

Looking Through the WINDOWS of

MADNESS

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Author's Note

Although this book is based on the author's experiences as a psychiatric nurse, it is a fictional account. The characters and situations which appear in the work are synthesised from a large number of observations made during a twelve year clinical career. The author makes no attempt to factually report the actions of any particular person (living or dead), or to factually represent the structure and processes of any particular mental health unit. Similarity is therefore co-incidental.

The author acknowledges that the challenging assertions made in this book are based on his personal views and subjective experience, rather than the objective truth. He recognises that the background events which inspired this novel, as well as the fictional world created, may not be typical of mental health units around the U.K.

He also acknowledges the serious nature of mental disorder itself, and accepts that satire may be considered a strange form of analysis. But for those who have worked through the tragedies and comedies of a psychiatric setting, the choice may be easier to understand. *They will have learnt that people often overlook significant issues until they are uncomfortably amplified.*

Above all, the author asserts his right to express an honest opinion on matters of public interest.

I wandered along to the bathroom in a grateful daze, and locked the door behind me. Hot water soon filled the tub, and a wan face gazed crookedly back from the chrome taps. My mind was made up and very still; but first it opened windows.

Nephelokokkygia

Some enlightened citizens once asked the birds to build a wonderful walled city in the air. In this place, a person could be removed from the evils of society, and made safe from the wrath of the Gods. The city was called Nephelokokkygia.

Cloud Cuckoo Land

Ornithes

A Play by Aristophanes 414 B.C.

Prologue

1990

The Victorian mansion stood eerily in the mist, its perpendicular windows and scarred oak doors sitting in Gothic relief amongst the vast grit-stone walls. Nearby, the little chapel tolled its bell, and a crocodile of grey shapes meandered slowly down the gravel drive. Past the high privet hedges, the old crooked birch trees, the huge gateposts capped with carved eagles, and on towards the waiting coach. Here, one or two white faces turned around to look at the place some called home.

It was the day that eight people left the regional asylum to 'rejoin' society.

And this is the story of what happened.

2005

We adjourned to the back of the car and sumo wrestled into an uncomfortably exciting position across the leather. The thin straps of Carol's silk dress fell away and I circled her white orbs with hot lips and poetic sighs, while she quietly inspected my credentials with a languid, vermilion tipped hand. Patiently, I wandered along the perfumed curves of her trunk, until her legs divided around me and my tongue licked rapturously along the lacy top of her right stocking. With a husky voice she gasped,

"Please.....please....."

"Bang!"

"Wake up, you lazy pig!" she screamed from the kitchen.

I would probably have woken up anyway because the neighbours had left their halogen security light trained on our bedroom window again, like a Colditz searchlight probing around for unauthorised activity across the compound. There was certainly a din going on downstairs, and this turned out to be a dropped bowl of corn flakes on the lounge carpet, followed

by loud recriminations and protracted sobbing. I hated great shows of emotion, and yet this seemed to be the primary method of communication in our house, as people swung freely from delirious mirth to cold silence without a second thought, or probably a first.

"Will you please eat your breakfast!" my wife implored.

"It's my turn on the piano!" my youngest answered.

"...grandmother strangled in her own home..." contributed the man on T.V.

"Where's Dad?" said my eldest, followed by the sound of scampering footsteps coming up the stairs, and what sounded like a mumbled insult from my spouse in the background.

"Crash!" went the door as it bounced off the wall, and I received a loving hug, followed by a garrulous report of current domestic disputes downstairs.

"Okay petal, I'll be down in a minute" I said, trying to gather my wits together, as my sinuses tightened their hold on my forehead, and my rumbling bowels notified me of their overnight load. With little option, I swung my spindly legs over the side of the bed, inadvertently broke wind, and spotted the old 'Triang' toy crane sat on top of the wardrobe; its black bucket hanging over the side like a man on the gallows.

Yawn, belch, fart.

A short history of humanity.

I hadn't been sleeping well for weeks, going to bed dead beat, waking up in the early hours, and then remaining awake until four or five o'clock, when I would descend into a feverish stupor until the alarm went. I was constantly tired, sluggish and irritable, finding it harder than usual to concentrate, and carrying around a variety of aches and pains as I waded through the day like a Great War soldier waist deep in mud. At different times over the last six months, I'd had colds, aching joints, upset stomachs, sore throats, a vague dizziness and a woolly headed tendency to forget messages, or acquaintances' names, or the toast. Some days I would have to write out a list of reminders in the morning, to ensure that I didn't overlook something important, and even then I would occasionally mix up my shifts at work, or forget to attend a meeting. Worse than that, I'd sometimes experienced strangely delirious thoughts as I'd drifted off

to sleep, or when I'd woken up in the middle of the night; something which altered the shadows and forms in the room and took a whip to my imagination. Something like acid flashbacks.

I couldn't put my finger on any one reason why my health was deteriorating, largely because there was a variety of leading contenders. For a start, my mother had died earlier in the year at the age of 79, and this had opened up a Pandora's box of conflicting emotions. We'd been reconciled for the last few years and there'd been regular visits, outings and set-piece celebrations which had brought us closer together as a family, but the past had been a long hard road. It was impossible to abolish history and no matter how generous and attentive my mother was towards the end, I simply couldn't throw off my old attitudes of resentment, wariness and distantly recalled pain. I was caught hopelessly between the present and the past; an inward struggle with no winners. Carol and I had also provisionally agreed to divorce, although we both seemed reluctant to take practical steps towards it. We had never recovered the romance of those years before the interloper appeared, and had gradually replaced love, friendship and trust with the soft cement of parenthood, financial partnership and inertia. Most of the time we rubbed along together, but we were both sensitive to anything that reminded us of the year we separated, and the ugly issues which were then exposed forever. Relationships seem to thrive on a mutual ignorance (or disregard) of each other's weaknesses, and this was no longer the case for us, as we fenced and boxed through the days, strangely uneasy in our nearness, like familiar strangers.

We were basically very different in our outlooks now, with my wife becoming a fully paid up consumerist, while I maintained an interest in 'down shifting' and a simpler lifestyle. She was theatrically sociable to gain supportive friends, while I was studiously anti-social to preserve independence and fleeting quietude. She was a happy-clappy born again Christian buying a stairway to heaven, and I was an inveterate cynic critiquing the world with monotonous grumpy old man intensity. We quarrelled incessantly yet avoided one another where possible, and when we agreed to approach the solicitors one day, we probably knew we wouldn't the next. Family visits to stately homes alternated with personal visits to estate agents, while heated exchanges vied with electrical silences to see which could have the more stressful effect. My wife spoke more to the guinea

pigs than me, and I thanked them for the distraction. The only thing that remained of our hippy heydays, was a split cane rubbish basket next to the toilet.

Still, continuing romance had its price too and I cheered myself up by remembering the man who told his wife to excrete daily in the public lavatories rather than the domestic loo, because her bathroom activities were spoiling his idyllic view of sex.

"Morning" I said, when I arrived downstairs.

"Hi" said two out of the three present.

"Mum's going to take us to see 'The Three Tenors' tonight" said my daughter.

"Oh, we're not *that* poor" I quipped. "I've already got four twenties and a fiver in my wallet, if you want to see them."

(silence)

"And I'm doing a *presentation* at school today."

"A *presentation!*"

"Yes, a presentation on 'what it's like to be a child in the 21st century:'"

"But I thought everybody was an expert on that these days. Surely we don't need any further explanation. Ha haha.....er....."

(silence)

I shook the debris out of the long-suffering toaster, took a lung full of lingering smoke, noted that we'd had cabbage the previous evening, and watched the guinea pigs watching me from their luxury winter cage. Seeing some bills hiding behind the ornamental lighthouse, I involuntarily reviewed the household budget which was written in red ink and permanently stapled to the back of my mind. We weren't heavily in debt by any means, but we had a steadily growing overdraft and I was having to run faster and faster on the overtime treadmill, with cramp setting in. I was happy enough with our detached house, black second hand sporty hatchback with pop up headlights, pine furniture, basic computer and weekends away. But Carol wanted a third child, foreign holidays, bulging wardrobes and state of the art gismos at every turn in the house. I counselled restraint, and she ordered store credit cards and mail order catalogues. I avoided shopping centres like the plague, and she treated them as blessed havens of modernity.

This led to extra shifts and plenty of night duties, and for a while I coped

well while many of my colleagues just reported sick and ordered 'The Oxford Medical Encyclopaedia' to research their excuses. But then the poor quality interrupted sleep began to wear me down, my chronic sinus problems got worse and I started picking up colds and stomach upsets. I contracted a chest infection and had my first time off work for three years, coughing up bottled fruit phlegm and taking antibiotic bombers, while Carol accused me of malingering and went to see one of my workmates who'd been off for four months with a 'backache' of uncertain origins. I'd never really pulled clear of that, and for two weeks I'd been waiting in freezing school yards, taking the kids to Beavers, Brownies, Scottish dancing and piano lessons in a daze of vagueness, irritability and febrile distraction. One night, I'd even turned back to philosophy for guidance, only to find that postmodernists were now as certain of uncertainty as I was.

In a whole life, we don't understand a single moment.

An Apocryphal Story: The Future of Madness

1964

Tarp was always a bit headstrong and self-centred, but the impact of school left him in no doubt that the ordinary conventions of life were not for him. He regularly played truant, and was often seen hanging around kiddies play equipment in parks, or listening to rock and roll in the public library. Nevertheless, his egalitarian schoolteachers were quite happy to award him his 12-plus examination (even though his scores plumbed new minima), just to make sure he didn't feel a failure and to give him every possible chance in life. So, at 16 he left the local Grammar with ten (grade 1) 'O' levels, masses of confidence and oceans of self-belief; as well as a noticeable inability to read, write or talk coherently.

While his contemporaries started work, or began A level courses, he opted instead for sitting at home watching 'Rag, Tag and Bobtail' on his mum's telly, or sniffing old balls of plasticine, to see if he

could get high. He told the neighbours that he wasn't interested in work, and that he expected to be paid by the government for doing exactly what he wanted for the next fifty years, because that was his basic human right. In the early hours, he was usually seen with a tin of gloss paint and a 4" brush, embellishing the nearby police station with union jacks and pictures of genitalia. The police sometimes came out and had a quiet word, but it was "only natural" for lads to behave that way - what else could young people do? It was 1964 after all.

At the age of 20, he put his football kit on every morning and played with his hoop and stick or marbles in the back alley until lunch was ready, after which he would ride his little red tricycle on the pavements into town, where he would shoplift and swagger. The local university heard about his maverick behaviour and soon identified it as a worthy expression of 'inarticulate social critique'; later offering him an honorary place on their sociology degree course. He refused in fine four-letter fashion, but was less pleased a year later, when his mother died.

Although he didn't bother going to the funeral, he soon noticed her absence by the proliferation of dust and bills in the house, as well as his own unaccountable malnutrition. Passing the big hospital on his roller skates one day, he had a flash of inspiration, and decided to go in and ask for help. The bearded doctor welcomed him onto the couch with open arms, and then began a detailed, trail-blazing psychiatric assessment. At the end of it, he said:

"So, you say you're "dyslergic" to work and responsibility, Tarp?"

"Fucking right, I do."

"Well, this is what we call a 'neologism' in our business. It means that you are creating new words as part of your delusion about life."

"Whatever you say, Doc, as long as I can stay in here for a bit."

"Yes, you can certainly stay. In fact you can stay indefinitely."

"Fucking brilliant – cheers mate!"

With that, Tarp was shown to the bed he would sleep in for the next twenty-five years, while the psychiatrist massaged a braless bust of Sigmund Freud and carefully placed a piece of pink water-marked paper on his leather topped desk. A man born before his time, and a regular contributor to the 'Lancet', he wrote:

Responsibility phobia: the first case in a modern epidemic?

Yes (he thought) the world *is* going into reverse. Good old Tarp.

"Time to go!"

So, we piled into the car still chewing our bacon gristle, shuddered over the traffic calming humps and joined the other grey-faced parents sitting uncomfortably at the semi-permanent temporary traffic lights on both sides of a big deserted hole. All around us there were children in blue, green and red uniforms traipsing along with dull bestial looks and vast rucksacks stuffed with key stage hieroglyphics, while frothing apoplectics mouthed obscenities at the side roads; their ways barred by stone age rivals. Thirty minutes and two miles later we were at the school, where the usual collection of thick-skinned narcissists were parked once again on zigzag lines in front of the gates, their eyes glinting with gunslinger venom at my well-practiced slow motion ironic applause, while a procession of cold, scantily clad young mothers sashayed by, modelling their latest catalogue purchases. It was *here* that Carol smiled for the first time today, as she blended seamlessly with the crowd, flicked a switch, and started chattering gaily.

Sidling through a tight opening in the twelve-foot high mesh fence which had been erected to discourage some local 'high spirited young men', we entered the school yard and Carol curtsied in the direction of a smirking parent-governor who was thrilling his twittering fan club with tales of valiant deeds down at the rugby club where he wore hipster shorts. I openly stifled a yawn, said farewell to the disappearing children and retired to the car, where I played Jimi Hendrix on the dusty stereo and waited for my wife to return.

"That was rude" she said, apparently referring to my lack of hero worship for the parent-governor.

"Agreeably so" I remarked with undisguised satisfaction.

"At least he knows how to put a tie on" she taunted.

"It's just a pity it wasn't three inches tighter" I rejoined.

To think that many years ago I used to give Carol her breakfast in bed on Sundays (although it was later revealed that she preferred it on a plate like everyone else).

We spent the rest of the journey in strained silence, as cars veered towards us like heat-seeking missiles, and the sky got another shade darker. For the first time in two years the car radio mysteriously crackled into life, and somebody commented:

"A man recently killed his wife for her life assurance, only to discover that she had already cashed it in to spend on her lover."

I couldn't help noticing that Carol's eyes were like the cross hairs on the sights of a sniper's rifle, but I was by now absolutely immune to any amount of sulking, and my mind wandered, not for the first time, into a reverie of paranoid self-analysis. *I was getting old*, and all around me deceit, excess and spin seemed to be turning mockingly orthodox, while my own values and beliefs lay buried under an avalanche of 21st century sleaze.

Yes, 'sleaze' was just the right word for it.

When I first started working at the unit, it was only a degenerate minority who regularly used their elephant hides and mercenary natures to exploit the system, but now a majority of staff had joined the bandwagon and the protesting few could only stand by as managers and abusers cutely turned the tables. Staff members who regularly drew attention to the excesses and deficiencies were at first cleverly humoured and given empty promises, but then gradually marginalized by counterattacking challenges, jokes about their 'obsessions', and ostracising acts. I had now almost entered this final phase, and I could feel the crowded ranks closing against me, as my naïve advocacy on behalf of the taxpayer was routinely reviled by the collusive 'closed shop'. *Farce, travesty and collective delusion had become so deep-seated in our local psychiatric services, there was literally nobody left to complain to.*

Neither could my qualifications help me, because all the talk of higher education in nursing had simply led to increased conflict between the

graduate nurse and the non-graduate manager. Even gaining a Ph.D. in my spare time hadn't impressed my masters, who simply procrastinated a lot and then shifted their studied indifference to a puzzled background resentment. In a working world that was defined by religious devotion to bureaucracy and the organisational status quo, my education had isolated me in very much the same way as my principles. I was called 'Doc' by my powerless friends, and asked to collect stool samples by my powerful enemies.

"You don't seem to think much of our management skills, Steven?" said one.

"Well, I know one manager who can render the first line of 'Old Man River' as a continuous belch, but apart from that.....No." I replied.

'Patient rights' on the unit had also set me apart from my more enlightened colleagues, who had joined with the massed bands of relatives, professional advocates, inspectors, consumer groups, public relations managers and health trust solicitors to ensure that people with even the most dubious 'mental disorders' were insulated from the irksome risks and obligations of life like a protected species. I perceived work as the first therapy, not the final illusive goal, and could not accept that maximising rights whilst minimising responsibilities could possibly provide successful rehabilitation within a society allegedly based on 'give and take' principles.

This had recently brought me into conflict with one irate relative who frequently berated staff for failing to improve the condition of her brother, but at the same time banned us from exerting the slightest pressure on him to even get up in the morning. I had pointed out the self-contradiction of this position, and asked her if she would like to assume responsibility for his care herself, if our approach was so clearly deficient.

"No I bloody wouldn't!" she squawked "That's your job! What do you think we pay our taxes for?"

I then pointed out that she had been on income support and other benefits herself since leaving school, so her contribution to the taxation fund was also somewhat questionable.

"What!! You bloody cheeky devil! My life's absolutely impossible and now you're making it even more difficult!"

"Could the Job Centre provide a solution?" I had recklessly continued.

This naturally landed me in hot water with management and I now had a disciplinary 'investigation' hanging over my head, with a guaranteed Judge

Jeffries outcome. *In a world held to ransom by career victims, ambulance followers and politically correct officialdom, my fate was hermetically sealed.* I was marooned in a deviant organisation held together by shirkers, bureaucrats and drones, making my own deviant status absolutely inevitable; either by adaptation to the prevailing deviant culture (he's now like us), or by disaffection from the prevailing culture and resultant labelling (he's deviant because he's not like us). I was truly in the jaws of a 'vice'. Yes, my old mum had the greatest difficulty understanding prize-winning books by "Simon Rusty", but her most dogmatic opinions now stood proudly above the sweeping sickness of fascist-liberalism; a disease which ate into our country, like the crab.

* * * *

The car careered on through the dismal streets, stampeding cocky sixth formers into the gutters as their gang mentality and instilled insolence gave way for the first time to primordial fear. Carol defended their youthful exuberance and misunderstood charms, while I prosecuted their arrogant disrespect and herd instincts, and we sped towards her workplace as two enemies in the same tank. She left the car without a word, clicked her neck like Mike Tyson going into the first round of a championship bout, and prepared her public self for a captive audience of blue-collar admirers. "Isn't that the bloke who gave you a lift home the other night?" I said, nodding towards a smart, urbane young man in the well-cut linen jacket of a solicitor on holiday.

"Yes" she cooed, swivelling her eyes between his chinos and my battle-scarred jeans, and back again.

"He's the factory van driver isn't he?" I commented.

"So what?" she snapped, and marched off.

Arriving back home, I observed a police car outside our house and an irate looking troglodyte stomping up and down the street as though he owned it. Two policemen and the troglodyte converged on me when I parked in the driveway, and I soon deduced that all was not well. I recalled the previous evening when I had disturbed two hooded youths wandering about our garden with spray canisters, and knew instantly that I had somehow offended their delicate sensibilities, exposing me to the full weight of the law. They had certainly looked rather surprised when their

spotty behinds were been assisted up the street with the parting message: "You are a pair of completely useless tossers going nowhere in life, and if I catch you down here again I'm going to deliver you back to your brain-dead parents in meat chunks."

Clearly, the troglodyte was one of the brain-dead parents, and now he danced in front of me, beating his chest and snorting like a gorilla about to charge, while I could only stare with forensic interest at his bulging neck.

"You assaulted my boy last night, and now you're in real trouble pal!"

"Would that be the hooded vandal boy with the graffiti paint?" I enquired.

"That's nothing to do with it pal! He was just having a laugh and you had no right attacking him!"

"You're keen on peoples' rights are you? How about mine?"

"Oi! Watch yourself smart arse. My lad's just a bit legally challenged that's all. Any more of your prejudice and I'll give you a smack!"

"It's the little parasites with the aerosols that should have been given the smacks you repulsive oaf" I replied. "And could you please refrain from power washing my glasses with your rank spittle?"

At this point the rabid ape launched himself across the driveway with a primeval roar which brought the neighbours to their windows like iron filings to a magnet, but the constables grasped him before his large hirsute fists could do any damage and I continued to smile amiably as his red face swung in front of me like a sun in nova.

"You're going to be paying me and my lad compensation!" he spat.

"Would you like your blood pressure taking?" I asked in way of reconciliation.

The policemen eventually interrupted his robust reply and persuaded him to go home, but only after he had received their reassurance that I was going to be interviewed down at the station. An hour and a half later I returned home wondering if a prosecution would follow, while two hooded forms scuttled about at the top of the street, grinning delightedly at my brake lights.

"The whole count....country is wet" said a stuttering, liberal weather forecaster.

The lunatics had not only taken over the asylum, they had taken over the other institutions of society too, and I dropped onto the sofa as if a giant boot was relentlessly stamping me into the bloody dust. Our T.V. spluttered into life, and I watched the continuous flow of inane adverts, smirking contestants on multi-coloured quiz shows, drunken louts in Ibiza, chuckling

adults in Disneyland and (on tape) mono-syllabic bald men in soap operas shouting for their next T.V. award. *A world of toys, infantilism and futility bore down on me. Hard.*

In urgent need of escape, I walked to the computer workstation and picked up a hardcopy of the cathartic, whistle-blowing book I'd been working on for three years ('Inside the Cuckoo Clock'). Like an episode of 'Casualty', the unrelenting horror nearly always cheered me up. Especially this part.

The 'phone rang while I was switching the T.V. off. It was Kate – one of our many ex-nursing assistants.

But a special one.

This was 'kiss me' Kate, a wonderful flaxen-haired, 24-careet beauty with sapphire eyes, serpentine curves, Nordic directness, sugar, spice and all things nice.

"Hi Steve" she said "A few of us are meeting up at the 'Tar and Feathers' on Saturday night. Do you want to come along?"

"Yeah, why not" I replied casually, my mind extrapolating wildly.

"Great. You could bring a bottle back to my place afterwards too, if you like."

"I'll do that. Thanks a lot."

"See you then. 8 o'clock at the Tar and Feathers."

"Bye Kate."

I was already in the pub, cutting an elegant but mysterious figure in my Oswald Moseley black shirt, suede winkle-pickers and fashionable wrap-round sunglasses. I exuded an easy confidence as I strolled towards Kate and her perfectly irrelevant friends, whom she had invited merely as a cover for her assignation with me. She was dressed in an ivory-coloured silk blouse, black pencil skirt and sheer tights, with her legs crossed cleverly to exhibit two gorgeous thighs. We chatted amiably about a variety of profound subjects, laughed hilariously at each other's jokes, and exchanged beautifully synchronised non-verbal cues, before making independent excuses and adjourning to her flat for three hours of blissful sexual congress. Naturally, our trysts would quickly become a passionate *affaire*, and we

would often venture out from our love nest to dine in palatial surroundings, walk silently in Northumbria, or water-ski in the tropics. As an intellectual nymphomaniac, she would be my soul mate for eternity, and it would only remain for me to break the news to a sobbing, heartbroken Carol who would wisely hand over the children to me. They would naturally take this in their stride, live happy successful lives, and be more than pleased to wipe my bottom when the time eventually came.

I wish.

But sometimes wishes *can* come true, I thought.

Carol 1980

When I met Carol it was really love at first 'site', because we were both in a rock club we liked, listening to music we liked, drinking lager we liked, talking about subjects we liked, with friends that we liked. When you added up all the likes, they seemed to almost equal love, so we started going out together and soon shared a flat in a terraced house with buckets for the leaks, traps for the mice, and a massive electricity bill we had to pay in 24 equal instalments. Our shower flooded the downstairs neighbours' flat, and their motorbike filled ours with carbon monoxide when it was warming up, so we had a close organic relationship for six months before moving up to a rented Victorian cottage in a local village. Carol had long, dark brown hair parted in the middle, a serene face, artistic leanings and small pointed breasts with fabulously erectile tips. I was still no oil painting, but I had a good head of hair, unrealistic ambitions and a thin sinuous body with phallic intent, so she wasn't short-changed too much. We rolled experimentally in front of the condemned gas fire and when her thighs became a necklace, the spider was happy with her fly.

In the cottage there were antlers over the fireplace, chintz-patterned chairs with broken webbing, rampant silver fish in the kitchen and a damp patch in the main bedroom which was so attractive it had been colonised by a family of slugs. There was a long rear garden which had turned into a tropical rainforest of gigantic thistles and looping dog roses - once trapping our next-door neighbour for ten minutes, as two thorny vines snarled her fur coat on the way back from the Women's Institute.

"Our bubble almost burst then" Carol said.

Bubble was right. We were inseparably close; fifty miles away from all our friends, and viewing life through the glass with Alice, amidst the herbal tobacco, vegetarian stews and Jack Kerouac novels. We rowed and made up with childlike zeal, discussed the psychedelic philosophy of Timothy Leary and planned a future of paid art and sociology (sic). We missed each other when rarely apart, and I concluded that love was the most solid principle of all.

But good things always come to an end, and as the years slowly trickled by, I began to realise that I'd lost my momentum, lost my sense of balance, and failed to see the fading light. My thirst for knowledge and self-discovery

hadn't made me particularly employable in a world that preferred its slaves pre-packaged and uncritical, and I found myself over-qualified, unorthodox and under attack. In 1988 Carol declared a growing interest in children and mortgages, and when I took the 'golden' opportunity to do some research at Cambridge, the proverbial camel's back broke. I came back to discover a more practical man warming my slippers, and the past forgotten. This was partly predictable, but nevertheless devastating, and I spent many gloomy months in penance, as I pined, planned and manoeuvred to recover my errant love. Carol's sudden indifference was sadistically augmented with cruel jibes or manipulative endearments as she kept both men dancing, and for six months or so I slowly turned on the Devil's spit. In the end, my patience was rewarded when the slipper-warmer rolled into oblivion with a series of self-inflicted wounds, and my 'romance' was miraculously rescued from the brink. But love and trust were now as dead as the grave, and another idol had demonstrated the foolishness of my worship.

Nevertheless, our relationship eventually recovered to about half of what it was, and in 1990 I began training as a psychiatric nurse. This helped pay the bills, and soon our lives were conforming to the Western template as we applied for our mortgage, got married and started our first child. Mental health nursing had never been a key part of my grand vision at university, but it was nevertheless an eye-opening experience, and I soon started to appreciate the distance between my firm theoretical assumptions and the weird realities behind many closed doors.

Some of the patients were almost extraterrestrial in their appearance and behaviour, and the amount of body fluids, violence and dependency we had to deal with was staggering in the extreme. It was the back of beyond in the here and now; a medieval society on an alien planet, and a curious self-contradiction of rarefied professional policies and continuing traditional practices. My qualifications were worth nothing, and I rediscovered all sorts of personal weaknesses which I'd despatched to the back of my mind during the halcyon days of self-flattery at college. I had difficulty juggling all the little demands on my time because I was used to blinkered concentration, and my introverted personality shied away from clamour and confusion. I had trouble dealing with authority figures because I was used to reason not power, and I was timorous in large groups because of my nervous and gauche nature. My artistic

indifference to mega-bites, CD-Rom drives and floppy-disks was becoming unsustainable, and modern technology quickly swept me aside.

The theoretical elements of psychiatric nursing were taught at the local college of health studies and this turned out to be largely fatuous, time-wasting tomfoolery designed to keep the Americanised lecturers insulated from anything remotely didactic (e.g. 'warm up games' where we pretended to be different sorts of exotic fruit, or spent ten minutes rolling over each other on the carpet), plus a heavy dose of theatrical sanctimony from my esteemed peers. But I qualified in due course, got a local job, and sired a little boy to join the little girl in our 1970's semi-detached bungalow with 'Georgian' style bow window, gardens to three sides, and a concrete and asbestos underwater garage. We had the garden vandalised every Saturday night, bump-started our old Renault Fuego down the hill every morning, and forgot our wedding anniversary every year (both of us).

By 1992 we were rich enough to buy a 1930's detached house with the roof falling off, and I spent a hundred hours or so improving the kitchen, refinishing Art Deco furniture, and dodging rogue roof tiles in high winds as they scythed through the air like Odd Job's bowler. We turned the rooms into a pre-war museum, with tin plate toys, cast iron fireplaces, wood and Bakelite cased H.M.V. radios, ancient tomes and Tiffany style lamps. Later, we discovered woodworm, snails under the stairs, a damp spot near the chimney, how cold it was without central heating, and a toilet which used gallons of water, but still left bran bulked stools floating on top after three flushes.

We had a lot of vandalism again, with one notable cretin holding his partner in a reverse bear hug so that two feet could be used to topple the stone balls on our gateposts. I thought we were especially unlucky when an ornamental squirrel had its head kicked off, but the old couple on the corner had their double-glazed lounge window broken three weeks in succession by the same delinquents. The squirrel's head was used on the third occasion.

But I contented myself that I had firmly relinquished the bohemia of motorbikes, sociology and hippy values, in favour of average wage packets, status improving cars, reasonably impressive houses, upward mobility and parenthood. Surely, with my new credentials as a completely 'normal', decent, hard-working fellow, I could look forward to a fruitful, harmonious

future, with few problems and plenty of solutions?

But when the momentum stopped, I began to suspect once more that things weren't quite what they seemed, and that there might be a heavy price to pay for this wonderful orthodoxy; just like everything else. And this time I was right.

The Channel Tunnel opened in 1994, and I was soon disappearing down my own hole.

Daily Post, 30th. June 1990.

New Mental Health Act

A Government spokesman has assured people that the new 'NHS and Community Care Act' will not lead to significantly greater risks for either mental patients or the public. The new legislation is intended to ensure the delivery of widespread community based mental health services, and to counter the negative effects of traditional regional asylums. It is hoped that 'home like' surroundings and individual cares will help people return to a more normal way of life, away from the 'institutionalisation' and isolation which often prevails in large psychiatric hospitals.

The community care movement has gathered momentum in the last decade, as academics, clinicians and politicians have joined forces to urge a more humanitarian approach. The new system stresses a 'rehabilitation' style approach which should enable people with mental health problems to become more independent and self-reliant within mainstream society.

Clive B———

Political Correspondent

The Unit

“Caring for psychiatric patients in the community is a fine and noble idea; unless the community itself is a pathological phenomenon.”

Anon.

“Get up” somebody said in my ear.

One eye opened, but my sticky body glued itself tight to the damp mattress and my mind hung in limbo.

“Get up and go” insisted the unpleasant rasping voice.

Reluctantly, I turned over and looked at the alarm clock which seemed strangely large in the half light, and showed luminous green hands at 20 minutes past late. I yawned until my jaw cracked, then pushed my leaden form onto the edge of the bed, where the whole room whirled reassuringly around me.

“Bloody Hell, I’ll never make it to work like this.”

But the room slowly stabilised, and I started to look for my slippers amongst the debris which seemed to have accumulated in the bedroom overnight. There were magazines and newspapers, cuddly toys with impish faces, lots of pillows, and plates of food with greasy egg patterns strewn around the floor. The whole mess instantly disappeared when I switched on the light, and I cursed the garish carpet and the flickering shadows for playing cruel tricks on me. Yet the room still held an eerie glow under its energy-saver bulb and the pigments swam around like Salvador Dali’s paint palette as I limped towards the bathroom and doused my face with an icy jet from the tap marked ‘hot’. Carol hadn’t stirred, and I showered quickly under a scalding hail of liquid bullets, wondering if I’d eaten something I shouldn’t, or whether I was just drunk from a forgotten night before. The stairs were spongy as I half fell down them, and the moonlight projected jagged silhouettes through the thin gingham curtains, adding to my unease.

There was already an overpowering smell of cooking fat and cabbage in the kitchen, so I decided against the usual burnt toast, and made do with an Argos mug of full strength coffee instead. It was curiously textured as it trickled down my throat and I wasn’t sure if I’d enjoyed it or not, as my nerves twitched under the caffeine flick. Opening the curtains, I gasped at the sight of deep snow covering the roofs and gardens, and a huge full

moon suspended above the escarpment like an alien sun, almost blinding me as its rays bounced off the white fairytale landscape and flashed into my blood-shot eyes. I sensed that my reactions were unusually disproportionate, but the scene sent shivers up my spine and riveted me to the window with an overwhelming, transcendental force. Winter was hardly a unique event, yet it assaulted my senses with unbridled power, and I was momentarily transfixed.

There was still just enough time to walk to work, so I pulled myself away from the window, donned my once-a-year Wellingtons and put on the old student great coat. I snapped open the warped door, staggered under a blast of freezing air, pulled on my tea cosy hat and headed up the street, now almost enjoying the bagatelle forces which seemed to be gripping me. There was certainly a weird unreality in the world, as the icy wind warmed my cheeks, the frost crackled loudly underfoot, and the snow blew lazily upwards in concentric circles. I was spellbound, rather like a child walking into a fairground from the pitch black street, and I became aware that my senses were almost penetrating the objects about me, enhancing colours and forms, shadows and perspectives, sounds and smells. Bringing everything alive with magical ease.

But there was a price to be paid for this sensory acuity, and I began to experience an uncomfortable vagueness about my whereabouts and intentions, walking forward automatically, but with little in the way of anticipation. The frozen wastes seemed to float by and I found myself giggling at the sight of smoke coming out of three chimneys on nearby roofs; the whole terrace looking rather like a White Star liner breaking through the ice pack. In fact, I was just expecting to see the infamous iceberg, when I turned the next corner and saw a half-hearted snowman listing badly in somebody's front garden. There was no joke, but for some reason I found myself howling hysterically at the prospect of the terraced houses crashing into the little snowman and sinking out of sight; until an irritable looking goblin face peered out of the nearest window and silenced me.

With lightning speed, my euphoria gave way to irrational terror and I found myself running down the slippery path and across the grey spooky park as though the hounds of hell were after me. I ran for half a mile through deserted streets, past the vast, silent, empty office blocks and on towards the three-tier bulk of the hospital, where I finally stumbled to

a halt, heart thundering, chest heaving and a staccato pulse beating loudly in my ears. My powers of reflection were clearly dying, and I could only hold on tight as my footsteps now advanced towards the Gothic horror of the hospital with little volition; yet Frankenstein intensity.

Like an image trapped in a can of film, I was being projected.

"Bzzzzzzzzzzzz!"

"Christ, another bloody nightmare."

The alarm had shattered my dream world and I gradually adjusted to the twilight, the cold beyond the bedclothes, and the prospect of another early shift on Devil's Island.

"Stop exaggerating" I croaked.

But I wasn't exaggerating that much, and for a few precious moments I shrank back into my warm little cocoon and waited for the nagging pains of conscience to grow stronger, while memories of yesterday's late shift slowly percolated through my brain, and there was another click of the rack's ratchet.

Cecilia, a rather difficult patient, had arrived back from her father's house, apparently in quite a good mood, laughing and joking, conversational and basically too good to be true. Inside twenty minutes, she was punching doors, kicking over chairs and telling anybody who came near her to "fuck off". Another ten to fifteen minutes and she was pounding her bleeding knuckles on the brickwork, depositing a cup through the smoke room window and ripping two toilet seats off their hinges. She refused to talk about it, wouldn't take any medication, alluded to "voices" and seemed to take a devilish delight in her behaviour, as she continued her systematic demolition of the unit. Being on duty with only one other member of staff – a dear old lady auxiliary nurse who sat petrified in a corner – I decided against any heroics under the common law and instead took the consultant's advice to ring the police. Two hours later they reluctantly appeared, only to observe the patient enjoying a mug of coffee in the

T.V. lounge as she amiably apologised for her loss of control. The bill would be around £250 I suppose, but the cost of such damages was never borne by anyone on the unit so we would never know.

Still, Cecilia very rarely misbehaved in the *morning*, because she was usually too busy making her way through a labyrinth of getting-up routines to worry about violence. I knew she used these obsessive-compulsive rituals to stabilise her troubled mind, and I momentarily reflected on how my own life of ritual work, ritual holidays, ritual meals, and ritual conversation probably served a similar function. It was an irony which rankled, but I completed my ablutions, mouthed a silent farewell to the deeply sleeping forms of my children, ventured downstairs to the kitchen, and flicked on the radio:

“The government is concerned at the number of people killed by ex-mental patients. It is estimated that there have been 100 murders by care in the community patients in the past five years, and that 1,000 have killed themselves over the same period.”

