

Personal Accounts

An Account of Multiple Psychiatric Hospitalizations in the 1960s

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The anthropologist Clifford Geertz, known among other things for developing the method of "thick description" in cultural analysis, argued that "the interpretation of a narrative injects meaning into one individual's lived experience, which, subsequently, narrows the emotional distance between the lived and the described" (1). The narrative reproduced below was written by a patient, Ms. K, in 1972 and given to me in 1992, after she died. Here Ms. K recounts multiple psychiatric admissions in Canada and the United States during the 1960s.

Big Keepers

"It was the beginning of the summer of 1962. I was 21 and this was my first mental hospital. I remember a mass of big, dark buildings, which I christened Big Keepers. I was taken into a room with a tub, washed, and put to bed. The floor was locked. It was clean; the bed linen was changed every day by the patients; those of us who could do it made the beds of those who were too ill. We were a ward of women; we all wore identical cotton dresses.

"There were no regular activities; we sat around playing cards or sleeping on the common room couch. Some people had hot tub treatments. Some had shock treatments. Some were put into 'packs' for calming down or for bad behavior: they were stripped naked, given a shot in the buttock, wrapped like mummies in

wet sheets, and tied to a bed. Because there wasn't much to do, we often got into riots. Whenever there was a riot, the bells would ring and the nurses' aides would come running. The worst punishment was being sent to a floor that was worse than ours.

"One thing I really remember was a weekly Women's Auxiliary tea. They served it in real, delicate, china tea-cups and poured it from a silver pot, and we had doughnuts or cookies with it. The women played games with us and talked to us and treated us like human beings."

Countyville

"Before long, I was back in a hospital, a state hospital that I will call Countyville. It was huge. Each county of the state had its own building there, and you were sent to the building of the county you came from. Practically everyone in the state who had mental problems and who could not afford private care was sent there.

"I was in the county building known as the P building. It was barren and old and dark, like a prison. I was taken to a locked ward; the floor and walls were made of cement, and in the middle of the floors was a gully of drains for trash and water. Around the sides were a few hard benches. Near the entrance was a very small visitors' room with a few chairs in it. At the end of the hall was a nurses' desk. There was a separate room where shock treatments were administered, in full view of everyone, with no anesthetic, on a wooden table. The common room was small and filthy.

"The air was stifling, and there was no air-conditioning. The food was essentially the same every day: chocolate milk, stale, hard bread, collard greens, and maybe pork of some kind.

In the evenings, we usually had hard, stale corn bread. I remember once having hot dogs and beans for lunch."

St. Elizabeth's

"My next stop was St. Elizabeth's, which had two inpatient psychiatric floors, one for men and one for women. The first time I was there, in 1965, we were not allowed to mix on these floors. On the top floor of the building, there was a large room and a small porch enclosed with wire. This was the occupational therapy department, where we spent most of the day.

"It was at St. Elizabeth's that I first cut my wrists. I remember taking a bath and walking out with two cut wrists. I remember being taken to my room, sutured, and then I remember a very long sleep. I remember undergoing a form of sleep therapy a couple of times, being heavily drugged and kept asleep for long periods.

"The doctors and the nurses seemed to work totally separately. For example, on one particular day, the nurses were told to keep me on the ward in my pajamas because I was suicidal. That same evening, I talked the doctor into discharging me home.

"It was here that I began my real 'acting out': sneaking pills and overdosing, cutting, yelling, holding my breath, taking off my clothes, going mute, destroying things. Whenever I left—I came back here several times—I always had the feeling that the staff was glad to see me go."

Hicks Hospital

"In 1968, I came to the brand new Hicks Hospital, on acres and acres of land—hills, grass, and trees. The administrative building was ten or 12 stories high. There was only one

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locked ward, and that's where I was sent.

"The Hicks was a teaching hospital. The therapists in charge of patients were residents from different medical schools who rotated through every three months. A few psychologists were on the permanent staff, and each unit had a social worker. There was a chief psychiatrist who was the overseer.

