

INSIDE THE MENTAL

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SILENCE, STIGMA, PSYCHIATRY, AND LSD

KAY PARLEY



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My own experiences related in *Inside The Mental* are factual, but some of the names and details concerning other patients and staff at the hospital have been altered to protect their privacy.

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SASKATCHEWAN

*To anyone and everyone
who fights the stigma*

Kathleen

She was just a half a person,
Six or seven, skinny, meek,
Heart a mass of fissures, brain in prison,
Will is weak;
Flailing at a foreign world,
Eating gall and drinking tears,
Hidden from reality through
Fifty bitter years.
How hard it's been to help her,
She's the saddest thing I've seen—
But it's harder still to realize—admit—
That I'm Kathleen.

From The Multiple Personality Poems by Kay Parley

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CREDITS

Much of the material in *Inside The Mental* is compiled from a number of my earlier publications:

“Toppling a Monument” and “Psychiatric Nurse” were first published as part of an article in *The Journal of Orthomolecular Psychiatry* vol. 6, no. 1 (1977): 63–68.

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“Meeting Grandpa” was first published in our family history, *Dyer Consequences*, now housed in the Saskatchewan Genealogy library, Regina, Saskatchewan.

“Kleckner” was first published in *Prism International* vol. 5, no. 2 (Autumn 1965).

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“Supporting the Patient on LSD Day” first appeared in *The American Journal of Nursing* (February 1964), 80–82.

“Sunday,” “The Glass of Truth,” “Understanding,” “An Afternoon in the Sun,” and “Community” are excerpted from the journal and other material first published in my self-published volume “Lady with a Lantern” (2007).

INTRODUCTION

The stories in this book cover a fairly wide spectrum in time and subject matter, from treatments available in the mental hospital at Weyburn, Saskatchewan, in 1948 to what it was like to do psychiatric nursing in the same hospital during the enlightened fifties, to a peek at the fascinating research being done with LSD in the sixties. Perhaps the unity to be found in the stories is the writer herself, because I had the good fortune to experience all of that.

Mental illness was always part of my life. When I was born, my maternal grandfather, diagnosed as paranoid, was already in the Weyburn hospital, which was commonly called “The Big Mental” or “The Mental.” I had never seen my grandfather, so his absence didn’t make a difference to me, but when I was only six my father

was taken to the same hospital with a diagnosis of manic-depressive psychosis. My world shattered. I'd been a "Daddy's girl," so I lost much of the love in my life at that tender age. I handled it in one of the worst ways possible, by repression. My emotions froze. I remembered almost nothing of the days when Dad had been at home, nothing at all of the anguish I'd endured when I found that he was gone. Forgetting saved me from disintegration, and the fact that my intellectual and creative capacities were unharmed enabled me to carry on fairly normally and to do well in school. Still, emotional instability is destructive. By the time I was twenty-four I'd changed careers four or five times, lost the one serious love of my life, and developed a multiple personality. I never "split," as happens in extreme cases of multiple personality, but one of the girls living in me led me up false paths for years, because she was determined to be an actress and I was neither talented enough nor motivated enough to be a success in drama.

People seldom realized how depressed or confused I could be, so I took a lot of criticism. A psychiatrist once told me I gave people "the wrong signals," so it was my own fault if I was misunderstood. My mother had a very high IQ and held "reason" in high regard, but she had no time for emotion, so I got almost no emotional support. In 1948, while doing office work at CBC Radio in Toronto,

I fell apart. My practical mother whisked me home to Saskatchewan and got me into treatment.

That is when I finally met my father and my grandfather and when I learned what a mental hospital was really like. The first thing my psychiatrist explained was that I had ceased to develop emotionally at the age of seven. I was now twenty-five. I had lost eighteen years, and he told me it would take eighteen years to catch up. It did.