This was just what I wanted to hear (not), so I switched the radio off, parted the gingham curtains and looked out on a row of dead stick trees bending under a heavy frost. There was a solitary sparrow attempting to pierce the rock hard lawn with its beak, a fat black cat lurking under the bramble hedge, and an endless sweep of red bricks and stained picket fences - as our toy town estate rolled on and out. Not even the greatest romantic poet could infuse this view with any transcendental meaning, yet I knew that by the end of my shift I would be yearning for these same sights with nothing short of rapture.

An amplified trump reverberated around the toilet bowl upstairs, and an invisible hand pushed me to my feet.

It was time to go.

Mutually Assured Destruction (M.A.D.)

In the 1970's the cold war was still pretty hot, and there were endless news items and documentaries about the proliferation of nuclear weapons. The impotent masses tended to see this practice as dangerous, but a series of governments assured us that the frightful threat of atomic warfare was effectively keeping the peace. This was the policy of Mutually Assured Destruction (MAD).

It was the first official recognition that madness could be a normal state of affairs.

But as community mental health care has proved, not the last.

I opened the side door and was almost blown off my feet by a cannon-like blast of Arctic wind, and saw that a boiling black bank of cloud was rolling across the horizon, with my name on it. Some lights were on in the neighbouring houses, and I was momentarily consoled by the fact that other people were preparing for a working day that they also roundly despised. Even more cursed, I imagined, were those who wore their chains willingly and were actually looking forward to their office gossip, hierarchical positions and new sales targets. They were unlikely to ever look up at the open door, and escape.

Setting off, I assumed the obligatory 45-degree angle walk to counteract the funnelled gale and eventually passed a row of Edwardian houses which seemed to have caught quite a bit of snow in their interesting angles. I reflected on how much I missed our old 1930's house, even though the tiles were always falling off and the sub-tropical garden had begun to undermine its foundations. I remembered also the G.P. who lived behind us, cutting the edges of his lawn with tailors' scissors, and weeding the flowerbeds under house floodlights, as half an hour before midnight he fought off the stress of his inner-city surgery. But working in health care had impacted on me too.

Passing houses and gardens which were once uniquely interesting, but now merged into one amorphous mile of brick and plant because of the two thousand times I'd walked past them on the way to work, I reached the bus shelter. Full of broken cider bottles, covered in artless graffiti and smelling of idiot's urine, the dilapidated 1970's structure was hardly sylvan, yet something arrested my attention and this proved to be a black dog huddled in the corner. Conscious that I had not so far talked to another living creature, I said "hello" to the dog in a worldly-wise manner, and the poor thing began to follow me. All the way through the park, with its winding paths and coiled rings of crusty poo, down the narrow terraced streets of Victorian forecourts and high bay windows, past the 1960's concrete building blocks, and on to the crumbling gates of the old, tired hospital. Here, the black dog looked up, turned around and headed back towards its council estate, showing me a wiry tail trailing in the cutter and a baleful look of psychic certainty. I also looked up at the Gothic masterpiece, with its disused turrets and castellated chimneypots; knowing only too well its inner Dickensian ugliness, and its indestructible black soul.

My eyes drifted across the road to a comforting news board:

"Papergirl stabbed for 50p."

The Sunday Bugle, 9th. May 2003.

Bed Blocking in Psychiatric Units

Crisis looms in mental health units and wards around the country, as community care patients are often unable to move through the system as intended. Beds are blocked for long periods, because patients are not responding to therapy or they cannot get funding to move from one part of the service to another. This is creating a backlog of referrals from the community teams to acute wards, from acute wards to rehabilitation units, and from 'rehab' units back to the community. There are also long delays transferring people from the mental health sector to social care and private

facilities because of financial difficulties and 'territorial' disputes.

At the same time, there are growing numbers of people with drug and alcohol related problems being referred to acute psychiatric wards.

Dick C———
Medical Correspondent

The hospital had been a workhouse in the nineteenth century, but now it was very much the reverse. These days it was populated by a bizarre combination of largely unproductive individuals; managers, clinical staff and patients all circling around in a costly carousel of bureaucracy, political correctness, over-dependence and inertia. But I was part of it, so I ran my eyes over the three tiers of sooty red 1860 brickwork and made my way around the back, across the car park and up to a door marked 'Rehabilitation Unit', which I found locked from the inside. This was unusual at 7.00a.m., and a variety of intriguing possibilities rushed through my mind as I recalled the tale of two night duty staff sleeping most of their shift and waking up to find that the unit had been burgled. Rumours had always abounded, of course, about staff nurses copulating with students all night, and even though this was generally apocryphal, it did provide me with my first jolly thought of the morning. Indeed, I found myself wishfully musing about alien abduction and mass walkout, but unfortunately the truth was much more prosaic; the staff had simply forgotten to unlock the door.

I was eventually allowed in by a tired and relieved looking agency nurse, and then instantly transported back into the surreal world of mental health nursing, just as though I was in a 'golden key' book of the sort my young son was currently reading. People often say that smell is the most redolent and evocative sense, as memories of childhood, holidays and social situations are quickly prompted by a characteristic fragrance from those times. So it was with psychiatric wards, as the hellish combination of stale urine, fresh

faeces and rampant body odour never failed to remind the recipient of his or her first wonderful experience of in-patient mental health care. Yet mercifully the mind can often habituate a constant stimulus, and after two or three minutes of nausea and revulsion, the stench miraculously faded (thus ensuring its continuity, I suppose).

Taking note of the assembled staff in the office, I withstood the first wave of playful insults and disingenuous greetings.

"Here he is."

"Hello, everybody - what an expected displeasure."

"He used to turn heads when he was younger, you know."

"Yes... but now he turns stomachs."

"Ho ho."

"He's the life and soul of every party."

"Especially the Stalinist Party."

"Ha ha."

"He's been tossing and turning all night."

"Especially tossing."

"He he."

(etc. etc. *ad nauseum*)

The Health Care Assistant sitting at the desk (where the qualified nurse usually sat) was the original poison dwarf; an individual who had to be flattered at all times, otherwise his angry inferiority complex filled the room like a huge inflating lifejacket. But I gazed at the kilogram of chemical scaffolding he used to build up his semi-Mohican haircut, and I just couldn't resist a dangerous ruse.

"That hairstyle really suits you, Zebulon... It makes you look three inches taller, actually."

"What...really?" he replied, his face buckling into a wary, hypersensitive scowl.

"Yes, indeed." I reassured him. "...It must have added a good 10% to your height."

"Well, I always try to look my best, Steven" he laughed, fully restored to his bumptious norm. "Unlike you."

I glanced around, and caught a sly acknowledgement from the harassed night nurse who was perched on the windowsill. At least two of us knew what 100% added up to, if 10% was three inches.

And once I had such high hopes for myself.

But the clock was always ticking on a psychiatric nurse, as you wished your life away in the tick tock world of stress and release. Anticipating the end of a shift, craving days off, booking holidays with the drooling relish of a mad dog waiting for the final kick, and absolutely *dreaming* of retirement. Cottages in Wales, cruises in the Caribbean, fawn jackets and bowling woods, illness and death. A lager at the end of the desert crawl.

So I consoled myself by thinking about my night out 'with' Kate on Saturday.

Only two days to go.

Kate 2005

Well, I turned up at the 'Tar and Feathers' with my Oswald Moseley black shirt, fashionable wrap-round sunglasses and suede winkle-pickers, but that was where my jolly daydream (previously mentioned) quickly fell apart. Kate just winked at me from the wrestler's embrace of her Brad Pitt look-alike boyfriend, while the rest of the crew generously made room for me around the corner, amidst the vinegary empties and heaped ashtrays. Even there, I could still observe the wrestler's hand creeping up Kate's tights under the distant table, so I glanced away and drank quickly.

I was about two pints behind everybody else and consequently Martian, but I eventually caught up and began to enjoy the general melee. Some of the crowd knew me, which is more than I did, and we exchanged ritual vulgarities until about 10.00 p.m., when I slouched to the bar for my last intended drink. Unfortunately, Brad Pitt was now holding court behind me, and I involuntarily cringed as each of his punch lines reverberated around the room like a dart scorer's one hundred and eighty and his well-trained audience guffawed and squealed with rapturous delight. A punk rock choir in purgatory would have made a more welcome noise, and I quaffed the frothing beer with grim resignation, ready to leave.

There was an unhealthy collection of vintage whisky bottles running around the top shelf of the bar and I was just about to congratulate the publican on his ingenious wasp trap, when.....

"Hi, Steve."

It was Kate.

"Hi, Kate. Are you all right?"

"Yes, fine. Sorry we haven't had a chance to talk, but you were sat so far away I'd have needed a loud hailer."

"Well, you've had one stuck down your throat all night." (I thought), but instead I said " Yeah, I was a bit late arriving. But there'll be other times."

"Oh.... but I thought you were bringing a bottle back to my place?"

"I'd love to, but it's getting a bit late now and you'll probably have a house full anyway."

"No, most of them are going on to a club. Come on Steve, you're not getting too old for it are you?"

"Well, if you're sure?"

"I'm sure."

"Oh, all right then" I laughed; capitulating too readily.

"Do you know Percy?" she said, pointing to Brad Pitt.

"Not in the biblical sense" I replied with false bonhomie (acknowledging him graciously).

"Ha ha...very good.... I'll see you later then."

"Okay."

So, I bought a bottle of Chateau Shite and followed the crocodile back to Kate's flat, where Brad Pitt (surprisingly) made his spit and polish farewell, and joined the disco-bound majority. Kate and I sat a lot closer together this time, and as I admired the soft whiteness of her recently licked skin, I wondered whether this would be the ideal opportunity to talk about a variety of profound subjects, laugh hilariously at each other's jokes, and exchange beautifully synchronised non-verbal cues (as previously imagined). It wasn't.

In fact, we were two opposites. She had extremely correct, code of practice-worshiping views about psychiatric nursing, while I was lost on the roundabout somewhere to the right of Genghis Khan, yet well to the left of Karl Marx. She was tender and kind, while I was jaundiced and insensitive. She was occasionally wry and whimsical, while I was constitutionally sardonic. We were both direct. We argued about anything and everything.

We liked each other.

But the evening began to taper off as the loo filled with noodles, Leonard Cohen filled the speakers, one guest fell down the stairs after another... and my confidence left with them. There was definitely a spark in the air, but I was never a chat-up merchant and didn't dare fan the flames, so Kate and I lingered on the doorstep for awkward non-committal moments, while the milkman floated by, and the cats howled. Telepathy failed me just when I needed it, and as Kate moved slightly towards me, I simply launched a clumsy kiss at her left cheek, and hoped for the rest. She smiled brightly, and closed the door with a gentle click.

I went home then; with a future as well as a past.

Or so I thought.

The Unit

2005

Another day, another dime.

Thinking nostalgically of the black dog (it had followed me again this morning), I drew up a chair, ensured there was no trace of human excrement on it, and prepared myself for the report, or as it was usually called in this part of the world 'hand over'. The first wails, shouts and coughs of the shift drifted down the staircase, and on this orchestral background we began.

"You look rather fetching in that Womble outfit, if I may say so."

"Yes, I'm going straight from here to the charity walk".

"That necklace of real bananas is a masterstroke."

"Thank you."

"It should be tremendous *fun* for all of you."

"Ha ha ha ha ha " we all reflexively chortled.

"But don't forget to collect the sponsorship money this year will you?"

"Er...no.....of course not."

"It was a quiet night then?"

"Yes, it was basically a quiet night" she said "David didn't sleep much again. He was wet three times, and had a big bowel movement about an hour ago."

"Yes, I smelt it as I walked in" I replied helpfully. "How big a bowel movement?"

"About sixteen inches long and five inches across."

"Fairly average for him then" I observed without a trace of exaggeration.

David

1946

'The White Cliffs of Dover' played on a distant radio while David sat listlessly in the little office attached to warehouse 3, and watched the belching trucks drive out of compound C. He pulled down the short sleeves of his khaki tunic, reached again for the dog-eared

letter in his pocket, and drifted off into fruitless thought. The war was over, he had avoided contact with the enemy by being inconspicuously diligent in Supplies, and now all he had to do was wait for his discharge. But the end of the war meant the end of many things in David's life, and now all he had left was a hollow feeling that wouldn't go away, the hot tacky sheets of restless sleep, and a nagging anxiety. His parents had been killed in the blitz, his best friend from school had stepped onto a land mine, and the school itself had disappeared into a crater, having taken a direct V1 hit in the last months of 1944. These were the images of his days and his nights - as love, conscience and memory collided in growing darkness.

He had hated discipline ever since school, but he couldn't act without it, and the prospect of civilian life, job hunting and independence mortified him. He wanted to get married so that a nice girl would look after him, but he could never aspire to the sort of passionate courtship he'd seen on 'Brief Encounter', and he carried his virginity around like a second head. He was tall, stooped, balding and ineffectual, dithering and stuttering his way through the world in a daze of puzzlement and worry. His unattractiveness was slowly turning into misogyny and decay.

There had been one special lady in his life during the war, and they had sometimes gone to the pictures or a dance when their leaves coincided, but his romantic overtures had never extended beyond a private erection in the cheap seats, and now she had gone. Years of Errol Flynn, cocky yanks and celibacy had taken their toll, and she had written:

Dear Davy,

I'm afraid I have got some good news.

I've met a wonderful man called Frank who wants to marry me. He loves to tickle me with his thin black moustache, and has a case full of nylons and chocolate which he found near the docks. He is

so good that he gave me a ring off the third finger of his left hand as an engagement gift, and I am besotted.

I am also pregnant.

If only you had kissed me once in the four years we had together, it could have been so different, but yearly handshakes at Christmas were never going to be enough for somebody hot-blooded like me (particularly when you kept your gloves on).

Goodbye.

Yours truly,

Daisy

David folded the letter carefully away for the twenty-fifth time, thought about his friend from school, and prayed for divine intervention. It came the following day in the form of a letter from his sister, who invited him to stay 'for a few weeks' until he got himself sorted out with a job and lodgings.

Two years later, she kicked him out onto the street, and told him that he was obviously incapable of keeping a job, and that she didn't like the 'unhealthy' way he looked at her husband. David spent ten minutes looking at the closed door and his heavy bags, and finally decided to take a grip of the situation; appearing thirty minutes later on his brother's doorstep instead. As the years passed by, David's siblings all took it in turns to parent him, but as the options ran out he became increasingly desperate to prolong his stays, developing a puppy-like charm when anybody was kind to him, evading challenges with vague quizzical looks and half-deafness; often feigning illnesses.

Eventually, the family G.P. brought David to the attention of a consultant psychiatrist, and he recommended that David be admitted to the regional mental hospital for a short period of

assessment. David was initially petrified, but he agreed, and then quite enjoyed the extra attention, free meals and regularity of the ward, taking great interest in the behaviours of long-stay patients, and the role of the nurses. His condition deteriorated shortly afterwards, and as frequent temporary stays merged into contiguous long stays, David willingly exchanged the army for the asylum, and felt safe again.

Psychiatric nursing had a complete fixation with bowels, as mental health trained nurses strained to prove their general nursing credentials by making constant references to the frequency, amount, consistency, smell and colour of their patients' stools. Bowel charts, stool samples, *per rectum* and abdominal examinations all excited the greatest interest and concern, while the administration of enemas and suppositories was a highlight of the week, invariably performed with near religious zeal and reverence.

Huge stool sizes were not in fact that abnormal in psychiatry, because patients often had constipation and sluggish bowels due to drug side-effects and sedentary life styles, leading to infrequent but massive 'clear outs'. Sometimes the toilet would be totally blocked, necessitating a call out for the hospital engineers, and on one occasion the toilet bowl was filled to a level three inches above the seat, needing a shovel to remove the pile. Patients sometimes fainted when delivering these 'babies' because of fluctuations in blood pressure, and one patient was so used to these occasions that he obligingly rolled up his sleeves and cleared toilet obstructions himself, notwithstanding staff advice to the contrary. It was often joked that modern 'holistic' care approaches really revolved around one particular hole, and that this was in fact the 'holy grail' of psychiatric nursing activity. Disappointingly, one of the more sickening web sites had already disabused staff of any claim to record breaking fame, because stools up to six feet long had been recorded in the United States some years earlier.

The night nurse went on to recount that the fire alarm had gone off overnight due to a fault in the circuit and that, as usual, it had proved virtually impossible to persuade most of the patients to leave their beds while the situation was investigated.

"Yes." I remarked. "Once, when we had a fire procedure test, the Fire Officer set off a smoke machine in the kitchen, and just like clockwork most of the patients saw the smoke and ran upstairs."

"I'm only surprised the staff didn't follow them" said the auxiliary night nurse.

"Well in fact they did go upstairs to plead with the patients. If I remember correctly, the Fire Officer and the unit manager were the only ones stood outside when the Brigade came."

"Of course. Wasn't that the day the Fire Officer told staff he couldn't train them to use the fire extinguishers because the Health and Safety Officer had declared it too risky?"

"That's right" I said. "They were afraid somebody might get burnt."

And so it went on. The handover was the institution within the institution, serving many purposes beyond the simple communication of relevant information, and usually diversifying well beyond the matters in hand. Because the unit had been totally bed-blocked with intractable patients for many years, the report was robbed of genuinely interesting facts such as clinical progress, transfers and admissions, so it had largely degenerated into minutely detailed accounts of patients' regular day to day behaviour. It was almost as though we were reviewing an episode of 'Big Brother' or some other fly on the wall pseudo documentary, as we tirelessly regurgitated needless observations on the patients' personal routines, repetitious statements, and dietary habits. It was a rut we had fallen into and the report usually contained very little information that the receiving nurses didn't already have before they arrived, leading some to refer to it as 'Groundhog Day'. Tragically, even the patients' most bizarre behaviours, such as screaming abuse across the fence at members of the public, presenting fixed delusions to staff, or attention-seeking incontinence, were all part of a well known pattern which no longer gave the slightest surprise to permanent staff, and was indeed expected at regular intervals. As one person put it, *the bizarre had become boring*, but this predictability did not mean the report was necessarily a short affair.

A few years ago, the report was regularly timed at one and a half hours, requiring tea, coffee, soft drinks, biscuits, platters of cakes and sandwiches to sustain the noble throng in their professional deliberations. The patients were usually totally abandoned during these gatherings, until the most aggressive individuals would try to kick down the locked door to request

some input from the “busy” people inside. Notoriously, it was next to impossible to contact the unit by phone during these periods, because staff took the precaution of having their meetings down the corridor out of telephone range, and on a number of occasions visitors to the unit came and went without being able to locate a single staff member. In one famous case, staff spent well over an hour nobly debating welfare issues, only to discover afterwards that one patient had fallen downstairs and broken a leg while they were all pontificating. It was only when the growing tumult of (im)patient outrage beyond the door reached fever pitch that staff would reluctantly tear themselves away from the narcotic repartee, age-old complaints and circular analyses to re-enter the fray. Escape from real work and real patients was no doubt an important part of this tradition, but it remained unspoken, like all the unconscious collusions in this weird, dysfunctional place.

Eventually the situation became *more* than ridiculous, and I remember the day well when one charge nurse becoming terminally frustrated with the excesses of the system. Resorting to a theatrical solution, he simply picked up the care plan folders, read out the names and placed them back on the desk. This, he maintained, covered all the information we needed to run the next shift, and he proved the point by challenging his colleagues to come up with anything new that the afternoon shift wouldn't already be aware of from either their own experience, or the desk diary. There was a resounding silence, and we moved on.

“Here're your keys” said the night nurse, as she passed across a colour-coded mass of brass and steel. “Hope you have a quiet shift.”

Feeling my hand move downwards a full inch because of the weight, I bid him, the diminutive Zebulon and their auxiliary nurse goodbye. I then sighed resignedly as I watched their smoking estate cars carefully traverse the frozen car park, and turn through the main gates. Some of the other night nurses were also clearly destined for the charity walk, as they left their wards variously dressed as Barney the Dinosaur, Gandalf, Harry Potter and a Cyberman.

“Ha ha. Tee hee” they chortled.

“Don't forget to collect the sponsorship money again” I called across.

Well, at least they would have lots and lots of *fun*. That's the main thing. Isn't it?

Looking down at the keys, I disentangled a 'handy' bunch of twenty for my nursing assistant and considered, not for the first time, why we had so many keys for a relatively small unit. Altogether, there were two hundred and fifty-five keys on the premises, sub-divided into three staff bunches and a special collection which lived in a 'handy' cupboard down the corridor (and through two locked doors).

Technically, the simple act of giving a patient one of his own cigarettes involved the use of four keys, as the staff nurse bunch was used to unlock the door to the room which contained the key cupboard, and then the key cupboard was opened to recover a further key which opened a cash tin back in the office where the valuable cigarettes were kept. This tin was of course carefully secured in a locked filing cabinet where a particular dainty skeleton type key (and safe cracker sensitivity) was used to wheedle the lock into life and finally reveal the prized fag packet – usually empty.

Needless to say, most of the nurses kept the residents' cigarettes on the desktop, hidden behind the computer.

Grimacing, I put the large bunch of keys in my pocket and felt them descend rapidly down my trouser leg and pin my foot to the rancid carpet. They had, I realised, already worn out these trouser pockets, so I picked the keys up and proceeded to carry them about like a Dartmoor jailer. The unit was really an *open* prison though, because not one of the two hundred and fifty-five keys would lock or unlock the main doors from the outside. It was a standing joke that V.I.P. visitors had frequently been left soaking in the rain because a witty patient had switched the bell off and then bolted the doors on the inside, while deluded patients could freely wander off into the local suburbs to deposit bricks through peoples' windows or urinate in their gardens. This occurred because we weren't physically able (or legally entitled) to lock them in and we didn't have enough staff to observe every patient continually.

"Buzzzzz." Went the doorbell.

"I've just come to check your unit for asbestos" said a blue-coloured man, flourishing his 6"x6" identity card vaguely in my direction and disappearing down the corridor like an express train.

"Okay" I said to silence.

Although the patients' shouts, wails and coughs seemed to be coming ever closer, I had one quick look at the paperwork to see what lay ahead of me. As most psychiatric nurses knew, the 'main' work was done in the office where endless reassessments, four-inch thick care plans, and wheel barrows full of Trust guidelines and protocols, all helped the practitioner stay away from his or her embarrassingly unchangeable patients. The office was effectively the unit 'computer' where virtual reality took over from the real world, and great strides forward were made in the abstract. Here, the staff could demonstrate immaculate records, action plans and lots of locked cupboards to the numerous auditors and inspectors of one form or another who constantly packed the place like robots at a cybernetics convention.

Curiously, very few methods of measuring *patient* progress had been developed by the Trust since the Community Care Act (1990), and those that had belatedly appeared were generally lost in the snowstorm of paperwork that covered our desks, leading to a dubious collation of results. People couldn't even agree on how to *define* community care success, never mind how to prove or disprove its achievement, so nurses continued to pursue the policy like blind-folded men looking for the way home. We all knew, of course, that clinical effectiveness was a poor relation to cost effectiveness, and that it was only if the government eventually perceived community care as too expensive, that it would then change.

The Politics of Madness

When community mental health care was first 'sold' to the public, it was packaged as a democratic, liberal, modern idea, which naturally suited a civilised, progressive society like our own. Dissenting voices at the time warned that governments usually favoured policies which supported their own interests, rather than anything else, and that 'community' mental health care policy would prove to be no exception. They also anticipated a backlash.

And they were right.

Discharging people into the community was in theory a lot cheaper than maintaining the old Victorian hospitals which, by the 1980's,

often needed major renovation works. Under the Community Care Act (1990) government agencies were intended to have a much lower (and cheaper) profile, leaving families, charities, neighbours and friends to play a more prominent part in helping the unwell person 'recover' in familiar, homely surroundings. *In reality, community mental health services have expanded into legions, and their harassed members are still running around like plate balancers at a circus, striving to keep the myth of social integration even half-alive.*

It was expected that 'self-reliant' service users would help to support themselves practically and financially, even to the extent of contributing to the inland revenue and providing a little bit of extra demand in the market place. They were pictured as happy, successful capitalist citizens, leaving behind the backward communal worlds they had previously inhabited, and the unwanted socialist ideas on which they were based. *In reality, the financial burden has simply passed straight across to Local Authorities and state welfare agencies, who distribute millions in aid to masses of largely dependent service users, living on open-ended benefits, demonstrating socialism at its worst.*

It was assumed that *individualized care* would prove to be the most effective therapeutic approach, because it emphasised the idea of self-improvement and dovetailed nicely with the individualism of modern society. This would stop policy-makers and clinicians wasting time on the fictitious social and cultural causes of mental disorder, such as inadequate socialization, gender/class/culture conflicts, secularity, materialism, alienation and community disintegration. Instead, there would be cohorts of beautifully rebuilt ex-patients coming off therapists' couches, achieving their challenging personal ambitions in a perfectly conducive social world. *In reality, the social fabric has rotted away to threads, many ex-patients can't cope with their individual isolation, there is more recorded mental disorder than ever before, and now even the policy-makers can sense it.*

There was certainly method in the government's madness.

But madness in the method.

I picked up an assortment of expensively headed Trust memoranda from my pigeonhole and read part of the first one:

"Improve Communications by not using Jargon"

Putting this rare gem of wisdom to one side for later scrutiny, I then moved on to the next memo:

"...A process pathway details the steps involved in the management of care. It should include those steps which add value to the patient's journey....A clinical pathway enjoins all the anticipated elements of care and treatment of all members of the multi-disciplinary and inter-agency teams. These are specific to a patient or client or person of a particular case type or grouping (see needs pathway) within an agreed timeframe, for the attainment of agreed outcomes. Any variation from the plan is documented as a variance, the analysis of which provides data for the evaluation of current practice..."

Stunned for a few moments by the fact that both these items originated from the same organisation, I then tore them both democratically in half, and deposited them neatly in the overflowing wastepaper basket, positioned conveniently close to the desk. Nearly all of my memo's, bulletins, updates and circulars ended up that way, apart from a few which were used for shopping lists at home. The Trust was devilishly clever, though, and made sure the paper was too thick for toilet use, otherwise I would have gladly recycled it. Some staff allowed their documents to accumulate in their pigeonholes for years, working on the principle that this would eventually prevent any further sedimentation occurring because the holes would be impregnably full.

Management countered this by providing the recalcitrant staff with an extra pigeonhole each.

One of the patient's shouts finally appeared on the threshold, and I looked up to see Hettie hovering in the doorway with both her hands writhing about in her underclothes, and yesterday's tea accurately recorded on the front of her blouse. Flinching, because I knew what the response

would be, I asked her if she wouldn't mind tidying herself up before she came down for breakfast.

"I don't want to!" she bellowed. "I want breakfast now!"

Using the 'cracked record' approach of repeating myself amiably but assertively, and pointing out the virtues of compromise and composure, I finally prevailed on her to return to her room for a wash and change of clothes. This allowed me to move through to the kitchen and make an initial inspection (i.e. make a cup of coffee).

"I'm going to discharge myself!" Hettie hurled over her shoulder.

Hettie

1974

Hettie smiled as she heard the splashing in the bath, and turned back towards her other 'babies'. There were 23 cats and 4 dogs in her tiny terraced chalkstone cottage, as well as an assortment of gerbils and rabbits in cages along the walls, and two noisy parrots flying about at will. The carpets had long since rotted away under the constant flow of uric acid, and they had now been replaced with shovel loads of sawdust, brought weekly from the local carpenter's workshop. She raked up the caked mass of urine, dung and vomit once a week, and bribed the dustbin men to take it away (against their better judgement) each Monday.

On Tuesday, she went shopping for 'lights' and other waste material from the butcher, continuously boiling this offal in a vast cauldron on her 1950's Belling cooker. The combined smell of stewed lungs and stinking floorboards was overpowering to everyone but Hettie, and in a moderate breeze the reek could be detected 200 yards away. The fumes were now entering the next-door neighbours' attics and condensing as a horrible sticky scum, so the Environmental Health Department and the Parish Council were attempting to take her to court. She ignored each summons when

it arrived, putting it alongside the other unopened buff envelopes behind the broken carriage clock, on the white splattered mantelpiece.

"Idiots!" she said.

But later that week a loud, persistent knock was heard on the front door, and when Hettie at last opened it, she saw a man from the Council and two police officers standing on the doorstep. She quickly slammed the door and addressed them through the letterbox, but when it became clear that they were going to force an entry if necessary, she wearily capitulated and let them in. They stood askance at the scene before them, and instinctively clutched their noses as the odour covered them like a mouldy blanket, and the cats circled their legs. Over the years, all Hettie's furniture had been burnt on the open fire, and now only a brass bedstead occupied the room, covered in grey sheets and sacking. In the back yard they found the skeleton of a donkey, and upstairs they discovered a half grown alligator in the bath.

Hettie refused to co-operate with anybody and instead took refuge in a series of bizarre delusions about the 'communist' authorities and her own 'royal' status, so she was taken into psychiatric care under the Mental Health Act. It later transpired that she had been jilted at the altar in 1959 by a philandering cobbler, and this had unhinged her rather delicate psyche in the direction of loyal animals, social insularity, and general misanthropy. Because she was intelligent, and living in a rural backwater, she had managed to avoid or ignore public opinion for many years, and would probably have continued to do so, if her old friends had not been replaced with commuting yuppies.

"Do you want decaffeinated?" I asked my nursing assistant.

"No, full strength please" he replied, adding after a pause "That'll be my turd."

"Pardon?"

"That'll be my third cup this morning" he corrected.

I said nothing, remembering the curious range of Freudian slips Sidney often produced during the working day. He was a real veteran of psychiatric nursing, with a career stretching back almost 40 years, and while most of his contemporaries had moved into different fields, escaped through promotion or retired early, he had somehow survived the worst experiences the asylum could offer, hanging on for full pension like an old bloodied bull dog on the burglar's arm. But his resilience had come at a price, and now the four decades of filth, horror and stress which packed his unconscious mind were slowly seeping out; tripping and stalling his intended speech with tragic-comic mischief. A bit like a half mad beast reaching through the bars of a cage to scratch its own keeper.

He looked a bit like Ziggy Stardust through a fisheye security peep-hole, stuck unapologetically in the 1970's, but with a cracking, dusty husk, somewhat reminiscent of the girl who aged horribly when she unwisely left the magical confines of Shangri-La.

"There you are" I said, handing him the hot cup.

"Wanks a lot" he replied cheerfully.

"Don't mention it" I said.

The kitchen itself brought back many happy memories, and for a short while I revisited the time when the unit had been a therapeutic community, with patients expected to make their own meals, clean the unit, challenge each others' excesses, and generally take collective responsibility for their own lives. In those days, 'patient rights' were even more important than bureaucratic controls, and the kitchen was always unlocked to allow patients free movement. But the principle had its drawbacks as demonstrated by one patient who would often refuse to leave the kitchen having once entered it, and another who would examine the contents of boiling pans with her bare hands. One man had a habit of evacuating small pieces of faeces with his fingers, and then entering the kitchen to stir the gravy without the aid of a spoon, while another was famous for urinating in the fish tank, and sometimes feeding the fish with sandwiches, tea bags, chips or (on his birthday) lager.

The kitchen in those days was overworked, grubby, and rather old-fashioned, so following a couple of unflattering inspections from the local council our senior managers authorised a lavish programme of

improvements. The place was entirely gutted and rebuilt, with stainless steel work surfaces, state of the art cookers, and a fantastic extractor system which looked like the conning tower of a submarine bolted onto the ceiling above the ovens. It was so powerful that the ceiling tiles visibly shook when it was turned on, and people under sixty kilograms in weight were banned from standing near it in case they were sucked into oblivion. Needless to say, the same managers who had agreed the expenditure then agreed that most of the patients were *incapable of making meals*, so that cooked food should be henceforth brought in from the main hospital kitchens. Now the place looked like a disused rocket range in Arizona, and when the stock items arrived (e.g. tea, coffee, sugar) they occupied about one tenth of the space available, disappearing into distant corners alongside the odd vintage tin of baked beans, and other isolated collectibles.

Sidney joined me in the kitchen and said:

"Have you heard of the six second rule yet?"

Suspecting more insane bureaucracy, I naively replied:

"No."

"Well, according to a bloke on telly last night, some cafés have a six second rule. If the waitresses drop food on the floor and it's down there for more than six seconds, they play safe and don't serve it."

"Under six seconds on the floor and it's okay then?" I enquired.

"That's it."

"If only we were that careful here" I said.

The kitchen radio then announced:

"Apparently, tents are to be erected in hospital car parks for patients waiting to be treated. In the latest symptom of the N.H.S. budgeting problems, patients will be housed in special inflatable shelters until space is found in Accident and Emergency."

Looking at each other without comment, we finished our coffee and made our way upstairs to 'assist patients with their hygiene needs'; a delightful euphemism for activities such as bum wiping, bed-changing, shaving, bathing, dressing, laundering and sweating a lot. Although technically a community 'rehabilitation' establishment, the unit was in fact a continuing care ward mainly populated by people who had been in-patients for an average of around twenty years. The rehabilitation tag was really a product of wishful community care packaging, which had

occurred when most of the patients were transferred from the closing regional asylum, and it was based on the 'principle' that patients could be de-institutionalised at the rate of two years rehabilitation for every year of previous institutional living. Given that the average age of patients was about 50, and they had been institutionalised for 20 years, this meant that they were expected to be fully functioning members of society by the age of 90. It was not an auspicious start to our project, and the reality was one of continuing supportive care for people who either couldn't or wouldn't change their way of life. Consequently, many of the patients were still incapable of meeting their hygiene needs independently, and the nurses were still very much in a job.

To imagine the refreshing, systematic washing routines that most people follow in the morning, or even to picture the chaotic but enjoyable bath time exploits of children, is to seriously underestimate the personal hygiene problems of these long stay psychiatric patients. Many of them were extremely resistant to bathing and getting changed because they were confused, suspicious, lethargic, or otherwise irrational about the process, and this meant that days or even weeks could pass before the patient could be coaxed or cajoled into accepting the nurses' help. Given also that many of them were frequently incontinent of faeces, urine or both, and that some were unpredictably violent, the delivery of hygiene cares could be much nearer hell on earth, than singing in the bath at home. We were frequently castigated for allowing the residents to become dishevelled and (at the same time) frequently warned about exerting pressure on them to become less dishevelled (as this breached patient rights).

The Bathroom

The main bathroom at the unit was an aircraft hanger of a place made from a pair of large bedrooms knocked together. It was of Romanesque proportions, with the toilet, washbasin and specialist lifting equipment dotted around distant walls, and a huge bath occupying centre stage. 'The hoist' (as we called the lifting equipment) was occasionally wheeled out to swing the larger residents around the room like Peter Pan at the theatre, but this

was generally for the benefit of staff members who wanted to demonstrate their skills to students, or for histrionic patients who had decided against walking.

The toilet was the purest form of grotesquery the unit had to offer.

The bowl would often contain two different evacuations of faeces, together with a garish soup of fetid yellow urine and phlegm. Sometimes blood from piles and periods would be added to the melange and - if we were really lucky - there might be an entire toilet roll floating gaily on top. However, it was much more likely that the toilet paper wouldn't be used at all, while the toilet *handle* probably remained the cleanest thing in the entire unit. It was rarely touched.

Interestingly, a combination of warm water and unusual exercise would frequently stimulate a sluggish bowel into belated action, so the bath itself would also double as a toilet. For that reason, a residual brown sludge traditionally occupied the bottom of the tub; mysteriously reforming after every rinsing attempt.

The contents of the U-bend were best left unimagined.

On opening the fire door to the landing, we were immediately overpowered by the silage-like stench of fresh, loose faeces, so we donned our imaginary gas masks and began our search for the source. We soon noticed a trail of orange-brown smears on the lino leading to a bathroom, and in the bath we discovered a large amount of bedding, covered liberally in excrement, blocking the plughole. The taps had helpfully been turned on, the floor had an inch of water on it, and we were just in time to see a large turd coming over the side of the bath, heading in our direction. The room from which the bedding had been taken was of course heavily soiled, as was the laughing, naked lady responsible for the incident, but most memorable of all was the full set of brown handprints which she had carefully placed around the walls - like a nursery frieze.

