help."

They did help, in many ways. Sure, they gave me medications and psychotherapy. But they also saw me as a whole person. They wanted to hear about what books I was reading and told me about their own. They checked that I was sleeping and eating well. They made sure I showered and had clean clothes. They sat with me after a tough therapy session and taught me to hold ice on my temples to help me calm down and distracted me with funny stories about being scared of *The* Ring while I waited for the ice to work. They quoted The Matrix to make me laugh and feel less guilty for cutting while on a day pass—an inevitability, I thought, but, like the oracle told Neo, "Don't worry about the vase." This was a way of helping me to question why cutting, like breaking a vase, was becoming a self-fulfilling prophecy for me. I believed I was worthless and had to punish myself. In my mind, I had no evidence to the contrary. But they planted the seeds for the possibility that it could be otherwise by telling me, in so many words and in their actions, that I was worth helping.



> What affected me the most from my time on the psych ward, though, was knowing and feeling that I was safe. Coming from an abusive home, I had never felt that before. Even after I had left home and lived entirely on my own, isolated from nearly everyone, safety was a foreign language. It was not just safe in terms of suicide risk, but safe, period—fundamentally safe as a human being in the world. I didn't have the language for it until months later, but I knew something felt different in the psych ward. I knew that when the nurses asked, "Do you feel safe to leave the unit?" before going out on passes, I was confused. I didn't know what safe was, but out there was not it. In here was. That sense of safety gave me a feeling of warmth and comfort and hope that went beyond the parameters of any traditional biomedical treatment.

> Learning to feel safe, as welcome as it was, also led to a surge of emotions that was so big and scary that it shattered my worldview. You see, when you grow up in an abusive home, it becomes your normal. I wanted to say, "You convince yourself it's normal," but that implies a level of awareness and intent that I didn't have, that I couldn't afford to have. People in an abusive home don't grow up knowing they're in an abusive home. That label requires distance and perspective. When you're in it, it's just life. It's normal, and everyone else is strange and unfamiliar, like creatures from Mars. You tell yourself that other kids and other



parents, with their stable senses of self and intact personal boundaries, are the weird ones, not you.

I believed that until I got to the hospital. Being admitted to the psych ward was like interplanetary space travel, a novel and revelatory perspective. Never having lived with anyone besides my abusive family, I now got to see how other people lived, up close and personal. And I saw a world because when you're in the psych ward, locked in around the clock, it becomes your whole world where people cared, where they wanted me to be healthy, where they respected me, where they protected me. I saw that there were alternate life forms out there. How other people would treat me had been what scared me the most about being sent to the hospital—scared me so much I didn't know how to articulate it even to myself, unaware as I was that I expected everyone to repeat the same patterns as my parents. But the psych ward taught me that living with other people doesn't have to be that way. It reconceptualized my world.

There is a lot of pain in that realization. After my first admission, I spent a year in and out of the hospital while I debated whether or not I wanted to live this life where I am now the outsider, the one from an abusive home. I still feel a profound grief knowing that other people get to be native inhabitants of a healthy planet that I am only now glimpsing for the first time, and at times it seems like there is an immeasurable distance between where I am and where I want to be. But there's a

lot of hope and curiosity there too. Before the thrill of exploring Mars, you must first discover its existence and map its location. That, I am learning, has a joy of its own.

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