I can't say I loved the mental hospital without misgivings. It was crowded, noisy, smelly, shabby, with too much authority around and too many people who behaved in threatening or in particularly unintelligent ways. But in many ways I loved The Big Mental. It was home to so many people, and some of the "old-timers" were very receptive. We had therapists who were warm, friendly, understanding, and encouraging. After nine months I was discharged from the admitting ward to work in Weyburn. The city was used to mental patients and I was welcomed into a rooming house where I felt right at home. I joined an art class, helped start a little theatre, and felt better than I ever had. I worked in a law office and was doing well, but then the newly formed Saskatchewan Arts Board offered me a job and I thought I should return to Regina. Two years later, in 1954, I was back in Toronto and . . .!!! Another breakdown.

It was so familiar I simply let it happen. I followed the advice my psychiatrists had given me: ate well, got my sleep, took healthy walks, and stayed out of work until I was broke. It took four months. Then I was able to take a job with Office Overload and pull myself back up again. I had no idea what my illness was. They hadn't given me a diagnosis at Weyburn, but I was afraid it might be manic-depressive psychosis, like my Dad. I'd read a bit about it in the mental hospital library and learned that it was cyclic and recurring, but that the episodes were self-curing. I'd get well, with or without therapy.

At that point I'd forgotten about the summer of 1942, the first year I'd had a job. I'd been so upset that my mother took me to a doctor and he told me to "grow up." (That's how much they knew about mental illness in 1942.) Had I remembered that experience, I would have been more worried, because 1942 to 1948 to 1954 indicated six-year intervals. Recurrent at regular intervals. I didn't want to have to face that. But it did enter my mind that perhaps I might be able to work in psychiatry. It looked as if events in my life were pushing me that way. Still, I didn't like the way the hospital was organized well enough to want to be part of its military discipline. Then I got the letter.

A Weyburn friend wrote to tell me there was a new superintendent at the mental hospital with new ideas. He

was making a lot of changes. She wrote, “We’re hearing good things about the hospital.”

Could *I* be a psychiatric nurse? I’d never wanted to be a nurse. I’d trained for commercial art, stenography and radio, and I’d been a country schoolteacher for three years—but nursing? I felt as if destiny was chasing me. My life was too involved with mental illness for me to ignore it. I was concerned about all those people I’d known in the hospital. I’d watched some struggle through rehabilitation, as I had. Two of those friends had already lost the struggle and committed suicide. Could I be of any use?

My Dad had left hospital and built himself a little bungalow by the Souris River, right beside the mental hospital grounds in Weyburn. I decided to return to Saskatchewan and pay him a visit. I ended up spending the winter with Dad. I had been publishing stories for four years, so I did some writing, but it took until March 1956 to get up the courage to walk over to the mental hospital and apply to go on staff.

In the seven years since my discharge, the hospital had moved so far from the place I’d known in the winter of 1948–49 as to be almost unrecognizable. There were crafts and recreational activities going on right on the wards. Remodelling and modernizing was in progress. The grounds were filled with life. The friendlier, more relaxed atmosphere was tangible. Patients with jobs in the hospital

had pass keys and could let themselves through the locked doors. There was a healthier, more hopeful feeling in the air.

I began to work at the newly named Saskatchewan Hospital at Weyburn in March, 1956, and graduated as a Registered Psychiatric Nurse in 1959. In 1957 the American Psychiatric Association gave the Weyburn hospital an achievement award as the North American Mental Hospital making the most progress. I felt I'd hit the crest of a wave: Saskatchewan was leading the field and the world was watching.

The research going on was largely biochemical experiments conducted in Saskatoon by the head of research, Dr. Abram Hoffer. I knew very little about those. Our superintendent, Dr. Humphry Osmond, was an enthusiastic partner to Dr. Hoffer, and our research department was doing studies of group interaction and lots on perception. We were also involved with the new experimentation with lysergic acid diethylamide (LSD). The focus was on trying to find the cause of and cure for schizophrenia, the illness that had devastated so many of our patients. The doctors were so focused on this that we sometimes joked that they saw every patient admitted as schizophrenic. I fell under that banner: I had endured numerous auditory hallucinations and perhaps a bit of false visual perception, so my field of perception was considered "fluid," and a fluid perceptual field was the current definition of

schizophrenia. Dr. Osmond even asked me to write an article for a medical journal entitled “Living with Schizophrenia.” I wrote it, calling on some of my memories of the “down” times of my illness, but I used a pseudonym and hoped it wouldn’t get much attention. I still had no diagnosis but I couldn’t see much resemblance between myself and the many schizophrenic patients around me. Yet the idea gave me a ray of hope. If it was schizophrenia I had, I had actually conquered it. I’d recovered from two breakdowns. If it wasn’t MDP after all, it might not reoccur.