"Would you mind cleaning the walls, Sid?" I said.

"Have a fart, boss" he replied.

"Pardon?"

"Have a heart" he repeated.

"I do sympathise, old mate, believe me I do. But that's the big problem with psychiatric nursing."

"What?"

"It's the ultimate bum deal."

Apart from this, the morning shift was actually running quite smoothly, and on our return to the office I was able to reflect that dementia wards had it even harder. In my student days, seven consecutive night duties of eleven hours each were normal practice, and I can well remember the feeling I had at 6.00 a.m. (after nine and half hours duty) when I had to help get eighteen demented patients up and give them breakfast. Most of the dementia patients were elderly, doubly incontinent, confused, disorientated, restless and fearful, while some found it impossible to sleep and others were agitated and physically aggressive. I can recall the unworldly wailing, endless toileting, daily falls, tears and heart ache, dreadful smells as the urine rotted the floorboards under the fermenting lino, angry relatives, sutures and vomit, and of course the hopelessness of it all. It was an absolute nightmare, a living Hieronymous Bosch painting; the backside of life which everyone thinks will never happen to them.

But very well might.

The cessation of torture makes imprisonment temporarily very welcome, so I thanked my lucky stars I wasn't on the dementia ward, and looked up at the reappearance of Hettie with an ecstatic grin on my face. She now had a different dirty dress on, and a face coated in thick orange makeup.

"You look a lot smarter, Hettie."

"I need tea now!" she replied.

"Follow me then" I said.

"I'm going to discharge myself!"

Leading her through to the kitchen, I then watched her prepare a breakfast of tea, corn flakes and toast. She loved her food, and even though she added only a dash of water to three tea bags and dropped half the corn flakes on the floor as she left, I did not intercede because I knew from long experience that she did things that way out of agreeable habit, not error. Other patients were now appearing downstairs, and we

gradually worked through the idiosyncratic diets, vast appetites, delicate moods, and frequent mishaps that this process invariably involved.

"My radio won't work" moaned a middle-aged lady.

"Are you sure you've switched it on properly, Maddie?" I replied, also more out of agreeable habit, than hope.

"My radio won't work" she repeated.

"Okay, let's go and have a look."

Madeleine

1950

Maddie looked across the dinner table at her husband and focused her longstanding hatred into a laser beam (forgive anachronism) of pure loathing, aimed right between his staring eyes. He was an endless source of work and worry to her, and yet he could defeat her in argument with effortless ease, chilling sarcasm, and undeviating contempt. They were mismatched at the start, driven into a hasty marriage by animal lust and an unloved child, while Maddie soon found that her winsome ways had only limited appeal to a husband who was easily bored and intellectually demanding. Little issues became constant problems, and constant problems led to mutual disdain. Love would have been lost, if it had ever been found.

Then one day many years later her husband lost his eyesight in a chemical explosion at the laboratory where he worked, and Maddie found that she had to nurse a person she detested. Her life slowly trickled away down the sink of drudgery, as the frustrated man berated and reviled the woman who could never restore him. Their conflicts steadily intensified, and when one day he lashed out in anger, she instinctively slapped him in return. She was racked by guilt, but relieved by the act, and as the blood dripped from her swollen nose, a new idea began to form. She would fight back against this tyrant in her life. She would relegate the pointless misgivings, morals and civilities.....She would leave the way clear for *revenge*.

Her personality tilted, and over the next three years she consistently tortured the man who used to share her bed - adding shards of glass and a variety of foreign bodies to his food, leaving doors closed so that he would walk into them and placing red hot cups with the handles facing away. She put chairs in the middle of rooms, changed the furniture around constantly, disconnected the 'phone, and opened his letters. She remained silent for weeks, or she made herself hoarse by shouting into his face.

Eventually the unloved son returned from abroad, discovered some of the tricks and abuses, informed the authorities who eventually intervened, and freed the prisoner. Maddie was admitted to a psychiatric ward, as her fragile mind defensively collapsed, and she was propelled into a melodrama of hysteria and self-neglect. She crawled along the corridors, lay on the floors for long periods, moaned and groaned, talked of suicide and wrote articulate malicious letters to her family. The marriage was dissolved, her son corresponded dutifully but occasionally, her ex-husband took up ballroom dancing, and she settled into an open-ended institutional life.

She looked a bit like the old lady in the Bates' motel.

Her cassette-radio-CD player was plugged into the mains correctly, but one of the switches had been moved to the 'cassette' position instead of 'radio'. As there was no tape in the cassette player and the switch was on the wrong position for the radio, there was no music issuing from the speakers, and the machine was termed "broken".

"Can I have a new radio please?" said Maddie.

"There's nothing wrong with this one" I said. "It just needs adjusting."

"I'd like a new radio please. *A new one!*"

Unfortunately, this was one of the many examples of modern culture completely undermining modern mental health policy. It was hard enough for the average person to keep up with the ever-changing catalogue of

CD players, DVD's, mini-disc players, and I-pods etc., but for many people with mental health problems, it was simply asking the impossible. They were invariably bamboozled by the instructions which accompanied these 'must have' gadgets, and in many cases could not master the basic controls even after scores of demonstrations and reminders. After a while, they would become understandably frustrated and appear in the office with fists full of cassette tape, jammed CD player drawers, crushed earphones and ferocious tempers, or they would give up the struggle entirely and use the staff as butlers every time they needed the machine turning on. Money, of course, was no object and it became an almost weekly occurrence for staff to replace terminally damaged equipment with the latest (and even more incomprehensible) hi-tech equivalents at high street shops.

It would have made more sense for us to simplify the situation as far as possible, rather than complicate it, so that residents had a realistic chance of retaining their skills. Instead, those residents who had spent years typing on mechanical typewriters were suddenly given portable word-processors, which quickly baffled them and spent their lives being thrown into distant corners during fits of pique. The sensible solution, according to one enlightened key worker, was to upgrade the portable word processors, to laptops. "The package would be much more consumer friendly" he informed us in a voice synthesizer monotone. Like hell it would. "Bzzzzz" went the doorbell.

"Right, your radio's working now Maddie. I'll have to answer the door."
(silence)

"I've just come to check for silver fish in the kitchen" said a red-coloured man pushing his identity card up my nose, before disappearing into a kitchen cupboard.

"Okay" I said to his retreating rump.

Another resident had to be prompted about his personal hygiene, leading to the loud protest that he'd already spent half an hour in the bathroom and he certainly wasn't going again. We pointed out that he had been seen the previous morning sitting on a chair in the bathroom, splashing the water about loudly with his left hand, while his other hand attended to more libidinous needs.

It was a fair cop, and off he went.

Sacrilegious as it may sound, these patients were often incredibly skilled

at dodging personal responsibility, even to the extent of putting more energy into the avoidance of the task, than its completion. Indeed, avoidance was really a longstanding attitude, rather than a skill, which had developed over many years of what the consultants called 'inadequate personality'. Biographically, most of them were disinterested at school, withdrawn at home, intermittently employed at best, and over-reliant on parents, relatives or partners. They were generally self-centred, easily stressed, often melodramatic in relation to their needs, and characterised by a 'learned helplessness' which ultimately led them into professional care situations. As one old timer put it, this was 'his job'; a psychiatric career which had spiralled from vague anxieties and depressions about life's challenges, to a full-on evasion of society through the psychiatric system. In many ways, it was the forerunner and quintessence of the modern 'soft touch' state, where benefit fraud and manipulation, lawsuits and compensation, voluntary unemployment, and spurious sickness and disablement have now become commonplace abuses. Certainly, the work ethic in our unit was completely non-existent, leaving 'welfarism' triumphant. The radio seemed to hear me, and announced:

"People are writing their own sick notes as overtaxed GPs struggle to deal with the number of workers taking time off. Doctors have taken to leaving piles of pre-signed notes in surgery receptions for people to pick up without a consultation.... They say the measures are needed to deal with an epidemic of 'malingerers' who are filling up surgeries with their requests for sick time.This is further evidence that the U.K. is becoming a haven for work-shy layabouts."

"I need a cigarette now" said Hettie.

"Bzzzzz.....bzzzzzzz."

"Just a minute Hettie."

"Bzzzz.....bzzzzzzz"

"A cigarette now. *Now, now now!*"

"*Rehab!*" I shouted into the telephone.

"Hi Steve, it's Kate. Just to say we're meeting at the 'Rose and Clown' on Saturday, if you can make it."

"Oh, Kate....Yes, that's fine. The 'Rose and Clown' is the one next to the Chinese takeaway isn't it?"

"That's the one."

"Great."

"Did you enjoy yourself last week?"

"Yes, I did. It was very...er...interesting."

"You don't sound very convinced."

"Oh...it's just my obscure and asocial nature – don't worry about it. I had a great time, honest."

"I don't really know how to take you, Steve."

"You'd better rephrase that Kate."

"*Devil!*"

"Just joking...of course."

"You sounded a bit wound up, when you answered the 'phone."

"Yes...er...sorry about that. But you know what it's like here."

"I do. Tell me about it on Saturday."

"I will indeed.... but I'd better get back to the treadmill. Thanks for the invitation."

"Bye, Steve."

"Bye."

It was now uncannily quiet in the office, but of course that was because I'd ambidextrously handed Hettie her cigarette during the telephone conversation. I could see her clearly through the window, depositing lighted matches in the litterbin outside.

"*I'm going to discharge myself!*" she shouted to an unidentified resident asleep in the back of the unit vehicle.

Flinching at the recollection of my *faux pas* with Kate, but once again invigorated by the promise of Saturday, I moved through to the dining room with my anti-septic spray, dishcloth and fork to clear up the mess. The fork was a personal innovation, which I used to scrape off the thick residues of dried-out corn flakes which invariably glued themselves to the table edges. All in all, it had been a fairly relaxed breakfast of only two broken plates, one spillage, two lost tempers and one puddle of frothy urine, so I allowed myself the privilege of standing at the front door for a few minutes rejuvenation. The air was clear as crystal and I drew it into my lungs with an epicurean relish, while for a few moments my slightly sweating body stood wonderfully impervious to the frost and whirling sleet. I took in the rather gloomy panorama of quiet icy streets with distant Lowry figures, perpendicular church spires and ominous jet clouds, before reluctantly turning around; thus missing the two scruffy white vans which were just entering the main gates.

"I need a cigarette now" said a voice in my ear.

"Follow me then" I said.

But when I looked nobody was there.

Tick tock went the clock.

Llewelyn 1976

Llewelyn spent the summer of 1976 working in a rock club as a cloakroom attendant, occasionally nipping out of his den to watch the 'Sex Pistols', the 'Stranglers', 'Sham 69', and other new wave iconoclasts. He drank six pints of snakebite each evening and watched a kaleidoscope of irreplaceable educational images float through his pickled brain. These included a happy-go-lucky Scotsman who tried to proposition a succession of "chicks" without realising he had a large pendulous bogie hanging out of his nose, and two androgynous women who fell over a first floor banister still fighting tooth and nail as they landed on the pay desk fifteen feet below. The club closed at 2.00 a.m. and then the staff really started to party, playing old 'Jethro Tull', 'Wishbone Ash' and 'Boston' records until daybreak, and still finding time for a joint on the way home.

It was sensible on one level though, because he needed the money to 'bankroll' himself through his local F.E. college where he was soon due to start an 'A' level course. In the meantime, he sat around his favourite bar at lunchtime with a half of lager in one hand and 'Making Philosophy Simple' in the other, listening to Bob Dylan on the sympathetic jukebox and feeling like a Parisian art student at the turn of the century. Llewelyn was idealising the future to an absurd extent, but he felt delightfully liberated that office drudgery was now behind him, and academic 'enlightenment' just in front.

He began college with a tiered hair cut, patchwork flares and white platform shoes, but this didn't prevent him from enjoying life too much, and he soon found some other mature students (he was 23) who were willing to overlook his manifest imperfections. They drank in the Theatre Bar and saw ex-soap stars in rep, spent evenings in a Jazz club and discussed heavy subjects with superficial ease. By 1978, Llewelyn's exams were going well and university life lay just around the corner.

As a gifted fashion victim, he thought he'd start his undergraduate career with a perm, and for about six months everybody thought the curls were admirably natural, but he was instinctively gravitating towards hippy culture and in 1979 his beard, John Lennon glasses and long black trench coat were soon joined by belt-mounted leather tobacco pouch and *de rigueur* shoulder-length mop. His musical tastes became 'The Enid' and

'Renaissance', plus good old heavy metal, and he really couldn't have been much happier – or so he thought. He swapped the dissected pigeon brains and conditioned rats of psychology, for the philosophy and dissidence of sociology, and was immediately swept up into a vortex of big ideas, historical analysis and demystification. Mrs. Thatcher came to power in 1979, and Llewelyn moved swiftly in the opposite direction - on his brand new Marxist hobbyhorse.

"So you're transferring to Sociology, Llewelyn?" said one of the psychology lecturers with a twinkle in his eye. " And I thought you were an intelligent lad."

"Ah, but you psychologists can't agree on what intelligence *actually is*" Llewelyn said "so I'm not too worried."

"Perhaps you should be" he replied.

He was right in a way, because scientists have subsequently demonstrated that intelligent life doesn't exist *anywhere* in the solar system, and that's a tough one to swallow.

Isn't it?

The Mad Scientists

Llewelyn found that he had a great affinity with existential and psychoanalytical work, allowing it to expand his hungry mind like spinach blowing up Popeye's biceps. He read Jean-Paul Sartre, Ronald Laing, and Erich Fromm voraciously, applying old ideas in new contexts, finding 'solutions' to classical problems, and reinvigorating his own life with fresh revelatory principles. He discovered his forte, met like-minded people and anticipated a glittering academic career. He felt as though he was finally, truly, understanding the world around him.

But that was a self-delusion. The world is never still enough to be known.

It was a few years later when he recognised the gulf between theoretical knowledge and *practical* experience, but even while he was still at college he began to realise the self-contradictory nature

of academia itself. Every philosophy, theory, argument and empirical study had a complete opposite somewhere, if only the student committed sufficient effort to find it, or sufficient time to wait for it. It was only possible to keep the illusion of truth or progress alive on the basis of *incomplete* knowledge, because as soon as wider information became available it invariably neutralised or confused the earlier findings. In his own field, he had carefully read contemporary orthodox work, revisited older classical perspectives, identified the latest *avant-garde* papers, made cross-cultural comparisons, and reconsidered the subject through alternative disciplines. The views expressed and findings reported were so perfectly contradictory that, taken together, they effectively added up to one big fat zero.

It was just another form of madness. Everyone talked a lot, but 'knew' nothing.

Even so, the artificial segregation of university departments ensured that academics could spend their entire working lives protected from the contamination of alternative views and antagonistic disciplines elsewhere, but this was no comfort to Llewelyn. He eventually discovered that the endless replacement of one paradigm by another **was** the truth, and that slippery post-modernists could now join hands with the ancient mystics to celebrate the ungraspable mysteries of our human condition.

Great.

Of course, powerful groups could cherry-pick the most amenable academic theories and findings to serve their own political purposes; conveniently forgetting the rest. Social reality was no more than dominant values and interests, cleverly packaged as progress.

What really mattered was influence, not knowledge.

As the rest of his life was to confirm.

So, Llewelyn gaily danced on quicksand, blissfully unaware that the only really enduring memories he would retain were those of the equally odd and self-deluded people around him. He would always remember the

extremely vain chap who wouldn't go out in the rain in case he got his hair wet ("I have a steel plate in my head you know"), and the female foreign language tutor who would often walk around in black tights and no skirt or dress ("a continental custom you know"). An Austrian friend once baffled Llewelyn by approaching a delectable young women, saying: "You come fuck off. Yes?"

He was successful, but Llewelyn later realised that his friend actually meant: "You come for coffee. Yes?"

He was obviously a natural.

For a while Llewelyn had an excellent social life, drinking every lunchtime, partying every night, and still somehow managed to keep up with his work. His tutors were typical 1970's sociologists - a wonderful lesbian pipe-smoking lady complete with dog, a previously persecuted Jewish émigré, an intense shaven-headed anarchist, and a larger than life celebrity professor who often appeared on T.V. shows and had once auditioned for the part of Dr. Who. The corridors also often bustled with well-known ex-criminals in muscle-filled string vests, who had completed their degrees and were now on lecture tours.

He spent some vacations alone on campus, while his college friends went back to their families, but this was generally a positive experience which allowed him to experiment with a second adolescence. He made vegetarian stews with marmite and soya beans (initially failing to soak them overnight and giving himself a mild stomach bleed) and he tried various forms of wacky meditation techniques which simply made him lethargic. He invited across rock club friends from his hometown, and graduated from wholesome joints and 'scrumpy' to the more esoteric delights of magic mushrooms and lysergic acid. These experiences provided a perfect complement to the abstract theories he was then dabbling with, and for a short time Llewelyn walked on air.

The Mad Hatter's Tea Party

When Llewelyn went upstairs they were already adding the morning harvest to a Waldorf salad. There were quite a few dubious specimens with blue tinges and strange shapes, but the majority

had that familiar phallic profile, so he ate his and waited for take off.

After twenty minutes or so, the tingling started and everything seemed funny. His mates began to smell a lot and a twist of fear ran around the group, as they reassured themselves with grins and sniggers. Somebody began picking their nose and the disturbed nostril swelled like a crater, while others swung their cigarettes around to leave bright orange arcs hanging in the air. There was some broken wind from the salad, and it fell on them like giant fly spit.

They were painfully inarticulate, then silent, experiencing periodic waves of euphoria and nausea, as the outside world shrank to a vague penumbra, and the room drifted like a raft in the beyond. Pink Floyd played, and they rode the rhythms of breath and heartbeat, while the wallpaper illusions shimmered and changed. Distinctions between object and subject began to blur, and they felt the thrill of disembodiment, loosing the feeling in arms and legs, swimming in the air, entering the music, leaving egos behind. Fragmenting.

But all too soon their minds sprung back into place, alcohol and joints were passed around, conversation returned, and they stepped back from the edge; personalities restored to what they weren't.

They looked through the window and saw the zebra crossing, rising to the centre of the road in a perfect half circle; like a hill.

The dangers of psychosis and 'flashbacks' didn't perturb Llewelyn, and for two or three years he freewheeled between college and his hometown, occasionally hitch-hiking with friends to Stonehenge, Glastonbury and lesser known festivals. He loved the perceptual changes offered by psychedelic drugs, the enhanced consciousness, the stomach-splitting hilarity and even the paranoia of a 'bad trip', but he was smoking and drinking heavily, minimising his studies, feeling infallible, and pushing his luck way too far. At this time, he met his wife-to-be, read about the Brixton Riots, stumbled

across the line with a 2.1 degree, and started getting headaches, tremors and neuralgia.

All too soon, he was to discover that his formula for success was fatally flawed, his knowledge of the world was laughably inadequate, and his ambitious plans were destined for radical modification. Through his inebriate daze he played the Led Zeppelin 'runes' album at 45 r.p.m instead of 33 r.p.m., and didn't even notice the difference until the record finished. The pendulum was about to swing back again, and he was on it.

Travelling narrows the mind.

Tick tock.

The Unit 2005

"Good morning Steven" said the unit manager.

"Oh, good morning Richard. I wasn't expecting to see you on your day off."

"Yes, I've been here since 5.00 a.m. actually."

"Well done, sir. " I applauded "Will you be attending the staff meeting?"

"Staff meeting?" he laughed "Good Lord no, I'm far to busy with practical common sense matters to spend my life chattering."

"Of course sir. I'll cancel it immediately and get on with this morning's discharges."

"Good man."

"By the way, we have three residents beginning part-time work with Parks and Gardens this morning, and one going to the Town Hall for office experience."

"Splendid."

"There have been no staff on long-term sick leave for twelve months."

"Brilliant."

"The new anti-psychopathic medication is working impeccably."

"Superb."

"We now have copies of the new mental health white paper 'Society Needs Care Too – Towards a Balance of Patient Rights and Patient Responsibilities'."

"Fantastic."

"The Prime Minister has this morning announced strong new measures to combat what he called the 'the parasitical, sick society of our times.'"

"Fabulous."

"He says the time has come to think as much about our community as ourselves."

"Unbelievable."

(pause)

"And while I have the opportunity, may I congratulate on your recent promotion, sir?"

"Promotion?"

"You appear to be dressed as an Archbishop today."

Oh....I see.... actually it's because I'm joining the *vigil for humankind*

recommended by the Aging Rockers' Special Executive (ARSE). Why not join us on our remarkable journey, Steven?"

"Absolutely, sir. Nothing on God's earth would prevent me from...."

"Bzzzzzzzzzzzzzz!" "Bzzzzzzzzzzzzzzzzzzzz"

"Oi!" shouted Sidney. "Stop day dreaming, there's somebody at the door."

"Sorry" I spluttered, making my way towards the sound of hammering Viking fists and splintering woodwork, wondering why they were so keen to get in this bloody place.

It was the most obvious sign of genuine madness on the unit that some people actually **wanted** to be here.

The period between 7.00a.m. and 8.30a.m. was always something of a false dawn at the unit; a preamble before the main story. By 8.30a.m, most of patients were up and any additional staff, such as the cleaners, housekeeper, manager, and extra nursing assistant were beginning to arrive. The administrators and medical staff around the hospital would also be starting work, and the 'phone would be springing into life. Visitors and deliverymen, porters and engineers, managers from elsewhere and people who'd lost their way, would all descend on the unit as though something important was happening (like they were expecting ARSE to give a talk or something). A growing cacophony of noise would echo up and down the corridors, sending the quieter patients fleeing into far off corners, while the more theatrical moved forward to button-hole members of their expanded audience with tales of woe, multiple requests, scenes of paranoia and exhibitionist acts. Voices were raised as each side attempted to master the other, orders were barked and complaints shrieked, while nursing assistants adopted their 'lion tamer' postures and patients gathered together in disturbing anthropological groups. I now opened the bulging door.

"Hi" said a yellow-coloured man. "I've just come to unblock your toilets."

"Oh" said I. "I didn't know you were coming."

"We're here on unblocking duty once a day now, plus emergencies."

"Fine" I said, admiring the man's industrial size plunger and wondering if it was any good for chronic constipation.

I think most nurses knew that a 'safe, stable environment' was the first

principle of psychiatric care, but it was amazing how easily principles disappeared when emotions and habits shouldered in. It was sometimes said that too many staff were far worse than too few, and our unit regularly illustrated the point. When staff were stretched to breaking point, they would at least make sure the patients' basic needs were met, but when superfluous crowds appeared, all sorts of distractions occurred - predominantly gossip, endless meetings, repeated updates and increased levels of patient agitation. This would almost invariably lead to a lower quality of practical care delivery.

Today, however, was *extra* special because the workmen were coming. The two scruffy white vans (which I had just missed arriving in the car park) contained carpenters and builders who were today starting the latest programme of refurbishment. The unit had a rolling maintenance and improvement plan similar to that of the Forth Bridge, where nothing was ever completed and there was always plenty left to do. The drains, guttering, roof, windows, wiring, central heating system, and plumbing were in a constant state of repair, and never seemed to improve. This was partly because the fabric of the building was old, partly because the patients were incredibly destructive, and partly because the managers responded to every care crisis by launching high profile environmental changes, instead of anything more direct and effective.

The Smoking Room

For many years the smoking room could be immediately identified by its fire door, which was invariably wedged open with a soup spoon, or flattened against the wall by a convenient armchair. Now, a splendid extractor fan had been installed to provide ventilation and the fire door was generally shut, but because people forgot to turn the fan *on*, the room was almost always fog-bound on entry. Sometimes residents could only be identified by the whites of their eyes.

After fifteen years of replacing burnt carpets, management had decided to tile the area and it now resembled a rather cold changing

room at the public swimming baths. The chairs were scorched leatherette, with parallel brown lines running down the arms like notches on an outlaw's cudgel. Cigarette ash covered the floors in drifts of grey snow, the walls were stained a bright nicotine-yellow, and the aluminium ashtrays remained pristine and empty. There was always a collection of seven or eight scummy half-empty cups on the floor - the arcane mysteries of washing-up continuing to baffle most residents.

This was the haunt of hard men, where solitary self-poisoning was occasionally augmented with sanguinary violence, as tab ends were rifled from buckled bins, and pecking orders ferociously restored. One window was nearly always boarded up, adding to the charm.

Just as a single, hard pea could always be found somewhere on the dining room floor, the smoking room would always yield a shard of broken glass to the assiduous cleaner, looking in a corner.

Whenever the drains were disturbed by heavy rain, the wonderful scents of hydrogen sulphide and methane wafted lazily in through the windows, while the central heating would invariably provide staff with heat stroke in the summer and hypothermia in the winter. The leaking roof was guaranteed to set off the smoke alarms at the dead of night, and loose slates blew around like gigantic razor blades whenever the north wind howled. The patients regularly broke windows, pictures and toilet bowls, ripped bathroom fittings off the walls, kicked holes in plasterwork, and stubbed cigarettes out on the carpets as a matter of course. They also went through two specially treated lounge suites a year because the fabric was eaten away by urine; polluting the whole room like a child's stink bomb. The bills were horrendous I'm sure, but we could only guess at them while the managers sat in Nirvana and poured taxpayers' money into the bottomless pit. I'm afraid our Trust administrators were much too interested in drinking the coffee machine dry while they moved paper around in monthly circles and proved conclusively how useless business degrees were in health care. When the inevitable crises occurred (usually in the form of cataclysmic reports from independent official visitors) they then always reached

instinctively for the taxpayers' chequebook with a view to immediate impressive building works. As amused spectators, we would watch the vases of exotic flowers, pot plants, prints of local scenes, and six canisters of air freshener predictably appear on the unit before official visits, and the new curtains, chairs, carpets and wallpaper appear with equal predictability afterwards. *The net result was a clinical area frequently turned into a building site, and another shed load of money vaporising in the public service sector 'black hole'.* Today was one of those days.

"I need tea now" demanded someone behind the workmen.

"Have you ever made a list of all those things you want to do before you die?" asked Sidney.

"No, not really. Have you?"

"I spend most of my spare time doing it actually."

"Oh."

"I'd like to swim with dolphins of course."

"Of course."

"And to go to Hollywood."

"Naturally."

"And to have an intimate dinner party with some witty TV celebrities."

"Yes?"

"Well....that's as far as I've got, Steve."

"That's it?"

"Er....yes. I think so."

"You may as well die now then, Sid."

"*Ha ha ha ha!*" we laughed.

Thoughtfully.

* * *

Within a short time, the workmen had roped off the main staircase so they could make the banisters higher, closed the smokers' lounge for redecoration, and locked up the male toilet for 'extension work'. Half an hour later, one patient had hit another because he couldn't get into his usual smoking area, one confused lady had become entangled in the ropes barring the staircase as she attempted to walk upstairs by the only route she could remember, and one man had used the carpenter's tool bag as a lavatory because he couldn't get into his usual toilet. This patient

then underlined his point of view by going outside and bombarding the two scruffy white vans with flowerpots. Luckily, there were so many dents in the vans already that no litigation was likely, and the builders tolerantly shrugged it off. They were destined to get used to this reception anyway, and no doubt they were receiving double pay for the job. All the radios were turned up to combat the ambient row, and I could just make out someone saying:

“The body of a women who hanged herself in a Paris art gallery was mistaken for a modern sculpture for a two days.”

Just before they took the drugs cupboard off the wall, I administered the patients’ medication and reflected on one of the many circular changes that characterised psychiatric nursing. Drug therapy was largely unsuccessful for most types of serious mental disorder until the 1950’s, when the introduction of Chlorpromazine and other anti-psychotic drugs then helped to control the symptoms of schizophrenia. Although this innovation helped the movement towards ‘care in the community’ because patients no longer needed to be in custodial settings, the new freedom of community care then led to problems with medication monitoring and *non-compliance*, with associated relapses.

A zero is a circle and a circle is a zero.

The Types of Madness

Traditionally, mental health problems have been divided into ‘psychoses’ and ‘neuroses’, plus a more arguable category for ‘personality disorders’. The psychoses are serious mental disorders where the person loses touch with reality for at least part of the time (e.g. schizophrenia and manic-depressive psychosis). Neuroses are less serious disorders where the person stays in contact with reality, but with unusual difficulty (e.g. phobias and obsessions). In practice, people often present with combinations of psychotic and neurotic characteristics, leaving the ‘classic’ typology as more of a framework than a blueprint.

So, when a conscious person sees things, or hears voices, which nobody else in the room can, this behaviour departs from reality (psychosis) and when a person won't enter the room because there's a cat or a spider in it, this stretches normality to an unusual degree (neurosis).

But what about the 'normality' itself?

Is it really a firm set of physiological processes, or psychological rules, which 'mad' individuals simply deviate from?

Perhaps.

It is also a diverse collection of social beliefs and values which change totally through history. Here, madness can lie as much in the *making* of norms, as in the breaking of them.

Just look around, and see.

"Buzzzzz" went the doorbell.

"I've just come to fix your filing cabinets, mate" said a red-coloured man.

"An emergency then?" I quipped.

"Vacant" he looked.

"My radio's broken" interceded Maddie.

The volume had been turned down to 0.

The medication round was reasonably uneventful, with only one stentorian refusal, five clumsily dropped tablets, two tablets spontaneously dissolved in a poorly dried medicine pot, one lady who specialised in 'slow motion' tablet taking (ten minutes), and a temporarily missing person. Drilling and hammering continued to reverberate around the unit, and I began to wonder whether the doctor would prescribe a painkiller for *me*, but instead Richard arrived and said:

"Everything going to plan, eh?"

"Yes", I replied "but it's the plan which seems to be the problem."

"Don't worry, we'll get our reward in heaven"

"I won't wait here for it then, Richard."

"The patients always come up trumps, anyway."

"Trumps are usually only the start."

"Most droll" he said.

"Yes, Steven's a real shit" said Sidney.

"Pardon?" we said.

"A real wit" he repeated.

"And don't forget" Richard cautioned "Dr. S—— is doing a *presentation* tomorrow."

"A *presentation!*" we gasped.

"Yes, 'The effects of low dose neurocyclotetrashite on delusions of grandeur: a self-report'."

"Right, boss."

(pause)

"That's a nice pen, Richard" I said, looking at his 1960's gold-plated Parker.

"Ah.....yes....." he sighed. "It's actually a seventeenth century family heirloom, recently valued by a leading auction house at around £10,000. But I wouldn't part with it for the world, of course."

"You're keeping it for posterior (posterity), then?" said Sid (the old jokes being the best).

"Well..... certainly it's proven useful in the past for those little spasms of intimate itching that occasionally occur, but I.....er....I must get on now."

Richard was a cubist painting on legs, dark-suited in all weathers, slicked back and moustachioed. Unlike his fellow male managers, who advertised their wild individual personalities with a coloured tie each, he preferred to cultivate a full set of John Bull mutton chops, leading to his affectionate nick name – merkens. He was quite personable off duty, but a notorious pigeon-brained bureaucrat on the unit, bobbing and weaving his way through the working day like an old sparring partner on autopilot, but never quite nimble enough to dodge the fatal uppercut. To everyone's ill-concealed amusement, his habitual failsafe expression was always "don't worry, I've got it in hand."

It was an obvious Freudian confession.

I mentioned that the drains were still offensive to the nostrils, and he reminded me for the third or fourth time that the drains were far worse at his last unit. The system there had old, small bore pipes which were never intended to handle hospital waste, so the decision was made to pressurise the system with a pump. This was cheaper than laying new pipes, and should have propelled waste material through to the main sewer more efficiently. Instead, the pipes could not take the pressure and waste matter from one toilet area 'backfired' through adjacent pipes – blowing

toilet seats off their hinges and pebble-dashing the inside of the entire block.

Richard then advised me that he had a lot of work to do in the other office upstairs, with 'personal development plans', 'investors in people' ideas, 'improving working lives' policies, and 'democracy in the workplace' initiatives; so he would leave me to it, if that was all right. I smiled as he left, not so much because of the perfect irony involved, but because I knew his office doorway was currently blocked with pin boards and chairs. He actually made short work of shifting the obstruction, but then discovered that he'd cut his finger badly on a rogue screw. Returning to the downstairs office in a foul mood, he hollered:

"Where's that bloody health and safety report book? I've cut my bloody finger!" and *"Get me a plaster from the clinical room, will you?"*

I pointed to a box on top of a dusty shelf, and went off to the clinical room as requested. We had oxygen cylinders, portable defibrillator, four stethoscopes, and about two hundred incontinence pads, yet no sticking plasters. I took some cotton wool back to him, and discovered that he'd cut another finger on a staple sticking out of the health and safety book box. The air was blue, so I set off down the corridor to make sure all the patients had been offered the toilet after breakfast, freezing in mid stride when an air raid warning siren appeared to explode in my left eardrum. Retreating quickly to kitchen, I remembered that it was the fire alarm test morning, and that for fifteen minutes the alarm would be turned on and off by serious looking, blue-coated hospital engineers with red clip boards who were apparently unconcerned that the main display board had clearly shown 'fault' for six or seven weeks. They were also oblivious to the fact that some patients climbed the walls while this performance was going on, and that by the time they'd finally concluded that the alarm was working, most people on the unit were probably too deaf to hear it. It was a superb accompaniment to the workers' drills and hammers, and my mind felt as though some fiendish oriental torturers had exposed my brain tissue and were now stretching my neurones on a rack. It could not possibly be any noisier, and yet this was supposedly a haven for mentally unwell people.

It was more like the new Bedlam.

"Will this noise ever stop?" bellowed Hettie in my ringing ears.

"I don't know!" I bellowed back.

"I need tea now!" she returned.

"We've just come to test the fire alarms!" shouted the two blue-coloured men.

"Do you think they're working?" I responded through cupped hands.

"I'm going to discharge myself!"

Just then, being almost next to the front door, I was able to detect the comparatively faint buzzing of the doorbell. I opened the door, and was confronted by a large party of self-important looking people who announced themselves as the Mental Health Inspectors, here on an unscheduled visit.

"Welcome to the unit" I mumbled.

The inspectors' function was to check on the status, conditions and welfare of all patients, and to furnish reports and recommendations to Trust management. They had statutory authority and their findings were always made public, so they had the rare power to wake up our hospital administrators from their flip chart dream world; a fact confirmed by the bobbing head of a humble looking senior executive in the background.

Daily Post, 25th. March 2004

Huge Increase in NHS Managers

There has been a 59% increase in the number of NHS bureaucrats since 1997, recently released figures have shown. This far outstrips the percentage increases in nurses and medics over the same period, and lends further weight to the argument that administration, red tape and paper pushing are running out of control in health care. There are now over 35,000 managers in the NHS, and some have received salary increases up to 30%.

Chief Executives can receive £100,000 per annum.

Bruce G———
Current Affairs

They had apparently been waiting for some time in the snowstorm which now beat against the unit, and were in consequence even more menacing than usual. I beamed delightedly at the Hans Christian Anderson giant who led them in, apologised for the inconvenience, and ushered them through the mayhem towards our main office. The ambient row continued as the regal procession made its way around buckets, ladders, furniture, paint pots, one histrionic lady who was taking the opportunity to lie down in the corridor, and various ancillary workers who bowed their heads appropriately. I quickly tracked down Richard, who had somehow got wind of the inspectors' arrival and was now frantically searching for a priest hole to dive into, and left them to it. My parting impression was one of Richard (with hands bandaged like a boxer) dancing uneasily in the electrically charged atmosphere of a star chamber.

"Yes, I've got it in hand." I heard him say in the distance.

"What a shite that inspector is" commented Sidney.

"Quite probably" I agreed.

"Yes, I haven't seen anyone that height for a long time" he continued.