"The worst thing here was the many doctors I had. My first doctor was very young and quiet. Then there was a resident who had been an army sergeant; as far as he was concerned, we were all soldiers in training. Another was an ex-preacher who tried to make me well through prayer. There were also some chaplains in training; one was very good to me. He even sat through some times when I overdosed. We also had group therapy twice a week. We played games and role-played and screamed together as loud as we could.

"I was the worst of the cutters. I also destroyed my room over and over. I broke everything in it. One night I tore up my room and the kitchen and broke the equivalent of a whole set of dishes. I wasn't stopped. I wasn't helped to regain control or even to calm down and clean up what I had destroyed. I was just taken to seclusion and locked up.

"They eventually gave me to Dr. D, a psychologist—in my mind, a really mixed-up psychologist. He would make believe that my mother was in a chair opposite me, and I would be made to talk to her; then I would switch chairs and be her and talk to the empty chair, which was supposed to be me. Dr. D brought me into seclusion rooms and made me hit pillows against the wall or would hold me very tight and order me to break away so I could 'feel free.'"

Pine Oaks

"After that, I spent a week in a really posh private sanatorium, Pine Oaks. This was a place to see. It was carpeted. You were given a single room, and the furniture was very modern. There was even a pool table. An occupational therapist was there to help you do things, or you could just sit and enjoy fresh coffee and cookies or muffins.

"Dinner was on another floor, in a dining room with flowers on every table. You served yourself cafeteria-style, but the food was fancy and delicious. I could only stay a week because my doctor said I was suicidal and managed to get Vocational Rehabilitation Services to foot the bill until a transfer could be arranged to my next state hospital, the McGregor."

The McGregor

"The McGregor was new and clean. Again, I was put in the craziest ward. The program here was the token system. We were to get up at 7:00 a.m. and have our token punched on the card. From then on, you had to stay in the big room until bedtime at 10 p.m.

"The only therapy there was role playing. A green and red spotlight lit up the center of the kitchen, where the role playing was carried out, with the rest of us sitting around watching. Except for meals and the role-playing groups, we stayed in that common room from 7:00 a.m. to 10:00 p.m. The food, like in Countyville, was inedible. There was a color TV that you could turn on if you had enough tokens. There was one deck of cards, almost complete. After three days, I managed to sneak out when the door was unlocked."

Memorial Hospital

"I finally ended up at the Memorial Hospital. They asked me to think about myself and about my behavior and try to figure out what I wanted to change. This was the first time that I really felt that hospital staff were interested in me as a person. When I got angry they got mad back, but without abandoning me. When I began to run, as I always did, they put me on a legal certificate, which I protested, but in fact it gave me a sense of security. For the first time, I had some expectations actually set for me.

"I was given a special medicine for sleep that smelled terrible. What I felt good about was that I was the only person on the ward who was being given that medicine. It was selected just for me. For the first time, I wasn't just one in a crowd.

"Another important thing happened here. My mother came to visit, and, in the family session, I felt for

the first time that competent people knew how to talk to her and listen to her. At the Hicks, for instance, in the family sessions there, or in the other places whenever the doctors talked to my mother, they always blamed her for my illness. This always scared her and made her stay away. Because of the staff's new way of talking to my mother and her response to it, my feelings toward her changed for the better. When I left after nine months, I felt for the first time that the staff really thought I was better and were not just getting rid of me. I knew I was better, too, and that this would be it for hospitals."

Afterword

In this account Ms. K describes a particular decade of North American psychiatry, during which patients were warehoused in large, cavernous buildings. Wards were segregated by sex. Identically uniformed patients were herded into dormitories and lockstepped into token economy routines. Popular treatments were sleep therapy, hot bath immersion, wet packs, insulin therapy, sodium amytal interviews, gestalt groups, psychodrama, and primal scream therapy. As it has turned out, all of these therapies were passing vogues and are no longer commonly practiced. In this aspect, Ms. K's story teaches us a sobering lesson—that fervently held beliefs in the effectiveness of specific therapeutic interventions are subject to change. ♦

Reference

1. Geertz C: Thick description: toward an interpretive theory of culture, in *The Interpretation of Cultures: Selected Essays* by Clifford Geertz. New York, Basic Books, 1973