Of course it did. I had breakdowns every six years with clockwork precision and I handled them all with the simple rules my psychiatrists had given me in 1949. I never took medication. My doctor hadn’t even given me sleeping pills, believing I had to handle it on my own, with guts. It worked. Until my fifth breakdown in 1972, I never saw a psychiatrist again. That time I was lecturing in social sciences at a technical institute, and trying to lecture with an inner voice nattering away in my mind was difficult, so I went to a psychiatrist. As soon as I told him about Dad’s illness and the six-year intervals between breakdowns, he diagnosed me as Manic-Depressive. It had taken twenty-four years. He gave me lithium, the treatment approved for MDP at the time, and I threw up twelve times that evening. That was the one and only day in my life I ever took medication for my mental illness.

I shouldn't disparage medication. It has been a boon to many who have led quite normal lives because of it. But I just thank my stars I was ill before they had it. In its stead, I had good old-fashioned psychiatrists. Nothing could take their place.

So what is this book about? About a girl with MDP and too many personalities fumbling her way through life until she was able to contribute a few years to service in the psychiatric field? Perhaps it is, but I prefer to think the book is about that enlightened time when our province was willing to spend so much to help the mentally ill. I remember the day my friend Gwyn exulted, "We're here! At the centre of the universe. We're where it's all happening!" Our hospital didn't win that achievement award just because of the research that was going on. We won because the hospital had moved so rapidly from being a benighted custodial care institution into a modern, humane, progressive hospital offering every kind of therapy. And it was free. Saskatchewan was a model then.

If only we could recapture that spirit: those days of asking and probing and experimenting and trying and helping and caring were taking us to a place where so much satisfaction, so much hope, could be found. The fifties and early sixties were a glory day for psychiatry and for psychiatric patients, and for those who worked in the field. I feel so lucky to have been part of it for a little while.

TOPPLING A MONUMENT

Our mental hospital—the Saskatchewan Hospital at Weyburn—was the pride of its founders, the people of our province. Local citizens loved to motor through the spacious grounds on a Sunday afternoon and brag to visitors about the broad, cool lawns, the happy flowerbeds, the acres and acres of hedge and tree, all cultivated and raked meticulously clean. Gangs of patient workers had planted and maintained those grounds, and patients had literally furnished the hospital. The mattresses on which they slept were made by patients. Hundreds of wicker chairs which lined the wards were made by patients. Patients had prepared rinks, ball diamonds, and tennis courts. The very paintings that hung on the walls had been done by a patient. Patients

worked on the hospital farm, which supplied much of their food, and patients did the laundry, scrubbed the corridors, and carried out the garbage. In short, it was a Protestant-ethic hospital.

The main building, vintage early 1920s, was fortunate in its architecture. Its long, low lines were in exquisite proportions and it was graced by a pillared portico over the entrance. Above all that, it was domed, a touch which gave it some of the distinction of the houses of parliament. It was not large, as mental hospitals go, and when the population peaked in the 1930s the count was only 2500. It was gradually reduced until in the late 1950s it was 1500, but since the building had been planned to house 800 patients it was not under-crowded. The wards were large, housing up to 120 people, who slept bed-to-bed in dismal high-ceilinged dormitories that prevented suffocation but permitted a disastrous noise level. The enormous dining rooms clattered their way through an endless series of meals, which had to be eaten in shifts.

The hospital was said to have been a quiet, decent place in the 1920s, before the crowding, but it had had a bad reputation for two decades. In the pre-tranquilizer days there had been much violence, and much coercion. Hundreds of patients were on wards where the only furnishings were heavy wooden benches. They saw no colour, no pictures, no mirrors or curtains or flowers. They had