"He must have giantism or something."

I organised some tea and coffee for the visitors, not so much out of courtesy, as a wish to buy some time while I planned my escape. Care plans were always written using 'defensive documentation' techniques to ensure that officialdom couldn't scapegoat the staff without a struggle, so I felt reasonably confident that my paperwork was watertight; but I'd still rather have been on Mars. Sadly, much more effort went into meeting the needs of our financial planners, legal experts, managers and auditors than into meeting the needs of the community as a whole, otherwise we would have certainly thrown off the bureaucratic fetters by now and used a 'rehabilitation' model which actually *worked* in some way. But alternative ideas were virtually outlawed, 'opinion' was a dirty word and care plan entries had to revolve around factual descriptions of what was already happening. This was simply a formula for clinical inertia, so I sensed that I should probably keep out of the inspectors' way in case my exasperation boiled over at P45 expense. Besides, the two Trust managers were about to be hung, drawn and quartered, and I'd rather not distract the executioner with a flasher's sideshow.

So for half an hour I moved around the unit like a commando, concealed within dust clouds, tying shoelaces behind armchairs, inspecting far off

bedrooms, and visiting the lavatory with octogenarian frequency. Running out of ideas, I finally seized the menu sheets while the office was empty, and slowly toured the unit asking patients what they would like for their evening meal. Some patients gave entirely rational answers, while those with more serious cognitive damage often struggled terribly with the simplest enquiry. I had just reached the most challenged patient of all, when I sensed one of the inspectors sliding silently towards me like a tobacco-stained boa constrictor on the look out for easy meat. Rather than short circuit my enquiries by simply completing the sheet in accordance with my observations of the patient's previous preferences, I now had to put on my politically correct and untouchable hat on, so the inspector would be impressed. This meant going right through the menu sheet, item by item, so that the patient was exercising 'free choice':

"Now then sir, would you like chicken soup at tea time?"

"Aye." (so far so good)

"Would you like shepherds' pie...?"

"Aye."

"Or cheese omelette?"

"Aye."

"Or a salad, or an egg sandwich?"

"Aye."

"How about your sweet. Would you like apple pie...?"

"Aye."

"Or jelly and ice cream, or cheese and crackers, or a banana?"

"Aye."

I felt the boa constrictor coiling and about to strike, but instead, with an empathic smile, the inspector said:

"He's got a very good appetite, hasn't he?"

He then rejoined the main group, and I couldn't help noticing that Richard looked a little disappointed as they all turned away. Moving like a squad of monosyllabic minders guarding two beaten boxers on their way back to the dressing room, the inspectors and the managers quitted the unit for 'further discussions'. With this glorious reprieve, I circulated around the unit in an unusually excellent mood, and not even the sight of a large stool slipping out of one gentleman's trouser leg as he walked down the corridor, could fully dampen my spirits. The stool was as hard as a rock, and didn't even stain the carpet on impact, so with rubber gloves donned

I hardly had to break stride as I collected the offending article like a basketball, and rammed it down the nearest lavatory pan. Happily, Sidney offered to clean the gentleman up, while I consulted the 'reality orientation' board to see what sort of social events we had planned today.

For many years we didn't have an activities notice board, because care on the unit had become polarised around physical and medical interventions, and management couldn't be persuaded that broad-based care was as important in practice as it was in theory. But after the last inspectors' report, which was a crushing indictment of conditions on the unit, we had at their insistence installed a daily events board - carefully following the action-packed programmes for some weeks. During that time, the lounges were full of residents playing domino's, cards and Ludo, or deep in conversation with attentive staff, while the more active undertook regular walks and went on day trips to museums, stately homes and seaside resorts.

But the unit had a life of its own, and when anything new occurred the normal institutional pattern of the place soon seemed to reappear, almost like a monstrous octopus re-growing a tentacle after the courageous hero had hacked the first one off with his trusty knife. So it was on this occasion, as patients gradually got bored with board games, tired of walking, and defensive when talking. The staff too, generally preferred to watch T.V. and chinwag when there was a breathing space, so slowly the social activities degenerated into walks around the hospital site when staff members fancied a cigarette break, and rides in the unit vehicle when staff members wanted a change of scene. This unspoken collusion was typical of the unit, and accounted for a lot of the inertia, as patients, nurses, relatives and managers all shared an interest in 'no change'.

Our patients were generally frightened of re-entering mainstream life, remaining frozen between 'improved' behaviour that might see them move on, and 'deteriorated' behaviour that might see them return to more restrictive regimes. Nurses preferred a predictable working day, and quite enjoyed complaining about the stagnation, while some didn't particularly want their skills challenged by new circumstances. Many relatives would accept the inertia, as long as the patient didn't land on their doorstep, and our managers were quite happy to leave clinical matters alone as long as the meeting room had plenty of sandwiches and some paper progress was being made with the latest government initiative. Their unofficial

motto was 'ignorance is power'.

The unit was supposed to provide NHS psychiatric rehabilitation services for a local population of 100.000 people, but over a period of ten years it had catered for no more than 30 largely intractable individuals, who had soaked up the taxpayers subscription between them. They were effectively a private 'club' of career clients who either remained indefinitely, or returned invariably. Deaths accounted for more movement through the system, than successful onward referrals.

"I need a cigarette now" said the voice that lurked around every corner.

"Follow me, then" I said.

"I'm going to discharge myself" the voice added.

(silence)

Yes, we'd had innumerable meetings with the inspectors over the years, but this time, for the first time, something felt different. There was electricity in the air, a crisis looming, and a fever about to break.

The clock on the landing seemed unusually loud today.

Tick tock.

Kate 2005

"That's five-turdy" the assistant said in an odd accent, difficult to place. I was at the supermarket check-out, watching a line of six people juggle their credit cards, consider cash-back, redeem multifarious vouchers, wait for the crashed link to restore itself, wrestle with impenetrable plastic bags, and deliver the latest instalment in their riveting life stories to a goon-like operative. All around me, there seemed to be armies of unsmiling hermaphrodites with excruciatingly short haircuts, dark-tinted glasses and voluminous grey trousers, like psychopathic attendants in a 1960's Hollywood asylum, waiting for the tiniest excuse to wade in with meaty sticks. An avalanche of hatred and venom seemed to be only one misplaced word, or deed, away.

So, when I started mentally unrolling my sleeping bag, ready for a long wait in the cashless world, and somebody tapping me on the shoulder, I jumped like a scalded cat.

But it was only Kate.

Only.

"Hello Steve" she said.

"Hello Kate." I replied. "Day off?"

"Yes."

"You look pleased with yourself."

"Guess what?" she enthused. "I'm starting the training next month."

"Oh..... marvellous.....well done" I said, rather unconvincingly.

It was one of the saddest things in my life that people could actually aspire to the sort of job that I had, as if it was a peak achievement of humankind and the best thing that they themselves could possibly imagine doing. After three years of 'the training' and another three of the dream, they were likely to think differently – but there was no point in saying this to a new convert. Ergo:

"May I congratulate you in traditional carnal fashion?" I winked.

"No thanks Steve" she laughed. "You're too thin and your ears stick out."

"Well, if you're absolutely sure..."

"Oh, go on then" she giggled. "Just for old times sake."

"But there aren't any old times."

"Well let's make some then."

"Really?"

"Really."

Falling Madly in Love

Without noticing the intervening distance shrink, I suddenly felt a warm kiss and a hint of velvet tongue, the taste of strawberry bubblegum, and thighs subtly interlocking with mine. A line of dominos began to fall, and they fell rapidly.

I couldn't believe it, but almost as though I was on page 82 of an escapist novel, I found myself walking up the stairs to her flat, watching the slight rise and fall of her wonderfully curvaceous cheeks; and feeling a delightful scrotal twitch. There was absolutely nothing in the way of preliminary coffee or verbal chess, just a quick tangle of limbs and some theatrical panting, as we crashed onto the bed with animalistic crudity, and her top came off like a magic trick.

For half an hour or so the world lay forgotten, as delicious thrills neutralised moral guilt, our flesh talked and fingers walked. I could have stayed for a lifetime, but when Kate gripped my behind with claws of steel and started the old hula-hoop routine with her hips, a bolt of lightning seemed to arc between my gonads, and that was that. Hot spasms transported me to the minor gods, perfume wafted and there was a touch of silk.

Gulp.

Mars was surely in conjunction with Venus.

"Christ, what did I do to deserve that?"

"Nothing, I was just in a good mood that's all."

"But what about your boyfriend?"

"He isn't really my boyfriend Steve. We've had our moments, but it's nothing serious."

"Anyway...."

"Anyway....what?"

"What about your *wife*....that's more to the point."

So I told her about the state of play, both at home and at work. I pulled no punches, made no excuses, just laid it all out like a lacklustre picnic on a cold day. She made no comment, and with the coffee appearing a little later, I settled for the dock and she for the jury.

"The pub's open. How about celebrating?"

"Celebrating my R.M.N. training..... or celebrating us?"

"Both."

The pub was like all pubs that are real pubs, and we lolled in a dark corner, feeling the warmth of a smoky fire, admiring the anachronistic brass, watching a few regulars through the forest of ebony pump handles, and feeling so good it couldn't be bettered. This was the stage of rose-coloured spectacles, where disagreements didn't occur or didn't matter, bodily functions were only pleasant ones, blemishes remained unnoticed, and a shared present blinded us to a divergent future. The mundane seemed new, anything was fine, and the beautiful became divine.

I remembered one young couple who were so in love, they could even make a joke about who left the longest stools in the toilet every morning. I wondered what they were doing now.

"Did you hear the one about the two cowboys?"

"Go on then."

"One bet the other one that he wouldn't take a drink from the saloon spittoon for twenty cents."

"And?"

"He not only took a drink, he completely emptied the spittoon in one swig."

"Yuk."

"The first cowboy paid the twenty cents and asked why the second cowboy had decided to drink the lot, because a sip would have won the bet."

"And?"

"The second cowboy said he had no choice, because it was all in one lump."

"*Ha ha ha!*"

I wondered where *we* would be in ten years.

A shiny black cockroach walked around the brass footrest, and a fat man

slumped to the floor in a pool of piss, while his pals knocked their dominos on the rough-grained table, and we savoured our unspoken pact. Two bags of salted peanuts later, we left, and I followed those perfect shapes up the rickety stairs.

Once again.

"Fancy a joint, Steve?" she said later.

"Oh, I thought you were vegetarian?"

"You're always joking.... Now get rolling."

In everybody's life there is usually one glorious idyll. A few weeks, or months, of pure bliss. A time when heaven is glimpsed.

A ride on the beautiful bubble.

* * *

The door of my dream opened easily, and an orange-green vortex seemed to suck me down the corridor, surrounding me with a mass of dazzling, darting colours. I was in the unit (apparently) floating towards the office, guided by half-remembered landmarks, and wondering how the vile miasma of sweat and excrement had somehow changed into the floral vapours of a delicate perfume.

It was a bit disorientating, to say the least, and I was rather relieved to see three of my colleagues sat around the desk; until their laughter gave way to side-ways looks, ill-concealed whispers and a sudden rush for the door.

"Oh....goodbye" I said to their retreating backsides.

"Shut your crap...er....trap" they threw back.

A group of unusually jocular residents then passed the office, turning their heads towards me with leering looks and demonic chuckles. Down the corridor they went, suddenly twisting around and pointing at me, cackling like witches and hurling abuse. Their faces were pictures of loathing, their Gorgonian eyes seemed to stare straight through me, and their huge mouths opened like scream masks, propelling me back into the office with a gale of crippling halitosis.

Then they charged after me, and I wasn't at all surprised to see them drop their trousers and excrete on the carpet, although the sight of my nursing assistant joining them did momentarily stun me. They all hooted

with derision, and then seemed to evaporate in front of my eyes, leaving the stinking piles of poo to pulsate and steam, while horrendous tapeworms made their way to the surface, and winked. I thought of escape through the office window, but all I could see was my own reflection looking back, changing hideously as I visibly aged, paled and shrivelled. Like a death.

"Wake up Steve!"

"W...what is it?"

"You were having a horrible dream, I think."

"Oh...Christ... sorry"

"It's okay....I shouldn't have woken you up really, but it's getting late.

Aren't you expected back?"

"Yes....you're right...I'll go now."

"What was the dream about?"

"It was weird..... I don't really know....."

"You look as though you've seen a ghost."

"The ghost saw *me*, I think."

"Poor baby."

"When will I see you again?"

"Soon."

The Unit

2005

Today, some of the patients needed new stocks of toiletries and cigarettes, so we began the formidable task of accessing their cash. The patients' finances were now kept off the unit in the cashier's office, which was only open at certain times on certain days, depending on whether the part-time cashier was on duty, on leave, on sick, on training courses, or on the toilet. We made our way through the waving mass of memo's on the notice board, and ascertained that the cashier was indeed available between 10.15a.m. and 11.15a.m. today, so the lucky patients could leap through a rare window of opportunity and withdraw their own money. Or should I say, the taxpayers' money.

Heartened by our discovery, we then moved on to the inevitable paperwork, which involved taking the patients across to the cashier's office, requesting the amount on a form signed by two nurses and the patient, returning to the unit and entering this amount in the cash book with signatures from patient, nurse and 'witness', and then signing for any change obtained after purchases, with receipts. Because the locked cash tins and books were kept in the locked filing cabinet in the locked office, this process dovetailed wonderfully with the great keys fiasco (see earlier), and often left patients frothing at the mouth while the correct tinny little keys were extricated from the two hundred and fifty-five keys available, and inserted in the generally unyielding locks.

But at last the performance was over, and the waiting patients dispersed around the unit. Cecilia (who had been jumping up and down like a frog in a drain pipe) opened the front door, immediately turned on her heel, and loped back towards the smoking lounge with the parting comment:

"I'm not going out in that!"

"Oh, come on, Cecilia" said Sidney, "you're a big crapping lass."

"You what?" she shrieked in full retreat.

"You're a big strapping lass. No need to be afraid of the cold."

Cecelia

February 1972

Cecilia didn't like school much, so she didn't go there very often, preferring to sit around the house drinking gallons of tea and eating garibaldi biscuits. Her parents had tried to challenge her on the subject, but she was a big girl with a frightening temper, and they were afraid of her. Cecilia's mother disappeared to the shops and her father disappeared to the pub, or work, or the employment exchange, and Cecilia continued to drink tea, slowly fulminating in her resentful world; a rebel without a cause, or an effect. Sometimes the authorities would prevail on her to attend school for a while, and she would sit in class preserving her ignorance like a talisman, determined to learn nothing.

Eventually school could hold her no longer, and she migrated to the dole queue, taking casual jobs when she was forced to, sucking the life out of anybody who was unwise enough to call her friend. She saw successful people around her, and boiled with irrational rage, striking out when drunk, stealing while sober, repelling men she wanted to impress, eventually spiralling into prison. She became a soft hard nut, an asocial wastrel, and a wreck. Then things got a good deal worse.

She spent some time in the psychiatric wing of a prison, enjoyed the better conditions, observed the conduct of her fellows, and decided to join them. She was soon 'hearing voices' and talking in riddles, demonstrating inappropriate emotion, and alluding to a difficult childhood. The therapists were in business, Cecilia's psychiatric career had begun, and she was soon convinced of her own problems, and the escape from responsibility which they guaranteed. She learned the ropes, found the boundaries, and played the game.

At 38, Cecilia had lost most of her teeth because she ate five bags

of sticky sweets everyday and wouldn't use a toothbrush. She'd seen her mother into an early grave, transferred her over-dependence onto one or two nurses who humoured her, and now cost the tax payer around £200 a month in broken windows and fittings alone, as she reacted with violence to every minor difficulty she faced. She had scarlet fever if she was asked to clean her room, pneumonia if she had to go outside without a taxi, and stomach cancer if she was asked to eat vegetables.

Hospital was home.

It had stopped snowing, but there had been a fairly recent shower of hailstones and it was a bit breezy, so I gave up on any idea of persuading Cecilia to return. Our patients were generally very sensitive to inclement weather, and often refused to leave the unit even if it was only lightly raining on a spring morning. There would be a major problem indeed if 'bad' weather coincided with a patient's regular arrangement to visit a relative or the shops, because a compulsion would then be blocked by a phobia. The only solution sometimes was to book a taxi, and smuggle the patient out of the door with an old mackintosh over their head, as though they were a celebrity leaving the High Court. One lady was completely obsessed with the weather, spending long periods ruminating over the forecasts, gazing out of the windows, and getting extremely angry if it "took a turn for the worse".

Being in England, she was generally apoplectic.

Yet, some of the unit outings had become legends, as in the case of the trip to Scotland, where the hired minibus was crashed on arrival, stranding ten patients for five days in a remote slate hostel, with no T.V., radio, telephone or other 'mod cons'. One gentleman quickly became bored, and started to walk the two hundred plus miles home, while another developed concussion because she repeatedly cracked her head on the bunks she couldn't get used to. On one camping holiday, staff woke up to find a patient missing, and eventually recovered him from a pleasure park nine miles away, while holidays at sea side resorts were eventually

abandoned because of the difficulty in explaining wet and soiled beds to understandably irate landladies. Stately homes were not usually a success either, as patients normally walked past the finest works of art looking at their shoes and complaining about the no smoking regulations, or they set off alarms by sitting on priceless Chippendale furniture and (in one famous case) lying on the Royal half tester bed.

Even short shopping trips could be classically embarrassing, with patients disappearing as if by magic, some helping themselves to cans of lager and consuming them in front of bemused check out assistants, and others becoming noisily deluded. One young chap specialised in dropping his trousers when using the public urinal. Many patients, of course, would leave the unit by themselves (officially or unofficially), and reports would frequently come in of temper loss in the town centre or at relatives' houses, violent acts, patients experiencing fits, and others hopelessly lost on the way back to the hospital. A man who had not left the unit by himself for ten years because he was extremely disorientated and had very limited communication skills, suddenly got up from his chair one day and was not seen again for three hours, being eventually discovered by the police in a town centre estate agents.

My Learning Journal

When I was a student nurse, our tutor advised us to keep a 'learning journal'. This was intended to document and reinforce all our learning experiences on the wards or in the classroom. Like a professional diary, it would be completed after each shift or session, and serve as a chronicle of our progress. We knew that it could be requested by the college as part of our final examinations, so most students stuffed their journals with heart-rending accounts of stoicism, self-sacrifice, honest endeavour and penance.

I didn't do that, but I've kept the habit going all these years. Since 1990, in fact.

Mad Hospitals

Excerpt 1990

Large mental hospitals are often stereotyped as horribly old-fashioned places, with sadistic staff, strait jackets, endless dormitories, batch living, and fearful experimental therapies, but this couldn't be further from the truth. Since the 1970's, most of these large hospitals in the U.K. have been offering a very high standard of care which is also quite diverse in nature, including short stay treatment with community follow up, and challenging therapeutic communities, as well as long stay care. In most cases, the institutional care itself does not involve the mindless depersonalising routines, or the cruel herding together of brainwashed victims that's often depicted in sensationalist fiction. It's more like a thriving community with its own church, farm, shops, cricket team, light industry, and social clubs, as well as the more 'modern' facilities of occupational therapy, physiotherapy, chiropody, art therapy and clinical psychology.

But you can't stop change, I suppose.

What a shame.

Yes, it's frequently forgotten that the 'dreadful' asylums actually *helped* many long-term patients to continue living meaningful lives, because their regular participation in social activities, religious services and a whole variety of work situations gave them a crucial sense of self-esteem and inclusion. This idea seems alien to many people working in the new community care units today, because policy-makers have sanctified the rights of patients to choose, without showing a proportional interest in their social responsibilities. As a result, work is no longer emphasised as therapy, patients can opt out of most personal or social responsibilities with impunity, and their largely hedonistic lives remain ungrounded, unbalanced, and ultimately frustrated.

Tragically, rehabilitation units for people with 'functional' problems are threatening to become the preserve of tea drinkers, cigarette smokers, T.V. watchers and sofa sleepers, while the acute units are developing into refuges for drug addicts, alcoholics and 'welfarists' who have turned hospital admission into an art form. Even the 'successful' ex-patients in the community, are often occupying a world of endless social security benefits, coffee bar drop-in centres and regular hospital readmissions. Indeed, when some staff were recently asked to suggest a name for a 'state of the art' new ward, the most popular unofficial choices were 'Dunroamin', 'Journey's End' and (from the intellectuals) *el loco parentis*.

One of the declared objectives of community mental health care was to reduce the need for psychiatric hospitals, but instead we seem to have created one big psychiatric hospice.

"Hello there!" barked a loud Scottish voice in my left ear.

"Splash" went my biscuit into the oily coffee, as an unwanted head appeared through the office window like an old cover of 'Mad' magazine.

"Oh...er...hello there" I echoed feebly.

Because he was allergic to the front door, this was the nearest our 'Locality Director' ever got to the unit and we lived in dread of one of his rare unannounced visits coinciding with our tea breaks. He invariably appeared at the window when we were admiring the lingerie brochures which fell out of the local paper, or when we were stuffing ourselves with purloined sandwiches from the food trolley, or when we were pulling our flies up. He always reminded me of the old silent film *Nosferatu* leering through the porthole of a Whitby bound ship at a young maiden preparing for bed; blissfully unaware of her fate until she turned around. He had the ecstatic grin of a sadistic, inbred Mediaeval torturer.

"Is your manager anywhere about laddie?" he roared.

"Aye.....er.....yes.....er....no" I said. "He's in another meeting with the inspectors."

"What are their main impressions?" he boomed.

"Er...well....I'm not really sure, but most people can do Frank Spencer and Prince Charles...."

"No! No! What do they think about your unit?"

"Oh...sorry.....er.....I don't really know..... but Richard said he had things well in hand."

"I'll let you get back to work then laddie!"

"Slam!"

The old sash window fell like a well-greased guillotine on the King's scrawny neck, and I watched with grim satisfaction as the Director's purple lips slowly mouthed the words:

"Oh, God. Please help me."

"Speak up would you?" I said "You seem to have got something stuck in your throat."

"Help.... Help."

"Oh, very well then, but I'll have to ring the porters first – they wouldn't want me to encroach on their job description."

"Help...Help."

"Please don't be impatient. I'll have to complete the incident form first, just in case I forget some of the facts."

"Help."

"Oh, my goodness!"

"What? What?"

"I thought I saw a donkey with an erection coming towards you, but it was just an illusion."

"Oh, please help."

"I'm sure there's a protocol for this in the new Trust Non-Personnel Policy Yellow binder Edition 12. Or perhaps that was the one applicable to chimpanzees who happened to get *their* heads stuck."

"Help."

"Sorry for being apparently awkward, but I wouldn't want the unit to be exposed to any litigation if I accidentally dropped the window as I was lifting it without proper training and authority."

"Help."

"No, I'm not at all happy with this. We ought to have a planning meeting first and invite half the Administration Block for coffee and sandwiches."

"Help."

"It would only take me an hour to set up the flipchart stand. Or perhaps a full Powerpoint presentation would be more professional. I feel strongly that everybody ought to be up to speed on this, before we begin. Yes, *a presentation* would be the best solution, I think."

"Help. Help. For God's sake help."

"Oh, very well. On your head be it" and I lifted the window.

"Crash!"

"Eeeeeaach!"

"Oops, sorry - I am a butter fingers. Don't worry, I'll try again."

Up it went.

"Thank you" he croaked.

"I'd go home sick, if I was you."

"Yes...Yes...I was going to do that tomorrow anyway" he agreed

"sob.....sob."

"Oh, dear. There's no need to get so upset. It's just a bit of shock setting in."

"No (sniff) it's not that."

"What is it then?"

"I'm a bit disappointed about the donkey, that's all."

If only I could turn these fantasies into realities, how happy I would be....

"Bang!"

The front door slammed shut, and I saw Richard roll down the corridor like a released hostage thrown out of a moving car.

"I need tea now" whispered Hettie in my left ear.

"We're having a meeting this afternoon – things don't look too good with the inspectors I'm afraid" whispered Richard in my right ear.

"Well I'm sure you've got everything well in....."

"I need tea now!" Hettie roared. She was a woman who deeply resented other people interrupting her interruptions.

"Follow me then" I said.

"I'm going to discharge....."

"Sooty and Sweep to receive O.B.E. claims insider" boomed the radio.

With lunchtime approaching, I sidled off to the dining room to lay the tables, secure in the knowledge that by the time Richard was roasting on the spit, I'd be at home. The man on the kitchen radio said:

"A boy was beaten to death, his body sliced up, and the limbs dumped around a nearby town, a court has heard."

"I don't think that was mine" said Sidney.

"Sorry?" I said.

"I'm waiting for a defecation."

"A defecation?"

"Yes, a dedication on the radio. It's my wife's birthday today."

I took the plastic box full of cutlery to the tables, noted the unsavoury black grit which had gravitated to the bottom of it, and then stopped because Richard had entered the room, and was saying:

"Phone call for you, Steven."

I went through to the office, and on picking up the receiver I could hear in the background a stentorian voice booming something about cans of lager and a picnic basket. Then, a thin, quavering voice (obviously belonging to the same person) was turned to the 'phone, murmuring pitifully:

"Oh, hello..... I'm s-s-sorry to ring up so late....b-b-but I won't be able to get in this afternoon. I've been sat on the toilet all morning. It shouldn't be more than two or three days. I'll ring tomorrow sometime. Sorry. 'Bye."

My Learning Journal

Sick Notes

Excerpt 1999

Our staff are entitled to spend six months sick leave every year *on full pay*, and for many this is a temptation far too generous to decline. There seems to be an unofficial roster which staff use to co-ordinate their sick time, and it's quite possible to predict the next period of sickness for particular nurses by observing their patterns over previous years. One nurse is completely unselfconscious about taking the same two weeks off every year just before Christmas, while another specialises in taking all his normal holiday entitlement in the first eight months of the year, so that 'sickness' can provide the necessary breaks later on. Great care is taken by the malingerers to ensure that only two staff at any one time are on long-term sick, because any more than this and the unit could grind to a standstill, forcing the managers to leave their dream worlds and examine the situation more closely. Time and again, supposedly sick staff are observed drinking pints of bitter in beer gardens, laughing uproariously on main shopping

streets, and leaving the town to go on foreign holidays. One nurse was recently seen drinking a tin of lager at home with their feet up on their T.V. set fifteen minutes after phoning in sick with 'nausea', and another famously broke their arm during a house removal when they were already off sick with a bad back. Then there's the classic story about one person who regularly appeared at their G.P. surgery for sick notes, but was once mysteriously absent for about six weeks:

"Oh, I haven't seen you for a while" said the doctor cheerfully.

"I know. I've been ill" replied the staff member.

A large percentage of our nursing staff are on antidepressant medication, and almost as many have regular sessions with psychologists or counsellors, not only because they consider themselves to be desperately unwell, but because these measures are an essential part of their ongoing 'sick role' presentation to managers.

There's really an unspoken agreement between our managers and the malingerers, that providing the administrative procedure of occupational health appointments, sick note production and return to work interviews is correctly followed, then the malingerers can continue to abuse the system indefinitely. This wonderful *quid pro quo* enables local managers to avoid messy confrontations with staff and their union representatives, while at the same time demonstrating that they're doing their jobs 'according to the book'. *As a result, the situation on the unit has become absolutely absurd, with staff claiming more physical and mental illness than the patients they're supposedly looking after.*

Duties and job descriptions are effectively rewritten to accommodate the delicate sensibilities of 'poorly' staff, and our unit has become a sort of leper colony where the most troubled staff in the area are sent to rehabilitate. Over a ten year period, we have received reforming alcoholics, people with terminal disciplinary records, those recovering from marital and other breakdowns, one person who had conducted a homosexual relationship with an ex-patient, and of course large numbers who

have alienated their previous colleagues with prodigious sick time and time worn excuses. There are virtually no able bodied people left in the entire place, and staff demands on management are like those of spoilt rock stars at the height of their fame, yet managers can only save face by fully endorsing this conduct and pretending it's justifiable. The joint cost of sick pay and replacement bank/agency staff for our Mental Health Trust alone is now approaching a princely £500,000 a year.

I was now left with an hour and a half to get another qualified nurse to cover the afternoon shift, or I would have to stay on until the night staff came on duty at 9.00p.m. My head began to throb, while the room itself seemed to darken a little, with tiny diamond dots dancing in the middle distance.

"I've really had enough of this place" said a voice.

But it didn't seem to be my voice.

Then a brief feeling of intense anger gave way to dispassionate disdain, and I seemed to stand outside myself, watching the ugly little world with cold, remote precision; knowing that something was about to happen, and certain I couldn't stop it. Mad, bad and glad, in one beautiful, liberating thought.

Tick tock.

Llewelyn 1968

Llewelyn completed his last day at secondary modern school, leaving behind the old wooden entrance plaque with his initials burnt into it with a magnifying glass, the row of concrete bike slots that had buckled countless front wheels, and the little path down to the yard where he once pole-axed somebody with a clod of mud to the temple (in error). He walked through the clinker car park where he used to explore the workings of old Dinky toys by dropping bricks on them, alongside the railway line where oblong diesel trains had now replaced the puffing steam engines with fine brass names, past the branch line tunnel blocked by Dr. Beeching and down into the suburban gardens of home, with sweet peas, marigolds and red admiral butterflies on all sides. A late-middle-aged, balding man came limping towards him with his gabardine coat over his arm and a pair of beer bottle-bottom glasses glinting in the sun. The guillotine of cancer, heart attacks and strokes seemed a very long way off.

But it was there waiting.

"Hello" he said to the retired matron, who was gardening with her back to him.

"Good afternoon Llewelyn" she replied, without turning.

"Ah! Hello there" said somebody else, hurtling towards him from across the road like a scud missile. It was his mother's mortal enemy desperately wanting some inside information on how badly off they were this week.

"Hello" said Llewelyn, shooting through the front door and bolting it.

"Nice to see you" she warbled through the letterbox. "Tell your mother I'm thinking about her."

"Okay."

"She had such a nice little home-made coat on this morning."

"Fuck off" he thought.

Panting on the other side of door like a fugitive, he then went into the kitchen, got a jammy dodger and took stock. He was glad enough to leave school, but his future was indistinct, and he hadn't even arranged anything for the holidays with his school friends again, in case they said no. He would probably hang around their neighbourhoods in the hope of an incidental meeting, but in the mean time he would practice his bowling along the side path using the bin as stumps, read his library books (currently

'The Lost World') and go down to the cricket ground where he spent his time selling cushions and collecting autographs.

This kept him fairly busy, but he had just enough time left over to experiment with a right-hand side hair parting and brilliantine, although this made him look like a young Adolf Hitler without the moustache; so he did the wise thing and tried growing a moustache as well. In the event, his six weeks holiday passed very quickly and he soon reached the day when he left the house resplendent in his gravy-stained tie and darned sports jacket for his first day of 'O' levels at the Technical College. It was about two miles away, and he had intended to catch the bus en route, but when he saw a lengthy queue of cavorting baboons who obviously had the same destination, he got cold feet and walked instead. This made him slightly late, and meant that he had to endure the heart-pounding anticipatory stress of knocking on a variety of strange closed doors before he eventually found the correct room, finally passing through a silent, staring multitude in search of a spare seat.

"What's *your* name?" said the lecturer.

"Llewelyn —, sir" he replied.

"Are you sure you're in the right place?" the lecturer asked cockily.

"This *is* the town brothel, is it not?" Llewelyn retorted.

He then grinned inanely at the lecturer's white face and his unresponsive peers, hoping that they couldn't smell the sweat generated by his incubator jacket, long walk and molten embarrassment. It was just dawning on him how incredibly gauche, nervous and shy he was in strange circumstances, and how easily he responded to pressure with acerbic sarcasm. He had been released from the fairly uniform and unselfconscious world of a boys' school in the 1960's, into this challenging pre-adult world of a further education college, and he was drowning like a kitten in a sack. His haircuts invariably made him look like a village idiot and his choice of clothes was decidedly pre-war, while his short neck and tall collars ensured that periscopes, rather than ties, were necessary accoutrements. The new faces, co-educational novelty and harder work, all threw up tremendous adaptation problems, and he soon discovered how incredibly difficult it was for certain people to be normal.

He also found out that self-confidence did not always flow from knowledge and achievement - it was more frequently the product of blissful ignorance. Knowledge made you aware of your *weaknesses*, as well as your strengths,

while ignorance could sustain your vanity forever.

For Llewelyn, it was the psychedelic escapism of 1968 and 1969 which showed him a glimmer of hope. He was not an obvious revolutionary, with his basin haircut, Michael Caine glasses and podgy face, yet the seeds of personal revolt had been carefully sewn and consistently cultivated. He desperately needed an identity beyond the definitions imposed by home and college, so he greedily explored the alternative worlds of Sonny Barger, flower power and underground music, in the hope that these would provide a Holy Grail solution. He was too much of a wimp to use L.S.D. immediately, but by 1969 he had purchased an 80 c.c. Yamaha motorbike and bought his first 'Black Sabbath' L.P., demonstrating clearly to the six people on the planet who may have been interested that his personal rebellion had begun. The voting age had been reduced to 18, the first man landed on the moon, and he was ready for take off.

Initially, their motorbike club was laughably eclectic, with both scooterists and bikers joining forces to circulate around town and occasionally pose outside the chip shop, but by the time Llewelyn had left college the gang had seriously powerful machines, leather jackets, and denim waistcoats with their gang name on the back. They had all-night parties, big 'runs' to Wales and the Lakes, their first serious sexual experiences and cheap thrills as they rode en masse through the cobbled squares of quiet towns with gaping locals. Llewelyn met a few genuine characters during these years, including the youth who was so greedy he licked out chip bags, and the chap who could recycle a cup of tea up through his nose and back into the cup. There were also the really tough guys who drank their own urine in public toilets to show 'class' and the man who insisted on wearing an anorak instead of a leather jacket – even though this blew up like a balloon when he was riding, and led to his nickname 'armchair'. But all this was nothing compared to the top man in the local Hell's Angels chapter who reputedly ate dog shit.

Indeed, for all their bravado, they were still 'weekend' deviants, who conscientiously returned to their offices and apprenticeships on Monday morning and shrank into the background when gangs of tattooed desperados from the city rode to the coast. Compared to these knife-wielding anarchists with hairy shoulders and huge beer guts, they were just a bunch of second division runts with delusions of grandeur. Not quite as deluded as the local bloke who went around in full racing leathers and

a helmet on his pushbike, but deluded nonetheless. There was certainly a wonderful feeling of camaraderie at times, but they were basically frauds and impostors, trying to pretend their adolescent antics were leading to a profound counter-cultural end.

They weren't.

After a few years subtle changes appeared in the dynamics of the group and they started 'racing' rather than riding, and arguing rather than laughing. One night during a party somebody pissed in Llewelyn's petrol tank, and someone else nearly died when they were pushed into a swimming pool while drunk. Things were due to change again.

The sine wave of love and hate.

Mad Mexican Bandits

In the 1970's, every cowboy film (or series) seemed to have a resident mad Mexican.

"*Ha! Ha! Ha!* You are my special friend gringo" the Mexican would laugh "And tomorrow I shoot your balls off."

Llewelyn knew exactly how the gringo felt, because one of *his* friends was a bit like that. He was a good chess player, but whenever he started losing he would embark on a whole series of distracting manoeuvres, including cracking his knuckles, humming inane tunes loudly, and releasing his six pet budgerigars into the room, where they would proceed to chirp, fly and crap. If all else failed, he would somehow contrive to nudge the board onto the floor while he was dunking his ginger biscuits. He had absolutely no shame.

Like some people haven't.

One day Llewelyn left his prized racing bike in his friend's garden shed, and when he returned he found that the bike had been burnt to a crisp (along with the shed itself and half the garden). A rubbish fire had got out of hand his friend announced apologetically, and there was absolutely nothing he could have done about it. It was a year later, when Llewelyn saw his friend coaxing their family cat into the oven, that he could finally see the truth.

Llewelyn had left the 'tech' in 1970 with a hand full of 'O' levels, joining the local office of an insurance company and then transferring to their regional office two years later. This represented a fundamental conflict, of course, between the financial necessities of life (working in the office), and his anti-establishment self-imagery (riding with the bikers); a battle which was fought on many levels. His employers knew that he had a motorbike, and they noted his long side burns, collar length hair, shiny-elbowed suit and seditious sense of humour. This meant that perfumed prats with kipper ties and smug smiles could amble in ten minutes late and spend another five discussing their orange Morris 1800's with the Chief Clerk, while Llewelyn was publicly flogged for being two minutes late and reminding the Chief Clerk that they were all on flexitime anyway. He slowly dug his own grave, but he was pleased that he was finding his voice at last; even daring to criticise the jailers around him.

At home, the situation had reached crisis point, with his middle-aged mum developing total hypochondria and settling for a life on state benefits. There were endless references to multiple chronic illnesses, constant affected coughs and groans, long periods of ossification in the fireside chair, and apoplectic attacks if this was ever questioned. Rapid walking round the back of the house would be replaced with a grimacing snail's pace at the front, coughs and sighs would multiply and grow in volume as the front door was answered, and an arthritic inability to hold a pen would be contradicted by five page vitriolic letters of abuse to the doctor's surgery and welfare agencies. At the same time, nobody else had an illness worth mentioning.

"You'll get this house when I'm dead" she sobbed in the morning. "It won't be long now".

"I want you out! Out! Out! You bloody good-for-nothing! You're no son of mine!" she shrieked in the evening.

From that time onwards Llewelyn used a healthy scepticism in his dealings with the world, because he realised just how cleverly another person could rationalise their actions, 'spin' their attacks, and fool some of the people all of the time. Even if it meant convincing themselves of blatant untruths, ignoring counter-evidence for years, losing all self-respect and bringing themselves to their knees; the easy option was sometimes just too much of a temptation. *As he later realised in his professional life,*

subconscious evasion of responsibility was a very widespread phenomenon indeed.

He'd been living in a flat since 1971, but when he returned to his hometown to visit friends his mother would sometimes put him up, and this would inevitably end with a cataclysmic row and his ejection from the house. He would then crawl round to see one of his long suffering pals and beg for a night's lodgings, losing quite a number of friends in the process. Indeed, it was one of his most savage learning experiences to discover that many of them secretly reviled him for being 'intellectual' (i.e. he had an office job), and abandoning his mother in her 'hour' of need. An easy mistake to make, he supposed, for people who had enjoyed the security of a stable family all their lives and had no experience of long-term neurosis. They couldn't see that his callousness had at least kept him sane, that there were many sides to every story, and that an hour of need could sometimes stretch to forty years.

Shortly after Britain joined the E.E.C. (1973), his fading love affair with motorcycles ended in divorce, as he found himself rolling down the road at 60 m.p.h. in a t-shirt, with his flesh mixing into the tarmac. He got away with a broken collar bone and deep abrasions, but the wounds were still bleeding three weeks later, and he'd had enough. His mother visited him in hospital, but minutes after her arrival she fainted, ending up in a bed next to Llewelyn with the Cheshire cat smile of a well-practised martyr. He took stock of his life while he was recovering, returned briefly to the civil service (where he was then working as a clerk), and handed in his notice.

He really couldn't imagine himself spending his entire working life with grey soulless managers admonishing gossiping staff for petty bureaucratic crimes. For him, it was death by a thousand cuts, and with all due respect to everybody, he wanted 'out' yesterday. He now needed something which rose above all this dog-eat-dog stuff, something which was more secure, reliable and objective. He wanted to enter the domain of fundamental explanations, overarching knowledge, philosophical insight, artistic merit, quads and ivory towers, academic qualifications and regular intoxication. In short, he wanted to solve his problems by becoming a student.

Ha. Ha.

So, he ran towards explanations, and away from understanding, not thinking for a moment about the past.
The past that imprisons the future.

The Unit

2005

It was nearly Christmas, and the sickness calls were coming in with greater frequency than the disingenuous inter-departmental greetings cards. In the vain hope of assistance, I thought I should inform Richard that the qualified nurse who was supposed to be on duty in an hour - now wasn't. I trudged to our leader's door, knocked and entered, just in time to see him turn off his personal T.V. set and move a large heap of official documents to the centre of the desk. Spluttering a little, he commented:

"A-a-ah, what a Godsend Ceefax is, Steven. An absolute must for all managers. I was just checking the weather forecast and traffic congestion pages to help the inspectors plan their return journey. Jolly good, eh?"

Yes, the inspectors were here again and Richard's statement was certainly sycophantic enough to be true, but somehow his bright red face, perspiring top lip and bulging half-zipped flies told a different story.

"Oh, I thought I may have caught you *in flagrante*, Richard."

"Hum...humph.....I certainly don't know any lady of that name, Steven. And if I did, I certainly wouldn't do it in the office."

"Just joking."

I made a mental note to investigate further when he was out of the room, and told him about the late sick call.

"Sick again eh? Well, he's had a really tough time recently. Poor weather on his holiday, investments only yielding 5%, and now he has to look after his own children because the child minder's away – we must give him all the support we can."

"He's actually off with diarrhoea."

"Hum...hum. Well, he does have a tendency to stomach problems."

"He also has a chronically bad back, recurrent gout, frequent migraines, and long term depression which is resistive to all known medication." I pointed out.

"Hum...hum. Well, nevertheless we must give all the professional support we can. Ring around and see if anybody else is available."

"It seems like I've got no choice."

"Yes.....yes..... and don't worry so much, Steven. I've always got things well in hand. You know that."

"True, true" I agreed.

Returning to the main office, I couldn't help wondering for the hundredth time why the Trust *was* so gullible with staff sickness time. Up and down the country, millions of pounds were being spent on incapacitated nurses sitting at home, and further millions were being spent on replacing them with bank and agency nurses. In a situation where money was in short supply for essential equipment, new wards, medication and reducing waiting lists, it was incredible how the government and managers would dole out public finances with such mindless profligacy.

My Learning Journal

More Sick Notes

Excerpt 2000

Most of the staff here who go off sick frequently, or for long periods, have actually gone beyond conscious, cynical manipulation of the system. In order to maintain their unprincipled positions, they have slowly convinced themselves of genuine illness and are in some cases flabbergasted when medical investigation can identify nothing wrong with them, or when medical treatment has no effect. Interestingly, many of these chronically ill staff *are* able to report a sudden remission when six months sick leave has passed, and their salaries go down to half pay. This is what some of us call 'six month therapy', because where G.P.'s, staff health doctors, consultants, counsellors, and other experts have failed, the risk of mortgage arrears always seems immediately efficacious. Similarly, when (very) occasionally staff are threatened with disciplinary action, this invariably cures them of their most troublesome and exotic illnesses, bringing them back grim-faced to the unit for at least a year or so. Equally, when staff want to apply for positions elsewhere, they then have to improve their laughable sickness records by remaining 'reliable' for twelve months, knowing that personnel departments don't usually reveal records before that period.

Having said this, our personnel department don't always seem to provide the fullest information anyway. Some staff at the unit have

been appointed on the basis of a mysterious 'self employment' record which was impossible to check, while others have got their best friends to write inflated references, or they've claimed relevant work experience with organizations which no longer exist. Certain individuals have jumped from job to job every few months for a whole series of 'very good reasons', and many just seem to land on the doorstep without interview or preamble; the product of unknown management intrigues. One individual wrote themselves a reference in the same handwriting that they used for their application form, and even then they were only caught out twelve months later when their contract came up for renewal. Not surprisingly, many of these people waste little time in taking stock of the already corrupt system, and quickly disappear to get their sick notes.

Those that work for a short period first, often demonstrate the most alarming tendencies, such as fighting with each other on the way to work, or disappearing off the unit without warning. One chap has more tea breaks than work time, and when one of the cookers was taken away for lengthy repairs, he even moved a comfortable chair into the vacant recess, so that he could 'rest' out of sight. One couple had travelled right round the county, moving from one set of jobs to the next because they were involved in a constant series of disciplinary hearings and staff disputes, while others were so indolent they would try and spend the entire shift watching day time T.V., looking up with a churlish frown if they were ever asked to do anything. One man here is the acknowledged expert of work evasion, citing a vast vocabulary of reasons why things are never done; such as feeling unwell, being diverted by other tasks, reporting that patients prefer a female nurse, 'complaining' that washing machines are already full, or advising other staff that patients have requested baths later in the day rather than now. He's a complete master of indolence, and is sometimes referred to as 'the five legged chair' because he's always sat in the office with legs crossed, ingratiating himself with management.

Ultimately, it's widely recognised that our Trust has massive

recruitment and retention problems with psychiatric nurses, appointing virtually anybody who bothers to turn up for the interview, and retaining anybody who wants to continue drawing a salary. To them, a dress maker's dummy with an incontinence pad in its hand is better than nothing, and the ludicrous expense of employing unreliable people is almost irrelevant, because it's paid out of abstract budgets, not their own pockets.

Yes, the ludicrousness of our professional lives had now reached critical mass, and managers were even sending boxes of chocolates to people on sick leave to make absolutely sure that the absentees couldn't accuse their employers of being 'uncaring'. A number of staff on long-term sick leave had complained that they felt 'left out' and abandoned in their 'time of need', leading to a sudden wave of paranoia amongst managers who felt vulnerable to disciplinary proceedings if they didn't demonstrate how highly they valued their invisible workforce. Predictably, some of these absentees then began to complain that management were becoming too intrusive, and that they should not 'harass' staff while they were suffering at home.

"*Buzzzzzz*" went the doorbell, interrupting my reverie.

"I've just come to check there aren't any ligature points in the unit" said a yellow-coloured man with large identity badge worn medallion style on a gold chain.

"Okay, that's fine" I said, feeling my own throat constrict a little.

"*Buzzzzzz.*"

"Excuse me a minute, I'll have to answer the door again."

"Okay boss, I'll see you later."

"I've just come to undertake an environmental risk assessment and option analysis" said a grey-coloured man with rheumy eyes, clipboard and sad moustache.

"Be my guest" I said.

"You're not trying to bribe me are you?" he said hopefully.

"Not on my salary."

"I'm just going for a dump" Sidney interjected, farting lustily.

"There's no need - you're already in one" I replied.

"Yes indeed" he agreed.

"Don't you ever think about the great mysteries of life, Sid?" I said.

"What? You mean the possibility of life after death, Stonehenge and things like that?"

"Well, I already know there's life after death – I work here, but I was thinking more of the *great* unsolved mysteries. Like why do we never see dustbin men rushing around emptying our bins in the afternoon? Why do we get nothing but junk mail on Monday mornings? Why do people dig holes in the roads and then disappear for a month? Why do amateur athletes have to visit the Fancy Dress Shop before entering televised marathons?"

"And how does spending millions more on the Health Service lead to record levels of sickness and incapacity?" Sidney chipped in.

"Indeed."

I watched him go to the bog, and wondered.

Many of my colleagues burnt the midnight oil studying regulations on 'carers' leave', 'compassionate leave', 'special leave', 'study leave', 'adverse weather conditions', 'medical appointments in work time', and 'union duties', so that when they ran out of regular sick leave and standard holidays, they could then spend the remainder of their time also at home. Some had become formidable workplace lawyers challenging every decision with senior managers and threatening to go to the House of Lords and E.C. courts. Others settled for using two or three days of carers' leave simply to save on child minding costs, or to visit relatives in hospital once a day. Compassionate leave seemed to cover everything from the funerals of distant relatives that the applicant had never seen, to the funerals of their friends' relatives, to anything that couldn't be squeezed into the other regulations easily. It was only a matter of time before special leave would be claimed and given for nursing cats and dogs, and for easing the depression staff suffered following the death of their favourite T.V. celebrity. "My radio has broken" interjected Maddie.

"Oh, yes?"

"I want a new one."

The cassette had come to the end of its run and stopped.

I knew what it felt like.

On my way back to the office I noticed Richard sauntering out of the

toilet, carrying a large print edition of Raymond Chandler's 'The Big Sleep'.
"Any news from the chief inspector?" I said.

"*Huh!* Any more heat from that punk and I'll go crazy. I could put a slug in the bum, real easy."

"Good Lord.... I've heard they're bringing back leeches in healthcare, but that's going a bit far isn't it?"

"No kidding Stevie boy...he's got something to hide. I'm gonna hire a private dick to follow his ass every which way."

"Ouch."

I then noticed that the front of Richard's trousers was erected like a taut tent, and that he was using a blur of camouflaging hand movements to disguise the area, somewhat akin to the dance of the seven veils.

"Excuse me asking Richard, but are you having any trouble in the nether regions?"

"Oh Christ, I thought you hadn't noticed. My doctor gave me these new tablets for erectile dysfunction and now I can't....er.....deflate my member. It's somewhat embarrassing I'm afraid."

"Indeed, but think of the advantages."

"Advantages?"

"Yes..... The capacity to pole vault high buildings.....the useful place to rest a breakfast tray.....the....er....."

"Yes?" he sniffed.

"Well.....if all else fails you could always freelance as a self-propelling battering ram in drug busts. The list is endless really."

(silence)

On arrival at the office I began 'phoning around for somebody who wasn't currently sick, but I did so with a certain amount of understandable pessimism. After twenty minutes or so, my last remark was:

"Okay, never mind. I'll see you next week (hopefully)."

"My son works in NHS management, you know" said Sid.

"Oh, I thought he was an undertaker?"

"No, that's Peter. It's Todd who's the manager."

"He's in the right job by the sound of it."

"Then there's Jekyll and Hyde."

"Your grandchildren?"

"No, our two dogs."

"Oh.... rather you than me Sid. All that tramping about in hail storms at 6.00 o'clock in the morning, just so you can pick up shite in plastic bags and have your balls sniffed."

"It's not that bad Steve. I only walk round the corner to the play area, crunch an empty crisp packet in my pocket, and bend down on the blind side of the ref. There's no need to move anything."

"You've got it all worked out Sid."

"Yeah, it's dead easy and a wonderful pastime. In fact, I've been trying to get the wife more interested."

"Really?"

"I keep telling her that dogging is very fashionable at the moment – all that fresh air and exercise. But she's just not interested."

"How strange" I said.

Anyway, I'd tried everybody under the sun, including all those who worked on this unit and the other wards who might be interested in overtime, all two qualified nurses on the vast hospital bank list, and three nursing agencies – all to no avail. Messages had been left and replies not received, mobiles were switched off and numbers were unobtainable. Richard would have been very helpful, but he unfortunately had two very important meetings to attend, plus the inspectors debriefing back on the unit. So: "Could you possibly do a long day, old boy?" he crooned.

"I'd be much happier if everybody came in and actually worked the hours they get paid for" I replied.

"Hmm....hum...All the sickness procedures are being followed. Remember, it's even worse on some of the wards. We've got a lot to be thankful for, you know."

I didn't know that, but in any event we agreed that I'd do the long day and take some time back the following week. A loud radio down the corridor announced:

"20 per cent of the N.H.S. annual budget is being thrown away according to latest figures.... More than £10 billion is being wasted on sick or idle staff, theft, bed-blocking, fraud and hospital infections."

"HMMMMM.....hmmm" said Richard, working hard on his doodle pad.

"Don't worry too much about the inspector' meeting" I sniped on the way out "I'm sure things are well in hand."

"Of course, of course..... and by the way Steven" he said "You haven't

got a spare rubber have you?"

"You don't need one for autoeroticism" I smirked.

"Eureka!" he said "I've been struggling with 15 down all morning."

He turned back to the 'Daily Spurt' crossword, and I left.

"I need a cigarette now" said the lady fastened to my elbow.

"Follow me then" I said.

"I'm going to discharge myself."

"I'll have a fag too" said Bert (another of our old timers).

"Always remember this maxim in times of trouble" said Sidney "A man with a hole in his pocket still feels cocky."

"Thanks Sid."

Bert

1959

Bert didn't have a great time with his leg-iron and his limp; the unfortunate consequences of childhood polio. He was inevitably bullied, excused sports, short of friends and shy. There wasn't much to recommend life, but he enjoyed gardening and he spent countless hours weeding and digging, while his mum stayed inside and drank. She wasn't very happy either, having been abandoned by her husband for a "whore" across town, and left saddled with a crippled, sullen child. Cheap sherry dominated her days, and then her.

The years drifted unpleasantly by, and eventually Bert left school to join the 'Parks and Gardens' division of the local council. His limp wasn't so pronounced by this time, and he enjoyed the outdoor life, the comparative seclusion, and the sanctuary from home. Then once upon a time, romance came into his life; a little buxom lady recently divorced and just a tiny bit desperate, who was encouraging her two small children to feed stale buns to the ducks. She was forward and encouraging, while he was naïve and besotted. They married within the year and for a short time he was on cloud nine.

Until her first husband came back.

Bert would always remember the afternoon he impaled his left foot on a rusty nail and returned home early from work. The dog was still in its kennel, but his wife was arched over the back of their Ikea sofa, with a sweaty Minotaur drawing close to cardiac-arrest behind her. The Minotaur was a lot bigger than Bert, so he just wiped himself on the curtains, and winked before he left.

The marriage continued in a fashion, but there were more stains on the curtains, and Bert once more retreated into his work. To make things worse, the courts decided to send him six community service 'clients', who quickly converted his quiet refuge into a noisy purgatory, and set a time-bomb ticking. Most of the lads did a reasonable job, but one in particular made Bert's life hell; answering back, bullying the others, terminally idle, and genetically incompetent. He was number one in the pecking order because he'd got away with 150 hours weeding for permanently scaring a woman's face from temple to mouth. He was a first class evil bastard.

Like some people just are.

No excuses, no psychobabble, no hiding behind the curtains and brushing it under the carpet. No self-righteous twaddle at everyone else's expense. *He just was.*

Towards the end of the youths' assignment, Bert decided to inspect a flowerbed that they'd been planting out in the shape of a clock (part of the town's entry in the 'Best Kept Gardens' regional competition). He found the bully systematically digging up the flowers, and grinning widely at the pile of human dung he had left stinking at 12 o'clock. Bert charged forward and pulled the spade away, but the youth turned around and smacked him painfully on the cheek.

“Fuck off, weirdo” he spat. “I’m out of here tomorrow, anyway.”

Something snapped.

It was a nose, in fact. Bert’s block head smashed down on the youth’s proboscis sending blackheads and blood spurting all over his prickly chin, while muscular hands gripped a scrawny neck, tighter and tighter. *And tighter still.*

He had nearly killed the youth, the police told his wife later, and now he was in serious trouble. But he hadn’t said a thing since the attack, just sitting in a daze, gently rocking to and fro on the edge of his bunk in the cells. The police doctor had been called in, and then the consultant, who recommended Bert for a period of psychiatric assessment.

It looked as though there’d been a lot of anger locked up in Bert for a long time.

Like there sometimes is.

Lunchtime was almost with us, so I hastened to the dining room and switched on the monstrous aluminium machine which reheated the meals when they arrived from the main hospital kitchens. Drilling and hammering continued in the background, harmonising beautifully with the domestic’s vacuum cleaner, the radio in the small lounge, and the assorted 120 decibel statements being made by staff and patients as they talked at and past each other. Not the ideal ambience of a discrete little bistro, I observed, but any port in a storm.

“Don’t worry” said Sidney. “At least you’ll get time and a turd.”

“Beg pardon?”

“Time and a third for the extra duty this afternoon.”

He was always nearer the mark the first time.

This reminded me of my earlier tete a tete with Richard, and his strange behaviour in the upstairs office. I must have a sniff around his desk (it was the only way of finding out what the managers were *really* up to, after all).

What could it be?

Secret memo's about redundancies (please God please)? A wonderful new referral from the regional secure unit? Stealthy enquiries from the local paper? A record-breaking agency nurse account? *More staff straight from the psychiatrist's couch?*

My mind boggled with anticipation.

Kate 2005

Kate and I continued to meet after our shifts, on staff nights out and even during official breaks. The retirement home where she worked was just around the corner from the hospital, in a converted red brick suburban villa on the road to the crematorium. Her flat was even closer, and so were we.

All relationships seem to follow a mathematical curve, and ours was peaking, as we rocked and rolled, drank and drank, obliterated the past and future with explorative lust, and stole away from our haven in twilight. I felt guilty all right, but it was repressed like a pain under heroin, and I sped on, blind, eager, intoxicated, and greedy. I was bad, but not yet mad.

One evening, for the first time, we began to think of a plan. Nothing particularly critical or risk-laden – just something which would lead to a temporary escape from our beautiful cage, a touch of normality, and a taste of social life. We had often ventured to favourite pubs in unfashionable parts of town, but never before had we spent more than a few hours together at any one time. Several of the nurses at the unit had been away on courses recently (as always), and I knew it wouldn't look at all suspicious if I 'joined them' for a couple of days. Kate was due for some annual leave, so we agreed to arrange an off-season break in a small seaside town, not too far away.

The day arrived, and we drove carefully along the Jurassic cliff tops, following the grey ribbon road through undulating hills, frozen hamlets and empty holiday parks, past the flashing gritting lorries, and on towards decisions. We arrived in a squall of sleet, parked on the deserted promenade, and made our way towards the gate of a five-storey terraced house with salt flecked, peeling paint, a wreath on the door, and a beaming middle-aged lady stood at the window.

"Noo then, you've picked a reet queer time for a holiday, and no mistake. Still you'll have plenty of room" she said, as we entered.

"How many guests have you got Mrs. H——?"

"Er....now you two are here we have abahter.... er.....two" she grinned.

"The Christmas trade int what it used to be."

"That suits us fine" Kate said.

"Well, theer's your keys. I'll just let you settle in. Tea's at five."

"Thanks a lot."

We knew what would happen next, but nothing was said, as we lumbered up the four flights of narrow stairs with our luggage, ending up in the gable-ended top room, facing the foaming sea.

"God, it's cold up here" Kate said.

"Yes, I don't suppose you've got a brazier I could warm my hands on, have you?"

"Naughty boy, you know I rarely wear one."

"Titter, titter" came the onomatopoeic response.

(silence)

Then Kate symbolically drew the curtains over the view, and just sat on the edge of the big brass bed with her pink cheeks glowing and her eyes lowered, like a Jane Austen heroine on the unwritten wedding night. I needed no further invitation, and I kissed her feverishly over her clothes, feeling her serpentine shape with lavish sweeps of my hands, as they hunted for easy routes to the smooth heat beneath. There was indeed no brazier, but instead a wonderfully familiar strawberries and cream torso, sprayed with scent, and looking remarkably similar to Batgirl's body armour. She sighed appreciatively as I confirmed her contours, and then rolled easily around onto her hands and knees, encouraging me with whispered phrases, as I pulled down her ragged jeans and gently nudged an entry around her plain black pants. Like co-stars in a Michael Douglas film, we bucked and groaned, with long strokes and short minutes, perfectly united, delirious with pleasure-pain, finally spent and done. Deliciously quick.

Then the door clicked shut behind us.

Frozen in post-coital stupor, we eventually uncoupled, and discovered two clean towels outside the door; the clearest possible evidence of our shame and humiliation.

"Whoops" I said.

We hardly had the courage to go down for tea, but we needn't have worried because Mrs. H was still beaming widely, especially at the bald man with a beer pot across the kitchen (Mr. H as it transpired) who looked desperately tired, but happy enough.

"You younguns have certainly given me an idea or two, since you arrived" she winked.

After tea, it was too dark to explore the deserted shore, so we removed to the nearest bar, drank a succession of warming shorts, and subscribed heavily to the vintage jukebox in its cob-webbed, coal-black corner. Pictures of Edwardian cricket teams hung lopsidedly along the walls and obese young men played darts, while their girlfriends giggled for Britain, and a mongrel farted in its sleep, next to the blazing Yule log. A series of snorts, coughs and honks emanated from the snug, where several shrivelled septuagenarians removed mucous from their sinuses, with well-practised ease.

Notwithstanding these ambient charms, we were unusually contemplative, spoke little, and so returned early to the boarding house, where we watched an old version of 'Wuthering Heights' with Mr and Mrs H, before retiring to bed; two spoons in the centre of our big brass nest.

"Good neet lass" I said

"Good neet lad" she answered.

The atmosphere was certainly addictive.

There was a blanket of snow over the town when we pulled the curtains back. Thick, crisp and unblemished, it filled the streets and covered the beach, muffled sounds and hurt the eyes; a fine virginal retort to our sweet depravities, it seemed. But after breakfast we wrapped up warmly and ventured out, saying little again, wandering past the Sunday silent shops and empty school, around the deserted park, and down to the shoreline, where a solitary black dog barked at the sea. There we found a dilapidated shelter just below the promenade and watched the great rollers battering chalk cliffs on either side, a single amusement arcade defying logic with its open shutters, and one small boy standing outside, looking in.

We hugged each other, and Kate felt just as wonderful in her fake fur coat and bobble hat as she did in her exotic white lingerie, acquired especially for our sins.

"Where do we go from here?" she said, at last.

"You're starting with the difficult ones first" I stupidly quipped.

"I just can't see you leaving Carol and the kids, Steve."

"You know it's difficult Kate, especially about the kids."

"I know."

(silence)

"Maybe we're not right for each other, anyway" she continued "We disagree on so many things."

"Like what?"

"Well...nearly everything to do with work. You sometimes sound as though you *despise* the residents at your unit, and that can't be right."

"I don't despise them – I'm too callused to feel any emotion...."

"So you're indifferent – that's just as bad...."

"I'm emotionally indifferent it's true, but that doesn't mean I don't *think* about the situation. I probably think about it too much. I think the whole damn place is a sham and a con, and it's actually doing harm to the very people you're defending. They need self-respect, not spoon-feeding like babies....."

"But there are compelling *reasons* why they behave the way they do. Some of them come from abusing families, poor backgrounds, traumatic circumstances...."

"Yes... yes...you sound like a full-on advert for the therapy industry Kate. But for every person who blames their disordered life on past circumstances, there are many others who have experienced the same sorts of problems and lived *without* disorder. These things aren't really 'causes' at all, they're more like negative *influences* in a person's life which can be either overcome, or accepted, depending on the person's character. *That's* the critical variable.

"So, people *choose* to be mentally disordered?"

"Well, people don't wake up one morning and make a single life-changing decision to be mentally ill – of course not. What I'm saying is that *some* people end up in care because they drift through a *lifetime* of expedient decisions. They evade immediate social responsibilities so often, that they finish up either unnecessarily over-dependent, or dangerously anti-social. In their cases, the whole process is driven by *personality disorder*, not mental illness – just look through a few histories and see what I mean...."

"Oh, that's rubbish, Steve. They *do* need therapy. Medication, support, care....."

"There *isn't* any medication for the absence of willpower or conscience, Kate. That's why the existing drugs rarely 'cure' mental health problems where personality disorder is an underlying feature. And that's exactly why psychiatric settings have to *give* direction and motivation."

"These people need compassion, Steve...."

"No!" I shouted "that's just where you're wrong. They need more structure around them, a positive working environment, and less time to fixate on their own problems. They need to be part of a constructive community, not an open-ended institutional charity which effectively encourages people to be self-obsessed and asocial. Some people need to be parachuted into Africa or Iraq to see what a big problem actually looks like....."

I could see by her white face that I'd gone too far, but it was far too late to correct the mistake.

"You'll be telling me you're in favour of euthanasia for the mentally ill next, Steve."

"Under certain strict conditions, I'm in favour of euthanasia for *anybody* who's enduring a legalised torture chamber. But that's a red herring – the vast majority of mentally disordered people can certainly lead a positive life, if only we'd stop being 'saints' and genuinely encourage them."

"By 'encourage' them, I suppose you mean force them to work at something?"

"The only force necessary to get most people to work in a decent society is to give them a conscience, show them a useful goal, and withhold the soft options."

"We're never going to agree on this Steve. You just come across as being heartless."

(silence)

That was a terminal indictment of a lover.

The argument effectively ended our 'break' (or rather it began it), and in the middle of the afternoon we said goodbye to Mr. And Mrs H, and followed the snowplough home. We were too adult to sulk, but our conversation said less than our previous silences, our body language remained foreign, and our past waved farewell to our future. We kissed chastely, and looked uneasily at each other.

"I suppose that's it, then?"

"It's for the best."

Plans were those things we made to remain sane, while we waited for fate.

Back home that night, I fell straight back into the Scalextric slot, going round and round and round the circular arguments, just doing more laps

of the track because I'd been away. Falling asleep in my chair, I thought about Kate and what she'd said. I listened to the old slate mantle clock. Tick tock. Tick tock.

The Unit 2005

It was without doubt an absolutely stunning view. A full moon had appeared amongst a myriad of twinkling stars as if by magic, and the crowd were awestruck. It was of course the day of the 24-hour televised ARSE concert and Woody (Rock God) Willis had just turned his back on the audience and dropped his kegs, to the smiling approval of his fossilised chums in the vast, smug band.

"Hello, is that the ARSE donation line?"

"Yes, it is. Please state your pledge."

"I pledge never to watch this self-indulgent garbage ever again."

"Pardon?"

"And, by the way, if Woody (Rock God) Willis doesn't retire soon, he'll be listed under palaeontology, not pop."

"I'm afraid that's an ageist comment sir, and I should warn you that this call is being recorded."

"My objections are not in regard to his age directly, but rather his complete inability to sing in tune anymore."

"I'm afraid that's a slanderous comment sir and I should warn you that this call is being recorded. As a matter of fact, Mr. Willis could never sing in tune to start with."

"Well.....he never could play a musical instrument that's for sure, apart from that one time he stretched some chewing gum between his teeth and plucked it like a Jew's harp."

"I'm afraid that's a racist remark sir, and I should warn you that this call is being recorded. Now, can I have your credit card number please?"

"Is there anything I can say which *isn't* classed as discrimination and prejudice?" I asked.

"Providing you humbly accept the axiomatic *de rigueur* principle that all human beings are equally intelligent, equally talented, equally valuable, equally attractive and equally deserving – yes..... In fact, you're allowed to talk endlessly about that."

(pause)

"Sir?"

(silence)

* * *

A trail of gravy from the front door to the monstrous meal-warming machine indicated clearly enough that lunch had recently been delivered, so after twenty minutes or so of reheating it, we began our 'food hygiene' preparations. Firstly, we donned our highly important blue plastic disposable aprons, which covered about two square feet of clothing and left the rest to fate. Next, I brandished about the temperature probe to show good form, testing all the hot foods to ensure they were 75 degrees centigrade or above, before documenting the results one by one in the appropriate food hygiene file. Officially, we were ready to go, but because the food was actually scalding hot and some of the patients would have wolfed it straight down and burnt themselves, we had to add cold milk to the soup and wait for the rest of the food to cool down again. During these temperature fluctuations the food bacteria were probably increasing at bubonic plague rates, but we relied on everyone's cast iron stomachs to see us through, and remained smugly professional that the policy had been 'correctly' followed. The whole palaver took some considerable time, of course, and today I observed that all the patients were turned in our direction as though they were watching Tim Henman winning Wimbledon. There was a growing primordial tension in the room, and small hairs began to pilo-erect on staff necks.

Thank God we didn't have this performance at home, I thought. But what bureaucrat *would* run their own lives on the same basis as their organisational victims?

To avoid the impending riot, we dispensed with all further preliminaries and started to hand the meals out. Within minutes, complaints and mutterings ran around the room, two plastic bowls of soup hit the deck, and the floor turned into a mud wrestlers pit. Sidney fled for the mop bucket, and the patients launched into their daily litany:

"I didn't order this!"

"What's that?"

"Where's the butter?"

"Where's the orange juice?"

"He's wet himself. Take him out!"

"I've got too much!"

"I want a cigarette now!"

"I'm not eating that. ...Crash!"

As usual, the noise rose to a crescendo and then gradually reduced as the

patients had their precise needs met in tailor-made fashion. It was the brutal truth that tolerance, manners, moderation and consideration for others were completely absent amongst our residents, and I despaired when I thought how many thousands of times we had asked them to say a simple "please" or "thank you" for the assistance they were receiving. The problem ran deep, because their ingratitude was the result of being fundamentally incapable of grasping where the food, drink, shelter, and money in their lives was coming from, and how much effort went into its provision. Being cut off from reality in the politically correct bubble of the unit, they had little experience or conception of how food was produced and prepared, or of how hard some people were having to work in the community to pay for it, so it was perfectly predictable they would be dismissive of the end product.

At a rough estimate, each of our residents had cost the tax payer about one million pounds in a twenty-five year psychiatric career, based on the cost of psychiatric hospital renovations, lease and maintenance programmes, staff salaries, medication, transport, day to day sustenance, and welfare benefits. Given that these patients were now disengaged from any serious work based activity, and that they rarely moved out of the system, I could only conclude that our unit was probably one of the most unproductive social organisations ever seen in peace time.

A Brief History of Madness

Like many things in life, our conception of madness has depended largely on its social context. Up to the eighteenth century, religious principles were used to rationalise everything from the divine right to rule, to the waging of war, to a bad harvest - so mad behaviours were typically seen as some form of devil possession. Minor disorders were effectively obscured (or neutralised) by the rigid routines and heavy demands of feudal society, while major disorders would lead to brutal suppression, home confinement, or early death.

By the 1800's, science began to seriously challenge religion as the primary source of wisdom. Contemporary scientific theory suggested that madness was probably the result of genetic inheritance, disease, or atavistic tendencies. For these reasons, the segregation of 'mad' people in special hospitals was recommended as a way of reducing the risks of interbreeding, contagion and poor example. Larger madhouses were established to contain the growing numbers of 'lunatics' who were no longer sheltered by their increasingly mobile and fragmented families, flocking to the cities and towns for work.

In the period 1850-1900, local madhouses were largely superseded by regional asylums which were basically medical institutions, offering a mixture of rehabilitation and custodial cares. Many remained punitive and repressive, while others offered a more humanistic environment based on the developing liberal and socialist tenets of the day. Indeed, the humanistic movement steadily improved the psychiatric hospital system up to the 1970's, when liberal *individualism* began to eclipse the more communal principles of socialism. Asylums were then condemned as Victorian museum pieces, and community care for the 'empowered' individual became the clarion call.

The rest (so they say) is history.

But not the future.

The staff were not entitled to a free meal, even though barrow loads of food were thrown out every day (and trolleys full of delicacies were constantly being pushed past the unit on their way to the managers' meeting room), so we stood drooling like Pavlov's dogs while the patients proceeded. Food began seeping out of loose mouths, discolouring chins, running down the front of shirts and plastic aprons, and spilling onto the floor. One man filled his mouth so full that his jaws couldn't get purchase to chew, while another furtively concealed chips and gravy up the sleeves

of his jumper for later use. Bert sent his false teeth spinning across the table as he sneezed full in the face of his neighbour, and Cecilia left the room altogether, leaving her first two courses to go cold, while she went for a cigarette, or a half hour nap. She would of course be livid if the food was mistakenly cleared away or seized by another patient, so I cautiously returned it to the monstrous warming machine for safe keeping. In so doing, I burnt my hand through the threadbare oven gloves, but this was a small price to pay for avoiding the bulging eyes, pinpoint pupils, crimson face, and shaking body of the agitated resident who had mislaid the remains of their meal.

When Cecilia returned, she looked rather piqued that the usual trouble had been circumvented, and so began instead to eat and shout at the same time, covering her neighbours in half-chewed sausage meat, and propelling a large piece of mucous from her nose onto the plate. It was a nauseating display, but I had seen similar things so often that the hideously abnormal had long since become the tediously normal, and I was certainly powerless to change it. After awhile, we began clearing up, and I noticed through the corner of my eye that a third of the patients had now moon-walked through to the kitchen where they were happily supplementing their three course meal with the contents of a ransacked fridge. Clearing them out with a good dose of non-politically correct impatience; I decided I was overdue for a break. The man on the kitchen radio said:

“A long serving teacher killed herself three days after being suspended for allegedly smacking a pupil who repeatedly kicked her during a lesson.”

“Turn off that crap...er...tap” roared Sidney.

A week of shifts in psychiatric nursing was like a Westminster eight-day clock, where some mindless giant wound up your mind, tighter and tighter, until it didn't seem possible that the spring could withstand any further punishment. I had reached that point now, and desperately needed the thirty-minute break we were legally entitled to, but usually added to our 'time owing' book. I was inevitably pursued by three patients variously wanting cigarettes, indigestion remedies and an audience, but I marched assertively to the office and handed the keys firmly across the desk to Richard. Or I would have, if he hadn't been practising his golf swing in the corner of the room, dressed in open-necked shirt, paisley cravat, tartan tam-o-shanter and plus fours.

“Richard, could you keep an eye on things for half an hour, please?”

"Hmm....hmm...I suppose things are well in hand, but....."

"Thank you."

"Well...er...I should really be finishing these new tai chi exercises to reduce my stress levels, you know."

"I'm sure you'll find time later" I said. "And don't forget to pick up that boiled egg under the desk – it seems to have rolled into a plastic beaker."

"Hmmmmm....hmm...oh...thank you."

"By the way." I said, glancing at his unusual threads "I thought you must have come incognito today."

"Steven, I don't know anybody of that name. I don't know any foreign ladies at all, and if I did I would use coitus interruptus. Now please leave the room."

"So, you aren't wearing golfing attire then?"

"Absolutely not. I've just dressed casually in preparation for the annual ARSE barbeque this evening. We've organised a *happening* in the park."

"Isn't that where people walk around dressed as clowns, monkeys and superheroes in order to save the world?"

"Your cynical observations couldn't be further from the truth, Steven. We chant and rant too."

"Of course.... I stand corrected."

(pause)

"Does ARSE have an holistic approach to solving the world's problems?" I enquired.

"But of course. Why do you ask?"

Leaving him then to negotiate with the three patients from the dining room, I sprinted down the corridor towards a far off, little used lounge, ignoring the hammering workmen, the vacuum cleaning domestic and the chiselling engineer who had just arrived to release a patient trapped in the downstairs toilet. Like a daredevil rider hurtling through a tunnel of fire, I fixed my mind on the objective, passed the tongues of stinging flame, and leapt into my glorious bolthole, breathing sighs of orgasmic relief as the door slammed safely shut behind me. Selecting a rare chair which had been spared brown skid marks, I turned up the radio, double-locked the door and picked up a newspaper. The front page had been obliterated by some kind soul who had scrawled "bog off" all over it, but I soon discarded this sheet and began to peruse.

A blind man had supervised his one legged provisionally licensed son on the motorway, and the E.C. had issued guidelines to schoolchildren on how to eat a carrot safely. £10,000 had been awarded to a lady who had tripped over her own feet in a supermarket, because she was distracted by the bright lights and garish advertisements. Somebody had applied to university as 'Mr. Michael Mouse' and even though they had no formal qualifications, they had been provisionally accepted. A man had stopped collecting lawnmowers because his garden was so full of them that he couldn't get to the grass to cut it. Another had just started to collect Concorde engines. Women were waiting until they were over thirty before having children, and men were waiting until they were over thirty before leaving home for the first time. Some youngsters had trashed a skateboard park, a playground and a sports centre, because there was nothing for them to do on the estate and they were bored. The University of Little Fryup was offering courses in Tuck Shop Management, with guaranteed first class honours degrees for the first fifty applicants. A group of WRENS had objected to wearing hats with the badge 'HMS Impenetrable'. A rare fork which had been used to eat missionaries had come up for auction. Dummy television cameras were being installed in some churches to encourage attendance. Young men on benefits were being taught how to get up in the morning. A man had 'phoned 999 because he'd run out of cigarettes.

The asylum had indeed been turned inside out.

"Knock! Knock!" came from the lounge door.

"I need a cigarette now!" roared a voice on the other side it.

"Please see the other staff, I'm having a break!" I shouted back.

"I'm going to discharge myself!"

Turning on the T.V. set, I found an interesting quiz programme about identifying strange antiques. Somebody was asked about a piece of ornate pottery, and after toying with it for a few moments, the contestant said: "Would I drink from it?"

"You might do" said the questioner "but it's a spittoon."

Another contestant said that they liked a beautifully carved Victorian commode, but they "wouldn't know what to do with it", and somebody with piggy eyes brought in a painting to sell which had been in the family since 1760, because he wanted to "have a good night out" with the cash. Indeed, most of the sellers wanted to transform their family heirlooms

into either "Disneyworld" or "a cruise", apart from those with a very well developed sense of history, conscience and family honour who just wanted their Grandma's necklace "to go to a good home". It reminded me of one of my colleagues who had the same perspective on Grandma herself ("she needs to go to a new home where experts can properly appreciate her"). "What do you do for a living?" the next contestant was asked.

"I'm a student" came the reply.

"Oh, right. Studying which subject?"

"English."

"Really?"

"Oh, aye. I'm doing me Masters, like."

(silence)

Finally, a rough looking bloke with sandpaper chin, Z-shaped scars and crew cut came on the show, carrying a 1960's Mickey Mouse alarm clock. The expert, who modestly understated his vocation by wearing pince-nez, a silk cravat, fob watch and spats, looked at the clock and said.

"What a fine example of American kitsch and post-war popular culture. If it still had the hour and minute hands it might be worth £30 in auction."

"*What!*" gasped the man.

"Yes, yes" drawled the expert, in a well-practiced condescending manner.

"I can understand your surprise."

"*You bet I'm fucking surprised you fucking tealeaf!*" said the man, grabbing the expert by the throat. "That clock's a fucking family heirloom – it must be worth a fucking fortune. Get your fucking money out."

"Oh...goodness gracious...well...I could possibly revise my..."

On another channel, I found thirty neurotic people raving in a studio about Viagra and facelifts, while a smirking demagogue told them where they were going wrong. The audience all came to blows, shook hands, and trooped off grinning at the cameras. This was followed by a repeat series of 'Missing Link', the popular general knowledge quiz show, where today the contestants' specialist subjects were 'Fred Flintstone', 'welfare benefits since 1948', 'the sociology of rap music', and 'me'. The news bulletin had been cancelled completely, because all the reporters were in Florida bravely covering the heat wave, and all the newsreaders were in rehearsals for celebrity dance shows.

Decide where you want to travel and what political message you want to impart, then design the news around that. Nice job.

I sat back and chewed my dog-eared sandwich, wondering vaguely whether I was breaking a local by-law by not having a conservatory yet. It was probably all right, but I might need non-planning permission, and the neighbours were almost certain to object. Unlocking the door, I girded my loins, straightened my back, squared my shoulders, gritted my teeth, and held my head high.

"I need a cigarette now!" yelled Hettie, who had obviously been standing outside the room for my entire break.

"Follow me then" I said - my head reassuming its habitual position on my breastbone.

(silence)

I was just about to enquire why she wasn't discharging herself, when I saw one of our cleaners, on a chair, examining one of the new wall-mounted deodorant sprays. They were natty little gismos that periodically pumped out an antiseptic mist into the atmosphere, and could be electronically re-timed. This particular one was malfunctioning and, just as the domestic was explaining the problem to me, it exploded into life and spat a globule of odour neutralising chemicals down her throat.

"At least there's no need to enquire whether you spit or swallow" I commented.

I gave Hettie her cigarette, and decided to go out for ten minutes of fresh air. The short walk to the high street was hypothermic rather than bracing, but a change was as good as a rest and I strode on toward the cash point of a nearby bank. A man stood immobile in front of the machine, his arms slightly bowed away from his body and his legs well spread like a western gunslinger. After a minute or so it became obvious that this was not the usual convenience banking malfunction, but instead an episode of temporary Parkinson's paralysis. I waited, and eventually he moved forward with a coarse tremor, struggled painfully with the auto bank buttons, and removed a large wad of twenty-pound notes from the dispenser. He then returned to his Rover, used the wing of a new Mazda RX8 as a handy doorstop and drove away in warp drive, while his large putty-faced wife stared ahead and ignored the protests of an old man in tired boots. This was a fairly typical scene in our retirement town, and I wondered if 20 years of putrefaction and the startling polarisation of pensioner wealth was really the accomplishment our welfare state claimed. A scruffy man-boy ambled by with his index finger inserted half way into

his ear, apparently playing a medley of hip hop tunes with the wax. The pavement was a casino of old chewing gum and spat phlegm; stick or twist. That was your choice.

The Dropout Centre

This place was so popular that a long queue always formed outside the front door before it opened at 9.00 a.m. The patrons were a liquorice allsorts brigade of red-faced, middle-aged men, young mothers, sullen youths with dirty university t-shirts, and those best described as Star Wars extras. The red-faced men generally congregated around the centre of the main room, discussing Iraq, sport and the Irish question in extremely loud voices, while the less red-faced read newspapers on the periphery. One man always selected the 'Daily Mirror', and then walked out with it through the side door.

The youths sat in a purple room, posting CD's and DVD's into the various slots which surrounded them, ready for an hour or two of electronic oblivion, while the young mothers quickly unloaded their offspring into the nearby nursery, and headed for the shops. Today, a man who looked like an amoebic Charles Manson opened a brief case full of computer games and booked himself onto work station number 7 for five hours, as a harassed member of staff tried to explain to an itinerant, wild-eyed psychopath that the world wasn't perfect, and he might have to take no for an answer.

This place was reputedly the public library.

I wandered on past the usual row of people on a pigeon-stained bench watching their lives go by, the greengrocer cracking jokes with his regular customers before turning back grimly to his cold shop, and three pensioners dressed as American children, pushing prams. A germ factory made a beeline towards me, coughing like a bazooka at everyone in his path, while the hive itself buzzed and droned without obvious product. Alongside the parking bays, stood an arms-crossed know-all; waiting for his daily

dose of driving errors and the opportunity to shake his head so sagely (one day he would learn to drive and show them all how it was done properly).

But suddenly he was galvanised into frantic action, hopping from foot to foot, with his arms swinging in unison, like a zoo-mad orang-utan waiting to be fed with cherries. Bessie Bunter in a surgical neck brace had appeared, trying to reverse her rusting Transit van with no mirrors into a tight space between two glittering 30k limos:

“Put her in reverse now” he shouted “.....that’s it.....left hand down a bit.....right hand up.....that’s good....good.....give a bit of welly now....”
“Just mind you own bloody business” said the heavy petting couple in the Deli doorway. “We don’t need *your* effing advice.”

I would have liked to put some coins in the plastic R.S.P.C.A. model dog outside the butchers, but I didn’t have my gorilla suit with me and there wasn’t a T.V. camera in sight. Nor did I particularly want my head shaved, chest waxed, or buttocks submerged in baked beans before parting with my 50p, so I left it all to the experts, and thought about the old Philips screwdriver I used to rake out dog shit from my hiking boots.

Pear-shaped people with pear-shaped lives jostled each other off the pavements, determined to be first in something, while the 18-30 group capitalised on a half hour break in the November clouds to model their shorts, T-shirts and sunhats, amidst the midday frost. An airship appeared around the corner, arms and legs set at 45 degrees to reduce friction, and from the opposite direction rumbled a stocky harridan bent low over her personal empty supermarket shopping trolley with elbows surgically attached to the handles, like a Dalek without the clothes on. This was the clash of the Titans, the irresistible force meeting the immovable object, and the rematch of King Kong and Godzilla all in one sideshow. I stood *well* back as a massive crunch echoed down the street, and a baying crowd gathered. No need for the dancing bear these days.

Roll up. Roll up. Look at each other.

In the post office window ‘A mature, large lady willing to body massage clients in their own homes at reasonable rates’ now recommended herself before me, while in the reflection of the window a familiar figure sashayed towards a nearby car park. Half turning, I observed *Carol* pulling herself into the passenger seat of a delivery van, while a nice young man in

Rupert Bear trousers chivalrously assisted her; his right hand tightly clenching her left buttock.

"Hee hee hee!" she giggled, as the young man proceeded towards a full *per rectum* investigation, and then drove off.

Too stunned to think, I filed this interesting information under 'B'; and walked towards the unit. The germ factory had met a coughing machine at the 'bus stop and they stood toe-to-toe like bare knuckle fighters in a barrel, spraying murderous salvos of pathogens at each other's numb and uncomprehending faces.

"Forty-thirty" I scored on the way past.

Or did they prefer the quiet of a championship snooker hall, like most habitual coughers?

With the cage doors swinging open, I walked through a zoo at midnight.

It's a Mad, Mad, Mad, Mad World

The sun is in your sign and nothing can stop you. Venus turning retrograde may cause snags and hold-ups. Property prices are set to rise 5% over the next year. Property prices may crash next year warns academic. Weather conditions are rather changeable at the moment with showers and sunny spells in most parts of the country, but with some exceptions. Most people hope to retire early and enjoy the good life. Unemployment in your 50's can double the risk of strokes and heart attacks says recent study. Too many cooks spoil the broth. Many hands make light work. Older couples are now often forced to stay together for financial reasons. Many over-50's feel empowered to divorce their partners and start a new life. Parents should ensure that all children eat five portions of fruit or vegetables each day. Pesticides found on all fruit and vegetables in schools says health watchdog. Avoid stress. Keep busy. People will be flooding the sun hotspots this weekend. Skin cancer toll rises.

Circularity, conflict and contradiction.

The dope of our times.

We believe everything and trust nothing.

I did the lunchtime drug round and went upstairs to check the bedrooms, glancing in the laundry as I went by. The machines were rumbling on as always, with a never ending supply of wet and soiled linen, clothes, slippers and cushions piled around them like sandbags in a flood. The machines had taken six weeks to install and were now worth their weight in gold, but in the interim we had been forced to transport four sacks of brown and white laundry a day to the local launderette. This no doubt further endeared us to the local populace who were already concerned about their property prices plummeting.

Richard emerged once more from the staff toilet (his second office), this time holding a large print edition of Jane Austin's 'Persuasion'.

"Ah.....my dear fellow, well met. Do I detect from your mien, a certain *ennui*? May I, without further dissembling and procrastination, be so bold as to recommend the waters at Bath? My dearest mama swears...."

"Are you saying I stink of piss?"

"My dear fellow...."

"Richard, will you *please* return to the pump room."

"B-b-but, I'm due to see Fanny at noon."

"Well, if you took my advice you'd ditch all those porno tapes, before the cleaner starts gossiping."

I knocked on one of the bedroom doors two or three times, and heard the inhabitant say:

"Who is it? Get lost you bloody bugger!"

After long negotiations, I was allowed in, and my eyes travelled around the room looking for hoarded foodstuffs. Primrose was notorious for secreting eatables about her person at meal times, and then depositing them in various places around the unit, including positions behind curtains, in plant pots, under her bed, behind radiators and in her chest of drawers - sandwiched between pairs of clean knickers. On one occasion a dreadful, unaccountable smell in the small lounge was traced by the domestic to a

decomposing heap of food behind the piano, including yoghurts, sweets, chocolate, crisps, cake, and half a battered fish with attendant bluebottles. Today, I could only find a bunch of six bananas in the wardrobe, but I cast an affectionate eye over the wine gum which had melted on top of the dressing table years ago, and was now a baked on part of the wood's patina. There was always a mysterious yeasty odour in the air, and being aware of cocaine smuggling methods I investigated no further.

"Bugger off" she said amiably, as I departed.

The top floor was unexpectedly clean and tidy, and as I strolled about I recalled how staff and residents had tried to 'personalise' the bedrooms over the years. Some remained entirely featureless because the patient had been so damaged by their disorder that they had virtually no personal interests, pastimes, opinions or sense of self. In these cases, staff had tried to personalise the room in keeping with the patient's known employment and family history, but it was still an imputation of the patient's interests rather than a genuine expression of them, and so it always seemed a little sad to witness it. I visited one such room, where a man who'd lived through World War II was surrounded by faded reproduction posters from the period, Vera Lynn records, and lots of model tanks and aeroplanes. This may indeed have triggered his memory and given him back a sense of personal meaning, but I suppose it was just as likely that he'd rather forget the war (and his non-combatant role in it), or that he'd prefer something more up to date now, or that he was pretty much oblivious to it all.

"See you later, David" I said.

There was no immediate reply, but his Adam's apple wobbled up and down his long, thin neck like a bingo ball stuck in its chute, his domed head assumed an affected pose to the left, and his wise, mocking eyes observed me from the bed. A rambling mantra of circuitous remarks and well-rehearsed fiddle-faddle then followed, and I found myself edging slowly, involuntarily, towards the door. Painstakingly tangential in everything he said and did; his behaviour was a perfect antidote to the rational world he feared. An artist in his dotage, he lay back and sighed.

Yet for some reason David always reminded me of the old chap I'd seen on T.V. who was so lonely after his wife died, that he regularly engineered the company of local antique dealers who came around to buy the few bits of bric-a-brac he had left in his run down maisonette. He'd even sold

his own bed and, because he wanted to preserve his deceased wife's bed untouched, he was left spending every night propped up in a chair. He was last heard of trying to interest the dealers in his oak floorboards. It was disturbing to think how many tortuous little worlds existed just below the surface of our glossy bourgeois lifestyles, half-civilised manners and smiley badinage. Worlds which were carefully repressed until teatime, and then explored with virtuous vigour by familiar television faces; cameras zooming on the tears.

Worlds which waited patiently to discover us.

Although some of our patients were too fragmented by their illnesses to be seriously interested in personalising their rooms, others took it to the opposite extreme by *filling* their personal space with shed loads of jumble, clothes, toys, pot plants, and entertainment systems. They were possibly the true products of modern community mental health care, because they had quickly become 'empowered' individual *consumers*, without being remotely interested in the other aspects of capitalist society; individual effort, competition, productivity and wealth creation. This was perfectly understandable, of course, because they were terminally de-motivated by receiving lifelong state benefits, and generally ill-equipped to compete in the open job market.

In effect, care in the community had completely distorted the patients lives by exposing them to an inappropriate and mystifying system, and by leaving them with little choice but to engage in self indulgent 'retail therapy', or to sink into a continuous vegetative state. One patient had literally filled their room from floor to ceiling with white elephants of one form or another, eventually needing a further room to store the excess, until fire regulations were employed to authorise a clear out. Within weeks the mountain was reappearing, and the patient was seen depositing a perfectly good hi fi system in a nearby skip, so that he had a 'good reason' to buy another. He invariably went shopping by taxi, and sometimes asked the drivers to collect items he had bought earlier, including on one occasion a stuffed moose head and a gigantic doll. These arrived at the unit during one of our official inspections, sat together on the back seat of the cab (total fare £9.50).

Other patients would get through a personal stereo a week, buy roller blades they couldn't stand up in, eat themselves sick on gigantic bars of

chocolate and family sized bags of crisps, or buy expensive items of jewellery which they sold a week later for a tenth of the price. Second hand shops around the town were doing a roaring trade, applying a 100% mark up or more as soon as one of our more gullible souls walked across the threshold. Some patients regularly borrowed money off their wealthier friends in private sector mental health accommodation, where a disposable income of £150 a week was not unknown.

This was serious expenditure conducted by enthusiastic people, but as soon as the money ran out they could not be roused before 10.30a.m., spent hours in bed during the afternoon and were in their pyjamas or nightdresses by 7.00p.m. claiming to be 'worn out'. They would often cut short organised activities such as occupational therapy or day centre attendance with a tantrum or 'dizzy spell', to be discovered later sleeping on the nearest sofa or dancing frantically to personal stereo music. Some tried to spend all day in their dressing gowns, like a team of Oscar Wilde look-alikes composing their next plays. One patient regularly went out through the front door to attend training sessions, only to return minutes later through the side door and go back to bed again. Staff thought they had overcome the problem by checking his bedroom a quarter of an hour after he had departed, until they discovered that he was sneaking back and sleeping in somebody else's bed instead, or in the broom cupboard. *It was almost impossible to keep some residents out of bed, and even when this was achieved, they would often sleep instead on settees, in the hospital grounds, in local parks, or in obliging drop-in centres around the town.* I once made the fatal mistake of trying to motivate a particularly shrewd veteran patient by exploring his interests.

"Do you like going for walks, Tom?"

"No."

"How about reading?"

"No."

"You do like T.V., though?"

"Not really."

"Did you have any hobbies when you were younger?"

"No."

"What did you do with your spare time?"

"I can't remember."

"Would you like a game of dominos now?"

"Maybe later."

"Would you like a ride out in the car?"

"I don't know."

"Is there anything at all you like doing?"

(silence)

"Come on Tom, really think about it."

(more silence)

"I'm afraid I can't go until you give me a reasonable answer."

(shrugging)

"Come on, there must be something."

"Er.....um.....well..... I do watch the radio sometimes."

This was a fairly extreme case of 'blanket' de-motivation, but even those residents who were alert, energetic and interested when pleasure-related subjects was mentioned, were equally lethargic, evasive and disinterested when responsibility-related subjects were at issue. One gentleman was totally deaf when you wanted him to get a shave or change his clothes, yet the first out of the starting blocks when an outing was suggested. Another was too 'ill' to attend a training session, yet well enough to eat four chip sandwiches and two cream cakes half an hour later. Formal assessments always confirmed this strange dichotomy, but the unit was incapable of redressing the balance because staff simply didn't have the expectation that longer-term patients *could* contribute to their own welfare, even though the old asylum system had clearly demonstrated the reverse.

Such is 'progress'.

"Bzzzzz" went the doorbell.

"I've just come to check for radon gas" said a turquoise-coloured man with Geiger counter type equipment, rubber boots and log book.

"By all means" I said. "Please join the club."

"Club?"

"Yes, we now have almost the entire rainbow of overalls present on the unit. I'm expecting orange to arrive any minute."

"Yes" he rejoined. "That'll be Chris with his new door locks."

"He's due to give a *presentation* actually" the man added.

"A *presentation!*" I gasped. "What's the subject?"

"Er....I don't know really.... But that's not the point is it?"

"True, true."

I found myself imagining the place where all these workmen mysteriously went. Presumably they disappeared down a big hole in the back of the unit, like Alice in Wonderland's rabbit, and emerged into some surreal world, where fantasies cleverly demonstrated the truth.

No doubt there would be subdued lighting and brass incense burners, a Wurlitzer jukebox playing 'Part of the Union'; a snooker table and fully stocked bar, a giant plasma T.V. screen showing 'King Dong'; attractive ladies wandering about in fishnet tights and guinea pig outfits, and the men themselves sprawled on sofas drinking frothing ale from pewter tankards and wearing ten-gallon cowboy hats. A clapperboard would probably appear, and a man with an American accent would shout:

"Action!"

Instantly, the workmen and their friends would assume advanced positions of the Karma Sutra, rhythmically changing partners to the sound of a dinner gong. A full gamut of gasps, grunts and wails would then ensue, before the Bacchanalian tableau collapsed in orgasmic splendour around the centre of the room, allowing our Locality Manager to stumble from the dust with a tiny acorn in his hand. The American director would boom:

"That's a wrap!"

Well, these people must be somewhere, doing something.

Moving on down the corridor, it occurred to me that Richard had disappeared to one of his 'meetings' (i.e. chin wags with overpaid cronies or new shapely secretaries), and this was an ideal opportunity for me to investigate the bulge and television incident I'd witnessed earlier in the week. Tiptoeing into his office like Inspector Clouseau walking on rice paper, I immediately spotted the tiny red glow of a video 'on' switch cutting through the gloom of his heavily curtained sanctum, arming me with uncanny intuition. I pressed the 'eject' button and was not in the least surprised to see the noble title 'Moby Dick III – The Shagfest Continues' slowly appear from the machine's hot interior, confirming my worst/best suspicions.

"Bang! Bang! Bang!"

"I need tea now!" said Hettie at the door.

"Follow me then" I said, quickly putting away the smoking gun in the nearest holster.

"I'm going to...."

"Bzzzz. Bzzzzz."

It was the 'phone again, but only the Locality Manager wanting "vital"

bank nurse figures for 1979, so I put this in the diary for tomorrow (when I had a day off), and returned upstairs.

A number of residents had crept back to bed after lunch, and I had to brave a battery of objections and excuses before they would reluctantly agree to pay lip service to their care plans, even if these only recommended socialising in the T.V. lounge. Checking inside the wardrobes and beneath the beds for those who were astute enough to play hide and seek, I reflected on how much easier it was to let the residents have their own way. They were extremely persistent in their evasive tactics, and could be both manipulative and aggressive in the pursuit of their objectives. Small wonder, therefore, that the staff often played into their hands by actively colluding with the patients' hedonistic tendencies. Visits to seaside ice cream parlours and fish and chip restaurants, for example, were usually very popular, even though some of the patients were massively overweight and had diet care plans, while 'social evenings' with plentifully flowing wine and lager were equally popular for comparable reasons. Similarly, the daily fixation with television was rarely challenged because staff also liked to spend their time watching football and soap operas, as well as endlessly prattling undercover of repeat films and newscasts. Even when the patients remained square-eyed in front of children's television, this would still be perceived as a useful distraction from more disruptive activities.

Conversely, when social skills, domestic skills, gardening or personal hygiene interventions were suggested to the residents, these were almost invariably greeted with sabotaging tantrums, increased 'delusions' or mute unresponsiveness; so it was not entirely surprising when staff started to take the easy options themselves. *This was the point that the unit had reached meltdown; where the day-to-day collusion, the mirror-like reflection of staff-patient lethargy and self-interest, and the obscuring of all things with worthless paper work, had murdered the unit stone dead.*

"A man of 35 who has never worked complained yesterday that the £30,000 he received each year in benefits was insufficient for a proper family holiday. He complained that this was a major abuse of his human rights, and was considering an appeal. His father, who is also unemployed, said his son was unavailable for comment, because he was resting."

"I wish somebody would turn that radio off!" I shouted down the corridor. My head throbbed again, and for a few seconds I felt strangely disorientated, as the hospital colours swam around me, and an eerie

whispering filled the corridor. I was unaccountably tense, and I instinctively turned towards the bathroom for a moment's peace and quiet. At first this helped, but then the room began to turn and warp, a growing tide of nausea threatened to engulf me, and.....

"Bang! Bang!"

A sudden tattoo on the door brought me back to my senses, and as I stumbled across the room to see who it was, the door opened.

"Oh, there you are" said Sidney, looking at my white face. "Are you feeling shite...er...alright?"

"As always, you got it right the first time" I muttered.

"Ah...well...cheer up.... I've made some 'soup for a mug' downstairs if you want it.

"You mean 'soup *in* a mug'?"

"I know what I mean" he answered.

(pause)

"It's cock-a-leekie I assume?"

"What else, old mate?"

I really had to get out of this bloody awful place. It was just a shift work version of Hades, and yet the chains were so very strong. The chains of age, mortgage, kids, habit, fear, convention, and marriage.

That reminded me.

What was Carol doing with the van driver?

Llewelyn

1964

It was his first day at secondary school, and Llewelyn trudged down the road under the open scrutiny of his neighbours, who lined their windows like Angels of Death as he passed before them. He was resplendent in full kit, including dark green blazer, green and yellow striped tie, sticky white nylon shirt, grey short trousers and a large green school cap. He carried a brand new brown leather satchel, containing propelling pencils, a Parker cartridge pen, one 12" ruler, a protractor, three rubbers (not the barber's sort), a compass and his Dad's old slide rule. In his blazer, he had two Blue Ribbon wafers with twisted ends, a gigantic biro which had seven different ink options, and a large white handkerchief with one post-breakfast bogie already encrusting the centre. He was probably ready for anything, but he felt more like a self-conscious prat.

And he was.

He didn't see anybody at all for the first quarter of a mile, and this gave him time to relive the nightmare of choosing his uniform. His mother had received a number of welfare vouchers which could be exchanged for the requisite clothes at recognised retailers, and she intentionally chosen the swankiest shop in town to begin her search. The shop staff were absolutely askance when his mother flourished the vouchers in front of their toffee noses, and they made her pay for her unprecedented audacity by encircling Llewelyn as if he were an exhibit in a penny museum. His eggshell shyness did not respond well to this ordeal, and he would always remember those twenty long minutes trying on different sized garments, while his chubby face went explosively crimson, his puppy fat bare legs trembled for release, and the rows of soulless eyes silently ridiculed him.

But the summer holiday as a whole had gone quite well, probably because he knew it was his last one before the 'big' school and he had to make the most of it. He'd regularly walked down to the foreshore, through the museum gardens with their meandering paths, Victorian drinking fountains and stone built Regency Halls, past the parked Ford Zodiacs, Sunbeam Rapiers and 2 stroke Saabs, to the clamorous world of amusement arcades, deck chairs and shell fish stalls. Indeed, over the six-week break he'd managed to accumulate £6. 10s. 6d. in pennies

and three penny bits by skilfully playing the fruit machines and discovering their secrets.

In between these profit-making activities, he managed to keep sporadic contact with one or two friends from primary school, and they spent some quality time sailing model yachts on the local duck pond, rolling Corgi toys in the gutters, burying treasure on the beach, and digging pits for visitors to fall into. He kept one set of Corgi cars in their original boxes, wrapped generously in tissue paper and buried deeply amongst his string vests in the chest of four drawers. They received a pious yearly inspection, and were then sold for a song in 1984 to fuel a transient interest in Yoga books.

For his birthday he received a 'Binatone' transistor radio which boasted three wavebands and over a hundred stations from all over the world. This was entirely true, but two or three stations invariably shared the same position on the tuner, so he always listened to the new Radio One on a background of German news broadcasts and distant classical music. It only added to the thrill, however, when he first heard 'Nineteenth Nervous Breakdown' by the Rolling Stones; its throbbing base line cutting through the white noise and wavering foreign tones, like a fall of mortar shells.

Mad Dogs and Englishmen...

The town where Llewelyn lived is said to enjoy one of the best views in Europe, as the bay sweeps around golden sands, fading Victoriana and a colourful harbour, towards the most magnificent, towering headland, and its Neapolitan reflection in the rock strewn sea beneath. There are many vantage points to the south, including dozens of oak benches dedicated by past visitors, and a variety of shelters with strange oriental embellishments.

But as the years passed by, Llewelyn noticed how quickly people turned away from the wonderful view, and reverted to observing each other. They rested their backs on the cast iron railings or perched at right angles on the ends of seats, and watched ordinary

human beings walking by. They watched and they watched, and they watched.

In fact, one day a middle-aged couple hauled a heavy steel bench completely around, so that they could ignore the annual regatta, and monitor the patrons of a nearby café.

People were unnaturally sociable, Llewelyn thought.

“Oi! Look at this! It’s Andy Capp!” commented some eloquent intellectual behind him, breaking into his reverie.

“Bloody hell! He looks more like Andy Pandy with that haircut.”

It was Llewelyn’s first contact with the older boys at the school, and for a further ten minutes he gritted his teeth as the pithy insults followed him down the road towards the winding school drive, and his stomach churned. By then, other victims had come into view and he was able to hide gratefully amongst them as they all slid down the hill like an unstoppable green anaconda on its way to the jungle. He spotted a few familiar faces in the yard which helped to calm his nerves, but his fried bread breakfast came back to haunt him with a vengeance when the bell went, and his leaden legs turned involuntarily towards the big, arched door.

They filed up the worn concrete steps for the first time and the new boys sat cross-legged on the ancient parquet floor of the assembly hall, while endless hordes gathered behind them and the teachers mounted the dais in front, exhibiting their weird sideshow variations. An aggressive man who looked like a cross between Benito Mussolini and Groucho Marx then silenced the whispering mass with one rabid look, and Llewelyn’s first day at secondary school had begun.

The premises had originally been used as the Boy’s Grammar School, but a 1960’s modernist glasshouse now had that privilege, leaving Llewelyn and his fellow morons to take over the stage. It was really a bigger version of the primary school, with Victorian redbrick gravitas, soaring Gothic arches, flag poles, sash windows, green slimy outside toilets and a mysterious frieze running along the front of the building which served to trap wayward tennis balls. The population included most of the local council estate boys, and a number of notorious miscreants from the nearby care hostel for

'difficult children', who hung about in non-regulation bright striped blazers like felons in a rock breaking yard. There were three vicious fights on the first day of term (old grudges by the look of it), and Llewelyn noted how quickly the other boys packed around the combatants ten deep to ensure cowards could not escape. The routine noise and brutality was appalling. After the assembly, Llewelyn clumped up to his appointed classroom, occupied one of the tiered wooden desks, and inspected its contents while he waited for the master to arrive. There was a multifarious collection of grimy reading books, old rulers with bits chewed off, broken pencils and sweet wrappers. This particular desk had a remarkable green and yellow collage plastered under the desk lid which rather mystified him, until the boy who shared the double desk told him that his brother used to empty his nose onto it every morning for four years.

"Jacklin."

"Yes sir."

"Jessop."

"Yes sir."

"J——."

"Yes sir" Llewelyn replied.

There were to be about 750 calls of the morning register during his stay at the school, and that was as near as any of them got to a conversation in lesson time. There were no sophisticated seminars or tutorials in those days, only direct teaching followed by questions and answers to assess retention, but then they all shared the ridiculously old-fashioned view that the teacher would probably know more about his specialist subject than the witless pupil. Their form master was both good-natured and able, only bridling when they corrupted his name (Aubrey) to 'Strawberry'. In order to minimise his exposure to the cutthroat playtime society, Llewelyn enrolled at the library, signed up for the chess group and assessed the lower playground for quieter areas. 'Strawberry' appreciated his perspective straight away and encouraged his scholarly pretensions throughout the four years he spent at the school; kindly calling him a "slow developer" when he failed the '12 plus'. Beyond school, his semi-detached relationships continued as before, and for a while his studious nature was almost threatened by associations with a few anarchic elements. One 'bad' lad was banned from calling for him at home, so they arranged a bizarre alternative whereby the friend would stand at the end of Llewelyn's street

and give three long blasts on his dad's bugle. He knew, of course, that he wouldn't have to pay the ultimate price for his growing delinquency because the death penalty had been abolished in 1965 (and anyway he was now the school chess captain).

His sex education continued unabated, and on one occasion his nefarious friend asked him if he "ever got a bone in it", before they resumed their karate chopping of some discarded tiles in the undergrowth. He later showed Llewelyn some nude women in a dog-eared, stained magazine, and explained that their completely smooth nether regions 'were filled with wax' to outwit Mary Whitehouse and the censors. By 1968 Llewelyn's plodding studiousness finally prevailed and he was given a second class passport to do his 'O' levels at the local 'Tech'.

But by then more important things were happening at home.

For a while, his mother's frightening monthly rages continued, and he could clearly recall being locked in the shed at the back of the house, while the young seedlings he'd been cultivating indoors were being flung into the rockery. She habitually regaled people with extravagant stories about his idleness (he didn't do enough gardening she said), the disgusting state of his underpants, and his disloyal nature. Even the man who collected their monthly insurance premium was not spared the full, unexpurgated account - his fixed professional grin slowly cracking around the edges as he sidled towards the bolted door.

Then in the mid 1960's his mother tried to rebuild her social life with weekly visits to an upmarket nightclub, and regular outings with a variety of eligible men. He quite enjoyed the idea of having a father at last and sometimes sat on the staircase listening to their conversations and wondering what was happening during the lengthy silences. But after a while it became clear that none of the men were "trustworthy" enough and his mother was "too frightened" to enter into another relationship. He contented myself with looking at old car magazines, and working out how long it would take him to save up for an 'E' type Jag if he got a part-time job after school.

His irrational cravings began to reach out of the house like the hand of a drowning man.

By 1966, at about the time of England's World Cup victory and his first paper round, the situation suddenly declined and Llewelyn found the monthly blips becoming permanent problems. His mother began to spend

longer and longer periods in bed, complaining of vague female problems and projecting blame consistently in his direction for her alarming physical deterioration.

"You've worn me out" she whispered.

He suggested the doctor, but she emotionally refused, sending him instead to the chemist for strange parcels which were handed over with querulous looks, but no comment.

It then became an exercise in wish fulfilment, as every evening he walked home from school hoping that she would have got up during the day, and that the windows would not be dark as he rounded the corner with a queasy feeling rising in his gut. But more and more she remained in bed and the breakfast pots would stare at him through the half-light, as he drew the curtains and walked upstairs past the picture of the weeping urchin, and into the shadows of his mother's bedroom. A sickly sweet smell would often meet him and like travelling on a macabre roulette wheel, he would wait to see if rage, muteness or tears greeted his inadequate hello. Then it would be down to the kitchen to select some tins for their tea, put on the telly and hope that 'Blue Peter' would nullify his thoughts with its cheerful faces, cardboard castles and licking pups. But the situation was becoming acute, and he couldn't help his fourteen-year-old mind contorting and twisting into a revulsion which he knew was morally wrong, but seemed unavoidable. It was as if a probing blackness was surrounding him as he squatted in front of the smoking fire every night, looked through the 40-watt smog at the tatty remnants of their 1950's heyday, and sensed the building blocks of his mind being inexorably rearranged.

Although his mother's illness started slowly enough, with just occasional periods of bed rest every month or two, by 1968 she was almost totally bedfast and still refusing to see the doctor. She had told some story or other to the neighbours, and they contented themselves with occasional civilised enquiries at the door, and probably intense speculation at home. One neighbour had even been duped into shifting a single bed downstairs so that his mother (who was then only 40) could sleep permanently in the living room, without this apparently raising further alarm. Llewelyn just drifted along with a combination of childish naivety, the conditioned fear of defying his mother's wishes, and (like his mother) the even greater terror of hearing the worst if professionals were brought in.

They struggled on for quite a while on the basis of regular light meals prepared by Llewelyn, and better meals prepared by his mother when she had 'remission' from the illness. He did the shopping at the 'bottom shop', and they did the basic laundry between them on good days. But it was an impossible position and his mother moved from white-faced stoicism and secrecy, to appalling candour as she began describing her problems in stark revolting detail. She was "haemorrhaging badly", "bleeding both ways", and was having to use a bucket as a toilet downstairs. She was scared of what the doctor might tell her and she was getting through a pack of large external sanitary towels every day (thus Llewelyn's trips to the chemist). It reached crisis point during the Christmas of 1967, when they spent the holiday in a daze of alternating anger and despair, and she gathered him into her arms to finally admit:

"I think I've got cancer."

A neighbour sent for their old doctor and immediately tests were arranged, revealing within a short space of time that his mother had a non-cancerous growth in her womb. They had apparently been sharing the agonies of the last two years for no good reason, and a hysterectomy would set things right. They both breathed a sigh of relief and Llewelyn reflected on how terribly callused he'd become to suffering. Little did he know, that the problems were in many ways just beginning.

The time his mother spent in hospital was like a morbid religious holiday, as he hung warily between feelings of loneliness and anxiety, and the new-found thrill of independence. After a short recuperation, his mother came home and for a while there was honeymoon period of mutual sensitivity, but it wasn't long before he noticed that there were some strange changes occurring in her personality. She was deeply immersed in the whole experience of illness, and didn't really seem to expect full physical recovery, or the resumption of a normal life. She was extremely negative about her general prospects, saying she was totally "worn out", and seemed to take little interest in anything but her ordeal.

"I'll soon be dead" she commented in the morning.

"I'm finished" she said at bedtime.

As the months went by, she spent most of her time sat in the fireside chair, with eyes closed and arms crossed. She avoided doing any household chores and the house became untidy, cluttered and dirty, while Llewelyn began to resent the househusband role she was obviously ascribing to

him. She eventually appreciated that there was a problem herself, and this time she had no hesitation going to the doctor, who diagnosed 'nervous debility' and prescribed some of the new 'wonder' tranquillisers that were then appearing on the market. These did nothing more than mildly sedate her for a short period, adding to her lethargy, and making her more dependent on the medical system. She became addicted to the tablets for many years (like thousands of others in the 1960's), and didn't receive a minute of professional counselling or specialist mental health advice that might have helped re-motivate her. By the time this was suggested in the 1970's, she firmly believed that her problems were a combination of physical incapacity, congenital 'nerves' and acts of unchangeable fate. Any implications that she was experiencing psychiatric or psychological problems were greeted with massive temper loss, embarrassing scenes, threats and tears. She finally trained the G.P.'s to leave the idea well alone. "I've given up" she said. "I'm jiggered."

Llewelyn was at this time old enough to be rather looking forward to a more independent, freedom loving lifestyle than was possible in the family home. This necessarily brought him into savage conflict with his mother, who was equally intent on retaining his domestic services. Some of their exchanges would never be forgotten as she went scarlet with rage, called him every name in the book and attempted to bombard him with blows as he scrambled out of the house. She waylaid every neighbour, friend and acquaintance to update them on his perfidy, and harangued his stunned friends on the doorstep if they were ill advised (or curious) enough to call for him. He retained indelible images of his mother with her feet up on the chipped, 1930's tiled mantle piece, surrounded by unopened mail order catalogue parcels and mountains of magazines, picking the dead skin off her shins and asking him to turn the telly off for her, because she'd "had enough of that tripe". She seemed to love the miserable silence and razor tension that ensued, while to him it was like a swirling blackhole which was slowly swallowing him up.

"I can't last much longer" she sobbed.

A long time later Llewelyn realised that she was probably suffering from clinical depression following an accumulation of significant stresses and problems; the original divorce, the single parent restrictions, the distrust of other men, the horrible physical illness, the hormonal and psychological changes that followed the hysterectomy, and the fear of work which

came when her maintenance and benefits payments eventually dried up. As a result, he was stretched between basic family loyalties, disaffection for what I could see developing around him and adolescent cravings for freedom. Even the realisation that she was depressed came far too late in the day to make much difference to his ingrained feelings of resentment and injustice. In the years to come, his old attitudes would always overpower newer tolerant thoughts.

"I haven't the strength to go on" she said one day. "I'm....."

"Finished" he unwisely interjected.

"*Smack!*" came the response, as she leapt across the room like a kangaroo and landed a smart right-handed slap to his temple.

Mad as Hell

One day Llewelyn had done something to offend his mother, and she charged after him like a rhino through to the kitchen, her eyes wild with fury, screaming abuse, raining slaps around his defensive arms, mad as Hell. His first impulse was to escape into the garden and just hang around outside until she'd cooled down, but for some reason the door was locked. As he wrestled with the handle and fiddled with the key, he could feel further blows stinging the back of his head and neck. Multiplying and getting harder. Much harder.

Like a cornered animal, he turned around and fought, pushing her against the old washing machine, and hearing her gasp, as he made for cover upstairs. But as he passed her astonished face, he instinctively knew that something had changed. The sitting duck was no longer sitting, and temper had found its place, like all things. The physical attacks were finished.

He had grown up.

The boy is the father of the man.

Kate

I thought if I played it cool and didn't contact Kate, she might ring to see how I was, send me a conciliatory note, or turn up at the unit door in a tearful, contrite state.

But she didn't.

In fact, there was no communication at all, and I found myself yearning for her company like an abandoned puppy. I began to wonder whether I could somehow engineer a 'coincidental' meeting on neutral ground, and when Sidney mentioned a staff night out at the local heavy metal club (The Steel Balls), this got me thinking. Kate often went there on Saturday nights with her mates, and there was a fair chance we might bump into each other. Then, who knows?

Of course, I would be incredibly nonchalant and barely notice her at first, but my luminous persona and studded biker jacket would soon attract her, like a helpless moth to the flickering flame. I would make her work hard to recover my favour and patronage, while various other women basked in my sun-like charms and wove themselves around my legs like adoring eels. But then, with an impatient snap of my fingers they would be gone, and Kate would gradually reassume her proper place in my munificent affections.

There would be visits to high mountains, Tantric sex, world cruises, emigration, flavoured condoms, brilliant children, separate bathrooms, unwavering rapture, and a storybook ending. We would rerun the past, and change the final cut.

Well, that was the general idea.

When the Saturday night actually arrived, I was as nervous as a kitten, and racked by indecision. Should I turn up as an old sod in the wrong place, or an aging hippy in the wrong time? My wardrobe was painfully limited, and in the end I was forced to settle for an itinerant grunge look, which was appropriately dishevelled; but exactly like Worzel Cummidge's Sunday best. That would be just fine, though, if I could only win Aunt Sally back.

The unit staff met at the 'Iron Rod', which was a tough pub around the corner from 'The Steel Balls', owned by the same outfit. It was a spit and sawdust place with long tables, listing chairs, multifarious beers of unknown

strengths, and a 1950's jukebox which glowed expensively in the marijuana-tinted fog. There was no decorative theme as such, but the chanting barbarian hordes who hung from the rafters undoubtedly lent a certain *je ne sais quoi* to the proceedings and, all in all, we felt quite at home.

Indeed, we got well tanked up - crunching crisps and laughing loudly at each other's clothes and spots, whilst carefully avoiding the menacing looks of some territorial regulars in their elite, twilit corner. But after half an hour or so of leering through the murk for interested members of the opposite sex (and finding none) we abruptly ran out of conversation, upped sticks and lumbered out towards the club.

The 'Steel Balls' was a remarkable institution, converted from the cellars of a huge Victorian tenement building in the centre of town. The bottom storey was famous for being externally wallpapered in fly posters, and musicologists were often seen picking their way through grimy layers of paste and pap to discover some prized artefact of 'Blue Oyster Cult', 'The Scorpions' or 'UFO' et al. The entrance to the club was really more like a trapdoor which dropped unwary patrons down a precipitous chute of well-oiled stairs towards a distant pink neon pay desk and a network of Vietcong tunnels beyond. The pay desk was always occupied by an ancient, shrivelled termagant and two red-necked bouncers, who bulged out of their incongruous dinner jackets like butchers on a stag night. The three of them had reputedly sat there every weekend since the club was used for ballroom dancing in the 1960's.

So, down the chute we went, arriving at the desk in a heap, where we paid across an exorbitant sum, and merrily joined the column of tittering misfits, weekend gothic rock gods, and leather-clad fetishists, as it wormed its way towards the sweaty catacombs of the deep interior. On arrival at the bar, we waited twenty minutes or so for our pints of flat brown ale in fingerprinted glasses, and began vibrating sympathetically to the earthquake roar of Pearl Jam etcetera - booming apocalyptically from towering black speakers dotted generously around the labyrinth. Cigarette smoke rolled lazily around us like a sea fret and the open bog door revealed a dozen bodies draped over sinks and bowls in various stages of purgative agony, while those still on their feet stared vacantly through double-glazed, gobstopper eyes. It was rather like being keel-hauled in a cesspool, but the throbbing mass gradually pushed us towards the demonic, strobe-lit dance floor, and it was there that I spotted Kate.

Kate.

She stood amidst the butting heads, whirling limbs and soaring Gibson air guitars, dressed in a sprayed-on black cat suit, her yellow hair swinging wildly around her waist, while Brad Pitt swivelled his hips like Elvis on a bad burger day, and openly drooled. I watched from the shadows as they returned to their seats, and was greatly relieved to see Brad sit next to another girl, who he proceeded to lick and prod. He then circulated around the group like a fly in a jam factory, and I began to wonder if he was really a harmless eunuch, hired by the girls' parents to amuse and protect their offspring in dubious environs. Possibly his crutch had been burnt off in a sixth-form chemistry accident, and now he was compensating with endless, conspicuous flirtation.

Foreplay instead of foreskin, as it were.

Anyway, I was completely pissed by this time, and when Van Halen came on I couldn't resist strutting my stuff on the dance floor, carving quite a space in the sardine can crowd, and only falling over once, during the guitar solo. I expected Kate to be quite impressed, but when I turned around, there was just an empty chair with Brad Pitt sprawled in it (if you see what I mean). Predictably pissed off, as well as up, I headed for the door like Elizabeth Bennett in a drawing room huff, and didn't look back. I couldn't actually *find* the door, however, and when I eventually turned around - there was Kate with two clacking black beer bottles held in one hand.

"Hello stranger, I thought you might like one of these" she yelled.

"Hi Kate - fancy seeing you here."

"Well, I did once tell you it was a regular haunt of mine."

She wasn't fooled for a minute, and clearly knew that I'd come out looking for her, but as usual I covered my embarrassment with a poor joke.

"'Haunt' is the right word for it. I've seen less horror in a slaughter-house."

"You're so hard to please, Steve. That's your big problem."

I saw a pattern beginning to repeat itself, so I changed the course of the conversation rapidly, and we elbowed our way back to the seats. Luckily, we had the perfect situation in which to avoid unpleasant topics, because under the coffin-shaped speakers it was virtually impossible to hear anything but rampant death metal and a high-pitched singing noise in the middle ear. As the evening wore on, we danced together two or three times, and I felt a bit like Father Christmas with one of the grotto's older children,

but her primitive gyrations were certainly eye-popping, and I hoped for more. More came, but not quite the way I expected.

She danced with some of the other blokes too (as well as a couple of the women), and I couldn't help feeling insanely jealous, even though I was overtly phlegmatic, and very keen to beam avuncular smiles at all the young studs as they returned to their seats. I was beginning to see for the first time just how popular Kate was, and just how democratic she and her friends were with their affections. But it was me she chose to take her home, and for a while my mind repressed a growing unease, as we retraced our past, up those old rickety stairs, to Kate's joss-stick scented boudoir.

This time there *was* coffee, and God did I need it, as my middle-aged constitution did battle with a young man's habits, and the room quaked. But we eventually adjourned to the bed, doing everything at half the speed of that very first encounter, leaving time to think, and room to judge. It should have been a dazzling reconciliation, as we went through our full repertoire of moves and countermoves, but somehow the intuitive had become mechanical, and the novel, almost dull. Worse still, there was a sense of reserve and qualification. Nothing obvious, but it was undoubtedly there. Like a knife under the pillow.

We ended in our favourite position, and I felt a tingle run around my body as Kate moaned and twisted, like a dozen times before. But this time, for the first time, there *was* a post-coital depression, a sort of sickly dissatisfaction and disquiet, an acute awareness of irritating little things that had probably always been there, but were now salient. I'd seen three toothbrushes in the bathroom, a pair of men's socks on top of the laundry basket, lots of masculine faces grinning out of photograph frames, Christ knows how many different alpha-male de-odorant sprays, and some light bruises on Kate's upper arms. Thumb and finger marks, I was sure.

Naturally, being half-cut, spent, temporarily deaf and precariously placed, I just had to push the situation over the edge (even if it meant falling on my face), simply to secure a certainty of one form or another. So I went through my list of forensic observations like Columbo cornering a suspect, secretly hoping for a mistake in the logic, but instead finding Kate laughing like a drain, and setting the alarm clock. She was in the end perfectly candid about the love interests in her life, admitting freely that she was seeing 'two or three' parties, just like me.

Just like me.

"Just like me?"

"Yes, Steve. I don't take any of it that seriously."

"But I thought you and I *were* serious?"

Well, maybe we were for a short while, but that couldn't last forever... and it didn't."

"Surely you weren't seeing other people when things were good between us?"

"No, I don't think I was. But like I say, we're just mates now."

"So, you sleep with *all* your mates?"

"No, just those I fancy."

"Isn't that promiscuity?"

"God, you're so quaint Steve" she laughed "that's what I like about you." Quaint.

"But some people would say you're simply a slag."

That hurt, and her face dropped.

"Perhaps it's time to say goodnight, then. I wouldn't want you mixing with the wrong people."

"Kate...."

"Time to go, Steve. Your wife will be expecting you."

"But...."

"No buts. I'll see you around."

I'd blown it, big time.

I felt as though my emergency chute had just failed to open, and I was now hurtling towards the ground at a zillion knots, with a shriek stuck in my throat, and a wrist-mounted altimeter whizzing madly around to zero. Like a crazy watch with a red line.

Tick tock.

The Unit 2005

Three days later.

After two hours with the Health and Safety team across at the new ward, I'd eventually discovered (via three brainstorming sessions, a seminar, two coffees and a workshop) where the fire doors and extinguishers were located.

"Couldn't you have just given us the basic information straight off?" I unwisely enquired.

"Er....well....I suppose so, but it wouldn't have been so much *fun* would it?" said a red-faced blue stocking with brown hair and black looks.

"Ha ha ha" we chuckled.

"And what on earth would we have done with the rest of the day?" added her colleague.

"Of course, of course..... I do apologise."

"Besides" added the trainee Health and Safety Officer "We didn't know where the fire exits were ourselves until we had the workshop".

* * *

I now stood at the bottom of the unit staircase and listened as a mournful wail drifted down from far above, as though some poor creature from another planet was dying of loneliness in a mountain cave, but then I realised that it was only Gerald accompanying himself on the violin.

Gerald 1966

Gerald had always looked a bit odd, with his huge aquiline nose, goblin ears and hooded black eyes, but he was privately schooled and generally isolated in the middle of his parents' manorial estate, so nobody really knew much about him. He spoke with an

aristocratic ring straight out of Eton, often carried a violin case, and sat bolt upright when the old family Bentley made its way through the Elizabethan gatehouse on its way to town.

It was a shock, therefore, when a local farmer found him sitting stark naked on a motorbike, hurling silver candlesticks through the farmhouse windows at 1 o'clock in the morning. Gerald had apparently fallen out with his parents, and decided to exact an oblique revenge on them by annoying the neighbours and embarrassing the family name. This was vaguely rational, but when he repeated the behaviour later in the week, and then compounded it by being scratching his name on the farmer's Riley Kestrel, the police were called in to investigate. They soon ascertained that Gerald was not entirely well, and the family admitted a history of similar incidents over the years which had been skilfully hidden by his parents or diplomatically overlooked by the well-wishing local community. But things were getting worse, and the strangely withdrawn child had now become a bizarre, unpredictable adult, frustrated by his inability to understand things properly, and angry with the world.

His parents were persuaded to approach the mental hospital for help, and Gerald spent a short time on the ward receiving drug therapy. Unfortunately, he continued to deteriorate and by 1972 he was considered chronically ill, wrapped up in ritual behaviours, and increasingly explosive. He retained many skills, though, and was often heard playing classical music on his violin, or discussing restoration history, as he walked endlessly around the hospital day room.

I mentally applauded him for his efforts, and then moved on to the office for the lunch time hand over, making a note in passing that the Reality Orientation Board still had last week's date and weather on it (appropriately

enough 'high pressure, with an odd shower'). Seeing the in-coming nursing assistant, I said:

"Welcome to our exclusive club."

"What? The mile high bestialism club you mean?" he replied with razor sharpness.

"No. The 'I actually turn up for work' club."

"Ah."

Office culture probably wasn't as advanced at the unit as in a bank, building society or insurance office, because we were too anarchic and self-seeking to really *have* a discernible culture. Nevertheless, it was impossible to escape the working day without some form of badinage, plenty of ritual complaints and a pot-pourri of petty politics, as people strove to gain their little psychological advantages. We also had some classic many-skirted princesses and multi-shirted heroes, including two chaps who came to work like eighteenth century aristocrats visiting a bordello, reeking of so much after-shave that a naked flame would have blown the walls out. Generally speaking, if you were a fully paid up member of a witches' coven (or the warlocks' equivalent), you would fit in seamlessly.

You would be welcomed, hideously.

However, one activity which we certainly had in common with other offices, was the ritual of gift 'collection' for staff who were leaving, and because we had such a high turnover of disaffected personnel, these collections occurred with blurring frequency. At one time there were so many going on, and the anticipated donations were so high, that we were almost working for a net financial loss. Even temporary staff were expecting to go away with a 100 piece Crown Derby dinner service, or a day at Silverstone in a Ferrari F1 car, and they even had the cheek to demand a product change if they didn't like what we gave them. I mentioned the current collection to my new colleague, who was notoriously parsimonious, and he said:

"I'd love to contribute, but unfortunately I've left my wallet at home."

"Well, I can pay in £5, and you can repay me later" Sidney teased.

"Eh? Oh, w-well there's no need to bother, I'll probably drop it in later. N-no need to put yourself out on my account" he spluttered.

"You know, I didn't really believe it when somebody told me that you

reused your condoms" I said " until I saw them hanging on the washing line one day"

"Get stuffed."

"Then there was that story about you using charity collection bags for your own rubbish."

"Well, everybody does that."

"Yes, but not everybody then puts the bag out for the charity collection man to dispose of."

"You're shite" remarked Sidney.

"Eh?"

"You're tight. Tight as a duck's....."

"Shall we proceed?" I hurriedly interjected.

"And why the hell are you wearing that bloody great sombrero, false Frank Zappa moustache and chrome plated six-guns" Sidney continued.

"Oh...yes.....(self-effacing smirk).....I've just been to the local auditions for the 'Hex Factor'. I could be next year's *mega superstar hero* the judges said."

"Congratulations."

"And even in the extremely unlikely event that I aren't chosen, it will be such tremendous *fun* anyway."

"Ha ha ha ha ha" we chortled.

I then recounted the events and non-events of the morning, after which my new colleague said:

"Oh well, it seems quiet enough here now. Why don't I take Stuart out for a drive 'round?"

Stuart

1963

Stuart stared out of the cracked farmhouse window at the deserted fields and the purple moors beyond, hearing the wind whine around his creaking outbuildings and the rusting old tractor with its seized gear box and flaking red paint. The ancient oak table stood firm

and square in the centre of the room, contrasting oddly with the walnut of an elegant writing desk and the brightly coloured glazes of some Satsuma china dotted around distant shelves. The desk was now strewn with faded love letters from his dead wife and a collection of silver framed wedding photographs, all gathering dust in the gloom.

Every dog-eared book, chipped plate, and bent spoon continued to remind him of the woman he loved, and when the silver framed images came into view, he stifled a pain no opiate could touch. The neighbours still called around sometimes, but he had driven most of them away with angry rebuffs, unmanly tears and wildness, while the farm remained neglected, the bills unpaid, and the house a midden. With filthy clothes, half grown beard and matted hair, he left his food barely touched and endured a sleepless purgatory of sweet memories, and self blame. His blunt earthy nature had never allowed him to reveal his love, or to really believe in Heaven, and now he suffered.

One day, he walked up onto the moors and found one of his sheep caught up in a twisted fence. She was quite dead, and had probably suffered for hours while the blood drained from her lacerated body, but around her flanks Stuart noticed the tell tale signs of dog worrying. He was incensed, and as he began to march around his boundary looking for further victims, he was amazed to see a group of youths and two dogs chasing across the fields towards him. Sheep were fleeing in all directions, and Stuart yelled at the top of his voice:

“Stop! Stop!.....Stop, or I’ll fire!”

But in the wind and the rain, and intoxicated by their game, the youths did not hear, so Stuart raised his shotgun and downed the first dog, sending one of it’s front legs looping high into the air, and over the shocked white faces into a stream behind them. The youths turned and fled, holding their ears as a further round burst over their heads, sprinkling them with spent shot.

And a spent life.

The police soon came around to the farmhouse, and were experienced enough to recognise a broken man. They were kind, and aware of his history, but were forced to take him away to a 'safe place', where two doctors admitted Stuart to the local psychiatric hospital for treatment. It was clear that his mind had fractured under the weight of anger, loneliness, financial pressure and guilt, and now he was spiralling down into serious depression. His personality never truly came back again and after a year the neighbours stopped calling altogether; they just didn't know what to say to a man who said nothing. They were slowly replaced by the concerned faces of R.S.P.C.A. officers and court officials, who in turn gave way to social workers and nurses, who eventually led him away to the hospital for the last time.

I cocked my ear to the intermingled sounds of drilling, hammering and wailing, and wondered what my colleague's definition of 'quiet' was, and whether he too collected Concorde engines and was therefore perfectly adapted to an unremitting racket. There was little point in denying him the request, however, because there weren't actually any 'patient management problems', and if I'd said no he might have called in sick for tomorrow. Also, if he went out there would be two less people shouting at each other all afternoon, so I acquiesced and contented myself with saying:

"Okay, but if you happen to do any shopping for yourself while you're re-socialising the patients, don't put all the Woolworth's bags down in front of Richard like you did last time."

I said this because it was often suspected that staff used the excuse of taking patients on recreational drives to disguise shopping trips of their own, as well as visits home, or even running members of their own family about. The unit vehicle had been seen parked outside staff members houses on a number of occasions, and garrulous patients often came back

with stories of meeting the staff members' children, having cups of coffee at the nurses' homes, been shown around newly purchased flats, going to car boot sales they weren't expecting, visiting D.I.Y. shops, picking up children from school, and so on. Staff members frequently took twice the expected time to complete a task, and some took so long that they had to return with breathless accounts of terrible traffic jams, being boxed in at the car park, road works, breakdowns, witnessing accidents, and losing their way home. All quite credible, of course....

"Buzzz" went the doorbell.

"I've just come to pick up Mrs. Brown with the broken leg" said a dripping wet man wearing a Robinson Crusoe outfit and large silver earrings.

"I'm afraid there's nobody of that name or affliction here" I replied. "This is a psychiatric unit."

"Are you sure?" he said (looking closely at my eyebrows).

"Absolutely."

The dripping wet man then ambled off and started peering through one of our side windows. He was no doubt in search of Mrs. Brown, but instead collected a nose full of diarrhoea from the downstairs toilet and a hearty "bugger off" from one of the patients.

"Can I be of further assistance?" I called rhetorically after him.

"Er...no... no....thanks."

"Would you like a look around?" I suggested.

"No...no....that's fine."

"We're having the inaugural 'Friends of Local Psychiatric Rehabilitation' meeting next week, if you'd like to bring Mrs. Brown?"

"Er.....no.....no....I'm due to give a *presentation* that evening."

"A *presentation!*" I gasped.

"Yes, yes.... I would have loved to come otherwise."

"The patients have baked a number of interesting cakes."

"Sorry.....no.....I must go now.....urgent appointment."

"I quite understand" I said.

I really did.

"By the way."

"Yes?"

"Why are you dripping wet and wearing a Robinson Crusoe outfit with large silver earrings?"

"Oh...yes....ha ha.....I wondered whether anybody would notice. In fact,

I've just been diving off the pier for charity. It was an absolutely brilliant day – lots of *fun* and only two deaths through heart failure."

"Well done. I do admire really *mad* people like you."

"Ha ha ha ha" we chuckled.

Until he realised where he was.

I then made my way to the upstairs office where Richard was dancing for joy in front of the computer screen. Suspecting a new porno site, or a successful bid for Marilyn Monroe's bra on e-bay, I was disappointed to discover that he had just completed the staff roster for next month. This was no mean feat, of course, because large numbers of staff were always incapacitated, some were always on lucrative night duty, and unit managers were constantly been told to reduce their reliance on agency nurses and overtime. The supposedly finished roster was always rewritten dozens of times anyway, as staff dropped out like flies and others swapped shifts as if they were cigarette cards, but I didn't begrudge him his moment of pleasure and congratulated him in fulsome fashion.

"Thank you." he beamed. "By the way. We might be getting a kitchen inspection from the Local Authority some time this week, so make sure the floor's clean for once, will you?"

"It's fine" I said. "I always use the sticky sole test anyway."

"The sticky what?"

"The sticky sole test. That's where you walk over the floor slowly, and if your shoes stay on, the floor's okay."

"I see. ...Very well. Carry on" he said distractedly. "I'm the last person to get inflated about such things, of course."

"That's between you, your wife and your surgical appliances" I said to his now deaf ear.

"Things are nicely in hand" he murmured.

"Richard, would you mind awfully if I called you Dick? It seems more appropriate somehow."

"I don't think so Steven. Management have to maintain a certain professional distance from the other ranks. But don't let that interfere with our personal supervision relationship – I'm only too happy to counsel you whenever necessary."

"Our last personal supervision meeting was ten years ago, Richard."

"Hmmm.....hmmmm..."

"And I could do with some advice right now."

"Well, I could spare you five minutes" he grudgingly offered. "You *have* looked a bit under the weather recently."

"A bit under the weather? It's my *annus horribilus* Richard."

"*Oh my God!* There's nothing worse than piles Steven. Have you tried a spot of 'Germoline' on the end of a candle?"

"Er...."

"It doesn't always work, but it's a wonderful way to end the day."

"Er....right....thank you."

"Anytime, old boy. Carry on."

I carried on all the way to the next desk, and began flicking through the vacancy sheets which had recently arrived. All the staff did this religiously, either because they wanted to leave immediately, or because they wanted to leave a good deal sooner than that. I waded through the usual stream of secretarial jobs, senior executive gravy trains and foreign legion posts in hellhole dementia wards, and pushed it to one side. Unfortunately, we didn't get the 'Nursing Times' any more because all the staff made for the jobs column like vultures descending on the carcass of an elephant, so Richard cancelled our subscription to make sure we didn't leave en masse one day. He needn't have bothered, because most of the staff just went through the motions, joyously imagining the successful interview, the nonchalant resignation tendered to indignant managers, the insanely jealous colleagues, the perfect job satisfaction in their new action-packed role – and then they woke up.

'Ideal' jobs in psychiatric nursing were rarer than hens' teeth and staff either discovered this chastening truth the hard way, or they played mind games with the vacancy sheets and stayed where they were with the devil they knew. Still, I wasn't as badly off as the fire-eating striptease artist I read about the other day. She not only had to work with a Bengal tiger and a sexually aroused python, she had to play flute and saxophone in the intermissions too.

My Learning Journal

Johari's Window

1991

Here at the nursing college we occasionally receive one or two nuggets of wisdom in between the dawn to dusk waffle shops and drama workshops. The ratio is only about 1:10, but because these priceless gems of information are so scarce, they will always be remembered. Johari's Window is one such.

The idea is that the mind, and its relationship to the outside social world, can be classified into four domains; like the panes of a window.

In the first pane, there are things about ourselves which we are well aware of *and* other people are aware of (e.g.our names or job titles).

In the second pane, there are things which we are aware of, but other people aren't (e.g. our private thoughts).

In the third pane, there are things about us which other people are aware of, but we aren't (e.g. their private opinions of us).

In the fourth pane, *there are things which neither ourselves, nor others, are aware of* (e.g. our distant experiences, and unconscious motivations).

It is in the fourth pane where madness thrives and drives. Where painful experiences, consistently repressed and half-forgotten, forge new outlets to the world beyond.

I was just about to leave, when Richard said:

“Oh, by the way. I've got one or two little jobs for you to do here.”

An hour and a half later, I had finished transferring lots of old nursing notes into archival boxes, using W.H. Smith circular reinforcements to patch up the existing sheets and dividers, and adding up how many hours of overtime and agency nursing we had used for the last five months (a lot). I had also toured the entire unit documenting how many chairs, tables, wardrobes, beds, cupboards, dressing tables, pot plants, cookers, desks, monstrous food warming machines, shelves, and filing cabinets we had, comparing these figures faithfully with those gathered six months earlier, and accounting for any differences. I had additionally, checked through the maintenance book to see how many maintenance jobs were still outstanding (a lot), I had filled in the monthly patient status form which told us how likely the patients were to move on and why they weren't, and I had undertaken to audit the care plan entries of my colleagues during the next week, so that we would know whether blue pens had been erroneously used, abbreviations had crept in, or any other capital crimes had been committed. I didn't challenge Richard, as I had many times before, with the reasonable contentions that some of these jobs were unnecessary, some were his, some should be given to a ward secretary not a clinician, and some were perfectly mindless. He refused to accept the view that somebody with a £100.000 nursing degree shouldn't really be spending long periods wrestling with W.H. Smith's sticky reinforcements. Today, I allowed myself just the one comment:

“Let's face it. These care plan binders are so thick and heavy, they're bending open the high tensile steel rings. We can't really hold back the tide for much longer with paper reinforcements”.

“Hmm....hmm. Well, do your best. The clinical auditors may be coming soon, and we need the records to be as complete as possible.”

“I can only try.”

“I'll give you the thumbs up then old boy.”

"I'd rather you didn't, if you don't mind" I winced.

"Okay, I know we're under pressure while the inspectors are here, but we must prioritise things. Correct documentation comes first at all times – you know that."

"We must make sure the big things in hand, even when the little things aren't you mean?"

"Quite so."

Bedroom Number 8

There was a 1960's Olivetti typewriter on the dressing table, with a half finished letter cock-eyed in the carriage and three keys locked together in one metallic embrace - the consequence of a large yellow index finger striking them simultaneously. In the wardrobe lay three large sacks of letters (dating back to 1971) which had never seen a stamp. There was no need for the mail, when a man was corresponding with his past.

Cassette tapes, toiletries, cups and matches lay confused on every horizontal surface, while the man's clothes modelled Mount Blanc on the floor, and his 'patient's charter' fluttered in the breeze – countersigned by a key worker who emigrated to New Zealand in 1999.

On the bed, lay the man himself, trousers and underpants down to his ankles, waiting for his regular intra-muscular injection, fast asleep.

I grimaced at the patient's file in front of me; the great wedge of admission forms (eight pages), global assessments, risk assessments, Care Programme Approach assessments, Health of the Nation Outcome Scales, SCART assessments, bed sore assessments (altogether twelve pages), care plans (four pages), care plan daily record sheets (twenty two pages), multidisciplinary team meeting sheets (eight pages), blood pressure charts, weight charts, pathology test records for possible urinary infection, blood counts, drug levels, and physical examinations (in total ten pages), Care

Programme Approach records (Six pages), Correspondence (Seven pages), personal finance receipts (four pages), a pair of broken false teeth in a plastic bag, and the seven cardboard dividers which attempted to structure this ridiculous monster.

I then thought about the patient in question; a fifty year old man who had a long standing inadequate and manipulative personality, no suicidal ideation, went on home leave every weekend, was physically fit, who had been on the unit for almost a decade without significant change, and who would have been transferred to a private sector hostel years ago if there had been the funding available to do it. This man was not acutely ill and he didn't really belong in hospital at all, and yet we continued to treat him as though he had just arrived as an emergency admission.

He didn't need the heavyweight 'everything but the kitchen sink' nursing care plan, because he didn't need the hospital environment at all, yet instead of making a common sense adjustment to his care we continued to submerge him under a sea of medics, tests, re-assessments, specialist referrals and weekly multidisciplinary meetings, simply because that was our professional 'role' and we were too inflexible to change it. Because of the absurd overkill involved, the man had slowly become conditioned to think of himself as a desperately ill and permanent hospital patient; one who could no longer conceive of a future beyond the unit, even though one day he would no doubt be rocketed into the private sector where no such attention would be given.

This had happened in other Trust units, where years of bed-blocking inertia had suddenly exploded into transfer panic because the units were being given the axe, or beds were desperately needed by other patients. In these cases, hundreds of hours had been wasted on 'care programme' meetings which could never attract funding for proposed patient transfers, and were then completely ignored when crisis funding *did* appear. Patients who had been waiting for aeons to move to a particular setting, suddenly found themselves transported to something entirely different, where a bed happened to be free. One patient, I recall, found themselves back in a unit where they had levelled serious allegations against staff some years before, and another who had been planning to join a foster family, finished up in a hostel. In some cases, patients were diplomatically excused from attending the planning meetings so they wouldn't try to veto the pre-planned moves. On the way back to the office we would pass the 'patients

charter' and its references to 'client centred care', and no irony would be seen.

The situation was completely mad. Or worse.

The Causes of Madness

As in many other fields, the theories and findings which have emerged about mental disorder over the years are many, various and (ultimately) contradictory. There are theories about genetics and diseases, psychological traumas and developmental problems, displaced creativity, dysfunctional socialization, class/gender/culture conflicts of many sorts, alienation in a complex secular society, and many others.

These views range from hard determinism (e.g. insanity is a genetically inherited debility), to hard relativism (e.g. certain behaviours are simply labelled 'mad' by powerful groups to secure their own position). Culturally, one person's madness may be considered another person's sanity – schizophrenia to a psychiatrist may be expanded consciousness to a mystic or an artist, aggressive psychopathy to a liberal criminologist may be strong leadership to a fascist, and depression to an optimist may be realism to a nihilist.

In the end, the experts have identified so many 'indicators' of madness that, in theory, the entire population should be insane, because we all have at least a few.

Perhaps that's true.

The hospital type environment of the unit often led people with personality problems to adopt a 'sick role' perception of themselves, as this made it even easier for them to opt out from any personal or social responsibility. In that sense, the unit was actually *manufacturing* madness instead of treating it, and lengthy hospital stays remained a key factor in the development of over-dependence amongst our patients. This was why I

remained unimpressed by the vast care plan files, because I knew that these mighty tomes were ultimately intended to meet the pedantic needs of auditors and lawyers, not patients. As if through telepathy, a distant radio informed me that:

"More and more people are being left in N.H.S. hospital beds because financially stretched social services can't fund placements, according to a new report. The number of bed blockers has risen 13 per cent since 2001...."

"We're back" said my colleague from the afternoon shift.

"How did it go?" I enquired.

"Oh, I've hired a Michelin Man costume for the next charity walk and made an appointment for my hair to be tinted. I'm a really *mad* sort of person you know."

"I was referring to the walk with Stuart."

"Oh...right.... no problems. He was absolutely superb in town."

I glanced at Stuart who was stood behind, and noticed that a large wet patch had formed around his crutch area, that his hands were shaking uncontrollably, and that saliva was dripping constantly from his mouth. Everything was relative in psychiatry, and I knew that my colleague was pleased because Stuart hadn't attempted to run off, hadn't become angry or agitated, hadn't stolen anything, and hadn't been incontinent of faeces in the shops. His term 'brilliant' still seemed a little extravagant, though, and it occurred to me how often we compared patients' behaviour with other abnormal behaviours on the unit, rather than with standards in the outside world. This was not perhaps a great sign of community care success, where 'integration' with the outside world was the main guiding principle. "I think he needs to change his trousers. I'll get some medication for the side-effects" I said.

"*I need a cigarette now!*" interjected Hettie, as I attempted to open the drug cupboard.

"Can you wait just a minute?" I soothed.

"*I need a cigarette now! Now! Now! Now!*" she screamed.

There was then a scuffle behind me, as Hettie attempted to strike Stuart, blaming him for the inordinate delay in cigarette supplies. We eventually managed to separate the two combatants, and then had to spend ten minutes 'talking down' Hettie, before reminding her of her social obligations.

"I understand" she said for the tenth time that month.

Thinking about the two incident forms that I would now have to complete in triplicate, I moved back to the trembling victim of the assault. His hyper-salivation was a side-effect of the main anti-psychotic medication, and although we had drugs which would contain the problem, these drugs had their own side effects, including agitation. As agitation was often one of the patients' original problems, the whole process could be rather self-defeating, and again illustrated the circular nature of psychiatric activity. Indeed, drug therapy for mental disorders was generally problematical, partly because mental disorder could be caused or complicated by psychological and social factors, and partly because the drug therapy itself was a rather imprecise science. As well as the risk of serious side effects, drugs could miss the target altogether, be tolerated over time, interact with other drugs, or be insufficiently powerful.

"Sooty and Sweep are just capitalist puppets, claims Marxist" said the radio.

"It's time for me to discharge myself" said Sidney.

He was gazing at a dog-eared photograph of a blond, bare breasted lady in stockings and suspenders, who was draped over a Harley-Davidson motorcycle, drinking frothy lager from a bulbous bottle. In the background was a long-haired biker in studded leather jacket, unflattering thong and jackboots, with a three inch spike through his nose. A waterfall of artificial sweat ran freely over the lady's tanned shoulders, down her back, and through the culvert of her perfectly formed derriere. Nudity, as always, left plenty to the imagination.

"I didn't know you were into that sort of thing" I said.

"Oh, I'm not Steven" he said quietly. "She's my muse."

"Oh, right.....absolutely..... Well thanks for turning up anyway."

"Cheers. Have a good shit...er...shift."

"See you."

"Oh, by the way," he said, "my wife says your anus is the most important thing in sex."

"Really?"

"Yes" he explained. "Uranus is apparently even more important than Mars when drawing up your astrological sex charts."

"Yes, the old jokes are the best" I laughed.

"Pardon?"

"See you, then."

"I'm having a game of scrabble with my wife tonight" he called back.

"You'll have to join us sometime."

"Goodbye, Sid."

"Now, remember Steve - don't let the bastards grind you down. You won't see me tugging *my* foreskin for any boss."

"Yes, of course....."

"And by the way Steve."

"Yes?"

"Have you any ideas for spicing up my love life? I'm afraid my wife and I seem to have forgotten we live at the same address."

"Er.....well I'm not really an expert Sid, but you could try scented candles and a pink light bulb."

"Oh. That's worth a go I suppose, but I don't think virility and girth are really the key problems. Still, thanks for the suggestion, anyway."

"That's okay."

"And another thing, Steve."

God help me.

"Well....you're the only person I dare ask....Do you....do you think *arseholes* deserve rights? Be honest."

"Oh....you mean conmen, cheats and vagabonds?"

"No. No. *Real* arseholes."

"Oh....perverts, rapists and granny bashers...."

"No. *Actual* physical arseholes. Anuses."

"Pardon?"

"You see Steve, I find it terribly upsetting that oral and vaginal orifices always get such a good press, while the poor lowly rectum is forever mercilessly vilified and pilloried. I feel as though I have a calling in life – a sort of holy quest, to defend the rights of all downtrodden and belaboured back passages."

"Oh....yes.....absolutely....I couldn't agree more."

"I knew I could count on you, Steve" he said, a single tear trickling down his old craggy cheek.

That's just the way I felt. Angry, defiant, and just a little mad.

But tomorrow was the day of the big inspectors' meeting, when we would all learn our fates.

Tick, tock.

Llewelyn 1958

Anger.

Llewelyn started primary school in September 1958, but without any brothers or sisters to condition him he found the playground totally anarchic, hiding behind one of the large wooden gates for six playtimes before he was eventually discovered by a braying mob. He quickly learned the ropes, however, and turned the tables on a would-be bully by punching his nose and watching a watery turd slip down his trembling leg.

It was also around this time that he had his first in a long line of childhood illnesses, including measles, scarlet fever and double pneumonia; events which robbed him of some critical education and set the seal on his 'late developer' status. Luckily, injected forms of penicillin were around by then, not to mention an apprehensive walk to a temporary clinic in a dance school where polio vaccinations were being administered. He didn't particularly want the long shiny needle in his arm, but he was aware of the terrifying 'iron lung' in which polio victims were said to spend their entire lives, and this duly motivated him.

Like most kids in the 1960's, his knowledge of horrible illnesses and injuries was restricted to fanciful images and second hand stories of gruesome cancers, amputated limbs and gunshot wounds. He flinched whenever he saw the 'mad lady' walking about town as she turned her head around every few steps and flashed her wild eyes at those behind, and he watched with awe as the man with no legs slowly made his way down the main street in a huge black tricycle that he 'pedalled' with his hands. The world was a thinly shrouded horror story, full of mysteries and deceptions; just like the 'Tampax' adverts that were never explained to him, and the vast bloodied sanitary towel he once discovered in an alley.

His father's disappearance, the absence of any siblings, and the isolation of their early years in the neighbourhood had made Llewelyn awkward in company, distrustful of people and sensitive to criticism. He didn't really have a 'role', 'self-image' or any firm attitudes which normally would have been taken from surrounding children at an early age, and in those days play groups and pre-school education were virtually unknown. So when he received a clip around the ear from his mum every time he expressed

a divergent opinion, this didn't really help the confidence-building process, and when he was repeatedly embarrassed in front of strangers with slapped legs and screamed reprimands, this began to sediment in his mind as anger.

Anger.

"Make sure you eat all that fried bread" she demanded in the morning.

"You're getting fat" she scolded in the evening.

The situation got worse as the years went on, and his mother graduated from bare hands to a peculiar gnarled bamboo stick, which she kept conveniently close to her fireside chair ready for instant use. The worst thing of all was the *unpredictability* of her moods, because most of the time she would be kind and caring, inducing him into a false confidence which was then crushed with impulsive acts of low level violence. He became nervously alert for every inflection in her manner, like a wary animal not sure whether to take the proffered food, or run for cover.

"Don't you dare be cheeky to me" she said one lunch time.

"Stand up straight and get some guts" she said at teatime.

The Mad Professor

Llewelyn's next-door neighbour was a very interesting man, and also a member of a dying breed. He had a domed head which towered above a horseshoe of wispy white hair, a time-worn wrinkled face, ill-fitting clothes and big army boots. Handicapped by a hideous curvature of the spine and a pronounced limp, he had a grotesque appearance, yet he was a kindly, tolerant man who would help anybody out, and he always wore a smile. He was nearing retirement age, but still worked at the university, 50 miles away, where even his colleagues knew him as 'the mad professor'. The professor had a keen sense of duty, and never missed a day at college, always climbing the hill to the railway station at 6.30 a.m., in good time for his train which departed twenty minutes later. His limp was the product of an old war wound coupled with latter day arthritis, and as the pain gradually worsened, his daily climb became a grim struggle.

One winter morning he found the hill covered in snow and ice. He was weak and very unsteady on his feet, so he dropped to his hands and knees and crawled to the top of the hill, where an astonished stranger showed pity and helped him to the station. The professor was lathered in sweat, and deeply distressed. *For the first time in thirty years, he was going to be late.* It was 6.55a.m. when he finally limped onto platform 3.

Yet, the train was still there.

The guards had delayed its departure, for the man who was more reliable than a clock. The man who was a proper standard.

He's dead now, of course.

The Unit 2005

I administered the 'as required' medication to Stuart and went downstairs, only to be knocked off my feet once more by the appalling reek of laxative-induced faeces, rolling down the corridor like mustard gas and searching out every corner of the longsuffering unit. A rotund little man then came into sight and announced with a chuckle:

"He! He! I've had a good clear out. See you later."

I viewed his retreating form, and noticed some brown liquid trickling down the back of his long socks. My worst fears were confirmed when I had a quick look in the nearby toilet and discovered that his explosive diarrhoea had left the place looking like a slaughterhouse. Luckily it was a 'male problem', because if the patient had been female and they had requested female attention, a short-term exchange of staff would have been necessary before the clear up operation could begin, with a reluctant female staff member being dragged in chains from another unit. We were okay this time however (sic), and soon employing our full contingent of specialist wet suction cleaners, red mops, rubber gloves, aprons, specimen containers, and yellow plastic bags to neutralise the damage.

Richard applauded from the wings, and after a while we settled down to a rewarding cup of coffee, with the residual odours of latex and crap drifting up from our scrubbed hands and stinking clothes. Of course, most nurses knew that the smell of the unit could never really be removed, so they kept two entirely separate sets of clothing at home, like mechanics routinely isolating their oily overalls from other items. In our case, we weren't allowed to wear uniforms, because we had a 'rehabilitation' philosophy of care and had to pretend that everything was normal.

What a joke.

"Well done everybody" said Richard.

"Thanks for all your support" we chorused.

"Oh...mm....mm....yes.....don't ever underestimate the role of top class leadership."

"No of course not" I agreed. *"In fact, on behalf of the staff I'd like to thank you from the heart of our bottoms."*

"I couldn't have put it better myself" Sidney (would have) said.

The atmosphere of the unit always seemed pregnant with something

other than air, almost as though we were breathing in the atmosphere of an alien world; something similar to Earth, but not the same. The combination of cigarette smoke, residual urine and faeces, sweat and yeasty chronic infections hung around the unit like a London smog, eating into the carpets and wallpaper, settling into filing cabinets as a fine dust, and bonding with the fibres of your clothes with the tenacity of a biological washing powder. Even our new wall-mounted, electronically operated deodorant sprays were beginning to give up the ghost, and at the end of the day my lungs felt like two bags of sand. Still, at least an extractor fan had been fitted in the smokers' room, which was an improvement over the previous 'policy' of opening the windows and fire doors for ventilation. It was quipped at the time that the only way the fire doors would ever be closed, would be when we ran out of spoons to chock them open. But it was less of a joke, perhaps, that we went home at the end of each shift having smoked ten to twelve involuntary cigarettes. As I passed the lounge, a lady on T.V. said:

"A boy's fingers were cut badly as he tried to fight off a classmate who held a razor blade to his neck."

"More cheerful news" I remarked.

"What is?" said the mystified looking nursing assistant.

For some reason my stomach was beginning to rumble and knot again, and as I looked at the clock I suddenly realised that the Inspectors' final debriefing was scheduled for today, *and due anytime now*. My mind began to clutch at straws, and I wondered whether they would perhaps postpone the meeting, or hold it in more salubrious surroundings, or cancel it because one of their members had an unexpected golfing appointment, or....

"There's some swanky looking people outside, ringing the bell" interjected one of the patients. "They've been there ages."

"*Why on earth didn't you let them in?*" I spluttered.

"Well, they looked a bit weird to me.... and anyway, its not my job."

On the left, a toilet door creaked open and out wandered Richard, carrying a large print copy of 'Angela's Ashes'.

"Lord love us and save us. 'Tis himself, so it is" said he.

"Are you drunk, Richard?"

"Sure, can't a man enjoy the fruits of his labours without a devil like yese giving him a shellaking?"

"The inspectors are here again."

"*Jazus!* Open the door yer great daft eejit. You're a blockheaded idlesides, so you are."

I opened the front door, apologised for any inconvenience, and watched as the cold, sodden forms tramped in and suddenly met the poisonous fumes of diarrhoea which still hung murderously in the air. For an instant, they froze in mid-step and I had visions of them sinking to their knees, holding their throats and falling face down on the foetid carpet dead as dodos, but they reassumed their robotic appearance and marched steadfastly on. Richard had already moved patients out of the large T.V. lounge for the "important meeting", and was now dancing about sycophantically and burbling oily salutations in the direction of the approaching V.I.P.'s. A nervous sweat had broken out on his top lip, but he looked cool in comparison to the senior manager who had been locked in with the inspectors since lunchtime, and now looked as though he was being frog-marched into a court martial. His usual air of omnipotent cockiness had somehow deserted him, and he sagged like a burst beach ball in front of his tormentors, willing the end to come.

"Can we have three cheers?" enquired one of the inspectors, casting his squint in my direction.

"Er...er....well" I stuttered.

"Come on, chop chop, hurry up, we haven't got all day."

"Er...sorry.....er.....hip, hip....." I mumbled tentatively (thinking it must be somebody's birthday).

"*No! no!* Three cheers. Three more **CHAIRS** please. There aren't enough to go round here."

"Oh, yes, of course. Beg your pardon."

"P-p-perhaps we ought to introduce ourselves" the unit manager spluttered.

And the meeting began.

Meetings usually began with the participants arriving in dribs and drabs, forming into little chuckling cliques, and sizing up the odd unfamiliar face. Most of the meetings in this hospital Trust involved a hard core of meeting 'addicts' who loved the whole scene of professional role play, ego exhibition, and paper progress, alongside a smaller group of staff who had generally been volunteered by their managers and always looked painfully bored or mystified. At great expense, a special meeting room complex had been built on the hospital site as a sort of gold-painted temple for wafflers, but

this didn't stop the meetings invading clinical areas as well. Indeed, local mansions were also hired for special 'away days' and 'team building', so that staff could play games, join 'workshops' and indulge in all sorts of American, mystical cult types of bonding. The cost to the taxpayer was again astronomical, with an average £12 - £15 an hour being paid to each member of the 10-20 strong group for anything up to seven hours of complete bull, God knows how many times a year, plus the cost of hiring venues or building purpose-made facilities.

The 'let's introduce ourselves' ritual now inevitably followed, even though the identities of 90% of those present were always well known, and personal information of this sort was invariably irrelevant to the content of the meeting anyway. This ritual was, of course, always suggested by one of the managers, and I suspected strongly that the real reason for 'introductions' was that it gave managers the repeated opportunity to announce their messianic job titles to everyone else present. Certainly, their decorous false modesty, well-rehearsed phrases and patronising smiles towards less grand individuals, was enough to fill a sick bucket. I looked across at the senior manager, who was quickly reasserting his smug, unctuous charm, and I wished I was the scarred boss of SPECTRE who would stroke his white cat, press a secret button under his desk, and say: "Goodbye, Meeester Manager", releasing the protesting panjandrum through a trapdoor, down a stainless steel tube, and into the jaws of five waiting sharks.

"Shall we introduce ourselves?" the sharks would ask.

To be fair, introductions were probably advisable on this occasion because the Inspectors used a large panel of visitors, and this particular group had not been before. Indeed, I found myself speculating that they may have been swaggering impostors; a religious cult trying to get recruits, some devious door-to-door salesmen, or a party of drunken traffic wardens wrongly directed from the 'Rose and Clown'. Unfortunately, all of these interpretations proved wishful, and we had no choice but to prepare ourselves for the verdict.

According to the preliminary report, there was low staff morale, widespread sickness, poor leadership, and a substandard environment. Indeed, the unit was considered to be potentially dangerous, ineffective, and very near to being closed on the spot. There had been a further decline since the previous negative report, and within a week the Inspectors' views

would be made public. Were there any comments?

"Hmm...hmm...Surely, we have improved a little since our last inspection" Richard said in a faint voice. "We worked out an excellent action plan after you came last time."

"But have you *implemented* any of it?"

"Hmm....hmm...Well there have been delays of course, due to staff sickness and under-funding. We have a meeting scheduled for next month to discuss it."

"But doesn't an action plan imply 'action' as well as discussion?"

"Hmm.....hmm.....Well, things are well in hand. We have now *agreed* the action plan."

"Yes, you had an action plan last year, and apparently the year before that. We also have on record your predecessor saying something similar. There appears to be quite a collection of 'action plans.'"

"If only we'd known how bad it was" interjected the senior manager. "We would have prioritised this unit for investment. Naturally, we have long term plans to develop a new community based service."

"But, we've been told that these plans have been on record for the last five years."

"Well, policy of that sort takes quite a while to roll out. If only the unit had flagged this up earlier, we might have acted sooner. There's been a problem with the interface, I'm afraid."

"But, aren't communications a management responsibility?"

"Yes, of course. I wasn't trying to fudge or wriggle out of owning the problem or anything, although I should point out that I've only been in this job three years, I inherited a long list of problems from the previous regimen, and funding has been a major issue. Also, we're having to restructure the whole service again (for various vital reasons I can't quite bring to mind) and we've had other practical priorities such as introducing 'Investors in People' policy. Not to mention the fact that my wife's having a baby and I seem to be getting a constant series of colds at the moment."

"It's nice to find someone who will accept responsibility without equivocation" applauded one of the Inspectors. "How do you see the unit now?"

"I believe we've made some important steps forward with the unit, including a number of 'blue sky planning' discussions, regular focus group meetings, the appointment of steering groups which now meet quarterly,

and continuous reassessment of patients so we know exactly where we are."

"Significant progress, then?"

"Yes, I should say so" replied the senior manager, cleverly immune to any form of sarcasm.

"And I've just put together a new training video" added Richard, beaming incestuously at his boss. "Perhaps I can show the inspectors....."

"That reminds me" interrupted the senior manager "I'm due to give a *presentation* in five minutes. You'll have to excuse me I'm afraid."

"A *presentation!*" we all gasped.

"*Manager giving presentation! Manager giving presentation!*" howled Richard, pressing himself against the wall as the senior manager rushed out.

"Are there any other comments?" said one of the inspectors, looking directly at me.

I turned instinctively away, but found myself surrounded by gimlet eyes, and an atmosphere of curious expectation. For a moment, I was mesmerised by this concert of stares and glares, and then like a cornered rat making a last desperate spitting bid for freedom, I blurted out:

"Frankly, I'm surprised we've got off so lightly.... In my opinion, the patients are steadily deteriorating because they're needlessly hospitalised, and they don't have any meaningful way of spending their time. They've lost all self-respect because they can't contribute to anything, and they're left with nothing to do but spend their benefits, or sleep on sofas. The unit is bed-blocked because the patients are incapable of moving on within the present system, and insufficient money is available to 'warehouse' them outside the hospital. Management is paralysed by fear of confrontation with individuals, unions and the public, and we're being buried alive in mindless bureaucracy, just so that we can demonstrate paper progress to auditors and ourselves. Many of our nurses have joined the circus by spending a large proportion of their time at home on fully paid sick leave, correctly anticipating that management will send them boxes of chocolates for doing so.

"Hmmm...Hmmm....Thank you very much for your views...." interceded Richard.

"And" I continued "*In my opinion, this is nothing short of a scandalous and*

disgraceful waste of public funds."

A stunned silence followed my reckless outburst, and in the interim I cast a careless glance around the table, waiting for my nemesis. Like a group of assassins at a Mafia wedding, they eyed their target, toyed with their guns, and twitched their lips; the apoplectic manager on the verge of a stroke, the chairman's chilling cold weasel look, the black coated ranks of inspectors with their ice hockey masks, turning me over like a beetle on a pin.

"I need tea now!" said a voice on the other side of the door.

"Oh, I think I can hear somebody about to misbehave down the corridor, and the 'phone's ringing too" I said eagerly. "If you'll excuse me please." I hared off without further ado, while the rusty necks cranked around and followed me out of the room.

"P-p-perhaps this is an ideal time to show my new training video?" I heard Richard stutter.

Creeping back to the door crack, I could just make out the shape of a large hairy naked man bouncing energetically on a bored-looking but vociferous brunette lady – and suddenly I remembered where I'd put the manager's personal video.

"Faster, harder, faster Mr. Big" the lady said in a flat voice, apparently reading an autocue beyond the bull's heaving shoulders.

"Grunt, grunt" he replied in a Teutonic accent, sitting back to pump a wide arc of seminal fluid across the studio.

Richard's heart had presumably stopped beating, but he still looked openly envious of the man with an issue really well in hand.

In fact, nobody seemed in a rush to turn the rogue video off, so I made myself scarce in an obscure part of the unit until the meeting finally broke up an hour later, and the shell-shocked pilgrims made their way out through the front door. It was 5.00p.m. and the managers had decided to join the inspectors on their way home, leaving me to consider the error of my ways and to fret about what tomorrow might bring. Strangely, I could only feel an intoxicating blend of relief and amusement pulsing through my veins. The radio seemed to empathise, and somebody said:

"A man from Cheshire is going off on a Caribbean holiday after his twenty-five year old collection of junk mail fetched £500 on the internet."

"Ha! Ha! Ha!" I chortled too loudly.

"Are you all right?" said a passing patient.

"Just fine" I giggled.

It was teatime, and the holy ritual of the temperature probe had already begun. I joined the craning necks to see what the aluminium tins had to offer, and tried to work out how the patients with their backs turned to the monstrous machine could still stare at it with both eyes. My Pavlovian salivation started in earnest as I viewed the fish and chips, but I plodded on gamely and ignored the hunger pangs, skating expertly on the soup when necessary, and rather looking forward to my hard-skinned peanut butter and jam sandwich (saved from lunch time). Mysteriously, there always seemed to be more food deposited on the floor than we ever received in the tins to start with, and today we could have done with a bulldozer to clear a path through it. The usual late arrivals gave a thespian performance about neglect and abandonment, and we were treated to one interesting episode of horizontal vomiting, as a rather determined gentleman filled his mouth beyond its capacity, sneezed, choked and disgorged the blockage like a rocket across the table. Trying to distract one lady, I asked her:

"Was it all right?"

"What, all that puke you mean?"

"No, no, the meal. Was it okay?"

"No. It was far too peppery."

"But you put the pepper on yourself, didn't you?"

"So what?"

My Learning Journal

Impotence

2005

I've often wondered whether the drugs make any difference to most of our patients – a view borne out by the established psychiatric opinion that personality disorders weren't treatable anyway. Certainly, we could throw away the entire buckled filing cabinet of *nursing* care plans and be reasonably sure that this wouldn't have the slightest impact on the patients' behaviour. Care plans are usually written thoughtfully, but they're invariably ignored

by staff who substitute their own approaches, habits, fashions and opinions, come what may. The key workers who write the plans usually try *their* best to implement the ideas - but this brings them head to head with the patients.

No contest.

Interestingly, in the early years of the unit patients who needed support and guidance were often asked to perform miracles of self-reliance just because community care policy was *a la mode*, while nowadays patients who are perfectly capable of making contributions are rendered over-dependent by needless compensatory care, paranoid bureaucracy and an all-pervasive invalid culture.

It's the continuing triumph of policy over therapy.

And therapy over reality.

The drugs round followed, and indigestion remedies maintained their usual popularity, while from the corridor came the sound of a mass exodus.

"See you tomorrow boss.....'bye now.....all the best.....keep smiling.....cheerio.....we'll be off then..."

"Oh, yes..... See you tomorrow" I said, watching the endless conga of harlequin workmen dance through the well-punished front door and into the harsh evening air.

"See you all tomorrow."

Where *was* the location of the unit card school, I wondered?

I ate my hard-skinned peanut butter and jam sandwich, and was advised by my colleague that several unidentified patients had again raided the fridge, carrying off the vegetarian contents of his personal plastic container. Retreating to the 'quiet' lounge, I then switched on the T.V. and discovered from the news that some of the latest bilingual road signs in Wales directed people to turn left in Welsh, and to turn right in English. An advert for the internet then showed lots of men running around in T-shirts with a 'www.' logo on their backs, claiming that 'the world was now full of w's'.

It was indeed.

I counted seven consecutive adverts, lost patience and swapped channels, only to find that the same adverts were being rerun on the alternative

channel. Still, at least they weren't in black and white like most of the bits in between the adverts, and there was always the local evening paper. I picked it up and five colourful leaflets fell on the floor, blending nicely with the gaudy washable carpet tiles and the blackened chewing gum blobs which extended across the room like rows of flattened Pontefract Cakes. As usual, one leaflet tried to interest me in conservatories that had no prices, the next purveyed some bizarre gadgets that wouldn't have been out of place in a police museum, and another told me how I could make lots of money without risk if only I would sent £15 for a starter pack. The fourth invited me to improve my memory using a special secret technique known only to the thousands of people who had already benefited from it, and asked me to visit the web site www.can'tremember?co.uk. Luckily, the address didn't include one of those signs which people now refer to as a 'forward slash', because this always sent me scuttling to the nearest urinal with subliminal zeal.

Finally getting to the paper itself, I waded through the latest grand council designs for improving local facilities and boosting business, the first of which appeared to involve bulldozing the entire town centre, replacing it with a 20,000 place car park and charging everybody £10 a day to use it. The alternative plan was much more appealing, but seemed to suggest (through computer generated imagery) that the shopping centre would be like classical Rome within three years, and that the major approach roads would be transformed into wide boulevards with mature oak trees, within five. Still, at £100,000 for the consultants' report, the council taxpayers should expect miracles at the very least.

On the radio, it was reported that a palaeontologist had discovered a well-preserved carbon footprint in the Himalayas. The creature responsible was said to be a small ape-like mammal with low intelligence and a big head. Professor R—— was incidentally the first man to ascend Everest on a mobility scooter, and he took the opportunity to thank all his family, the search and rescue services of five countries, the Dutch navy and NASA for their invaluable help in his record-breaking feat. He paid special tribute to his good friend Sherbet Fountain.

"Was he the man who carried you and the mobility scooter on his back for the last mile?" enquired the reporter.

"No, no. That was just a local chap. Sherbet is my personal trainer, body masseur and engine tuner."

"Oh, right."

Professor R—— went on to outline his next 'challenge', which was to include ascending Mont Blanc on a pogo stick, diving off the Victoria Falls in a Belfast sink, and completing a decathlon whilst hog-tied.

"And what is the point of all these challenges?" commented the reporter.

"Point? Point? Good heavens man, we live in Postmodernist times - there's no point to anything."

"No point?"

"All acts of consciousness are completely relative. They have equal ontological validity. There is definitely no one truth" he barked *assertively*.

"Are you sure?"

"Absolutely."

With five minutes left, I searched the paper for a quick fillip from the astrology column and discovered that my week was going to end on a 'high note'. Hoping this wasn't going to be preceded by a kick to the groin, I then glanced through the 'Memories' page and saw pictures of jobless men turning muddy fields into town parks, circa 1860. If only they hadn't perpetrated those vast tiered gardens, ionic temples and artificial waterfalls on the public, it would have been so much simpler for modern workmen to tarmac the lot and line it with ticket machines. A blight on them for being so near-sighted and hindering the march of progress.

"Do you want a crap?" I said to my colleague.

"Say what?" he responded.

"Do you want a bap? I've got one left over from lunchtime."

"Er...I'm not particularly hungry, thanks."

We now returned to the coalface, and one of the patients asked me for access to his huge stock of sweets. Although on a diet care plan, he had recently returned from a shopping trip with two large bags of jelly babies, two bags of sugared bon bons, four tubes of mints, two cream cakes, and a lot of receipts for the cash book. He had preceded these purchases with a fish and chip lunch, one can of non-diet coke, and a 'ninety-nine' ice cream with extra "sprinkles". His laboured breathing now followed me down the corridor and after five minutes of key juggling I was able to release the requested items into his sticky grasp. I had a pang of conscience as I observed the folds of his painfully obese form rock and roll back to the lounge, but I knew that to refuse him access to 'his own property' would have brought opprobrium down on me from all sides. I

was even more regretful that we continued to treat many of the patients like children, and wondered if it was strictly necessary to unload sack loads of sugar and fat on them every week, and then foolishly remark on their disappearing teeth and scale-breaking weight.

As part of this approach, all the patients received a large 'Walt Disney' type of birthday cake every year, which was usually so sickly and garish it would have turned the stomach of Billy Bunter. Unfortunately, staff seemed to forget that the recipients of these cakes were often forty to fifty years old, and that the patients were already keen enough to see themselves as life long dependants without the staff reinforcing it with organised puerility. Some of the patients were actually suffering from a psychotic 'regression' which had taken them back to their adolescence, and in their cases it was even harder to see how Walt Disney icing was going to reverse the process. Often the patients in question were in need of a new electric razor, a hairbrush or even a basic clock, suggesting perhaps that a more constructive approach to gift selection was well overdue. Anyway, at least I always knew what the key workers wanted for *their* birthdays; but would it be a cheeky Donald Duck or a cuddly Minnie Mouse this year?

"My radio has broken" said Maddie.

"Oh, yes?"

"Can I have a new one please?"

The cleaner had switched off the plug socket.

Many of the patients were in the habit of going to bed directly after tea, so we decided to invite them downstairs again for one of our rare community meetings. In times gone by, when the unit had followed a 'therapeutic community' model, we used to hold these meetings every evening to sort out the domestic jobs allocation, receive feedback on the day's events, discuss any complaints and ideas that people might have, and give credit where it was due. These, of course, had slowly fizzled out as the patients became older, the staff got tired of doing it, and the unit reverted to form as a continuing care hospital ward again.

Occasionally, though, the community meeting idea was reintroduced by either industrious students or 'new broom' managers, who would both employ short-lived democratic outlooks, and then move on. Indeed, just as the staff were becoming more 'unwell' than the residents (e.g. judging

by psychotherapy appointments), so was the turnover of nurses becoming much greater than the throughput of patients. This sometimes led to an illusion of progress on the unit, because new staff would launch 'fresh initiatives' which were actually recycled old and failed ideas, while the overall decline from community care unit to hospital ward was too slow for the rapidly changing staff to notice. Therefore we had the paradox of patients becoming less and less able, at the same time as temporary managers deluded themselves that things were getting better and better. A radio in one of the patient's rooms, announced:

"Buses ground to a halt yesterday as drivers walked out over a colleague who was dismissed for winning a martial arts competition while off work sick."

"Oh well, there's always a job for him here" I thought. "I hope he's got plenty of storage space for the manager's flowers and chocolates."

Withstanding the usual spectrum of complaints, selective deafness, and convenient delusions, I helped a couple of patients change back out of their pyjamas and assured them that they would be back in bed by 7.00p.m., if that's what they wanted. I then went to see how my colleague was getting on and found him kneeling behind a bed.

"Oh, I'm awfully sorry" I said facetiously. "It must be terribly frustrating living alone. I quite understand."

"Bog off" he replied graciously. "I've just found a bunch of house keys and a dried up orange under this bed."

"No sign of your plastic box then?"

We had quite a few 'magpies' on the unit, and it wasn't unusual to find hoards of newspapers, pens, food, and other peoples clothes tucked away in bizarre places. Car keys and house keys did occasionally 'relocate' themselves around the premises, and once or twice staff had needed to use the services of locksmiths and breakdown recovery organisations, only to discover the missing keys somewhere on the unit the following day. I stopped laughing, though, when I discovered that the keys under the bed were *mine*.

And then I started laughing again; hilariously and violently. I just couldn't stop, and the nursing assistant looked at me with growing consternation, while the tears rolled down my face, and my body shook with child-like emotion.

"What's wrong with you today?" he asked.

"Nothing at all" I giggled. "It's the world that's the problem."

"You need a holiday, Steve."

"I certainly need to get out of here. One way or another."

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Editorial

The Final Madness

Are there any facts left in society?

This is the key question we should perhaps be asking ourselves as we stride purposelessly into the 21st. century. For generations, the mighty paradigms of religion and science have constrained the western world like a reversible straitjacket - but now the knots seem to be unravelling. Religious belief struggles in the face of secular indifference and sectarian strife, while science wobbles under a constant bombardment of embarrassing reverses and internecine squabbles. Global warming, the rape of the planet, M.S.R., B.S.E., foot and mouth, hospital super bugs, genetically altered crops, cloning, and endless moral polemic; all test our blind faith in scientific advancement and its techno-industrial outgrowths. Scientists could soon be viewed with the same sort of reverence as weather forecasters and astrologers. Where once we worshiped, now we doubt.

Beneath these once omnipotent gods, society itself struggles for a factual identity. Educational qualifications are distributed like confetti at a wedding, noble honours are touted for cash and celebrity, excellence suffocates under mass mediocrity, nationhood disappears amidst political correctness, and individualism extinguishes the ancient principles of community life.

We stand uneasily on the edge of a precipice.

The death of objectivity.

Llewelyn

1962

Tension.

Llewelyn was just beginning to discern a vague pattern to his mother's moods. Tranquillity would reign for two or three weeks and then one day all hell would break loose, followed by a few days of parental sulking, desperate apologies from him and a continuation of the cycle.

The statement *"I'm going to send you to a children's home!"* was now regularly added to the recipe, and it took him a couple of wonderful years to work out that this particular threat was probably an idle one. Much later, he could at least attribute her behaviour to pre-menstrual tension (and this made it a lot easier to understand), but it was nevertheless impossible to *forget* the times he sat on the staircase trying to earn a reprieve from 'the home' by weeping. Understanding in itself could not erase the attitudes deeply scored through time; leaving him fallen between the two stools of compassion and blame.

He was once brave enough to ask his mother why she was so angry, and she replied:

"Because you're a little bastard, like your father, that's why!"

This response revealed something else about her motivation, and suggested that the pain of the divorce continued to dominate his mother's mind. She had never really got over it, and for many years he was literally her whipping boy while she unsuccessfully transferred her emotions onto him. "You mean everything to me" she said that evening.

Indeed, for three weeks out of every four life at home *was* reasonably happy, and he adopted a steady routine of 'Sunday Night at the London Palladium', ham salad on Fridays, Saturday afternoon wrestling (with Kent Walton), haddock and chips twice on Wednesday tea times, and fortnightly visits to the dentist for his wire brace to be tightened. His Monday morning feeling began on Sunday with an endless series of dreary 1940's repeat films, depressing hymns and bath night in the fridge upstairs, while his weekend began on Friday when the school allowed free reading and creative art in the afternoon. He ate corn beef hash, tinned tomatoes and bacon, stew and dumplings, bangers and mash, egg and chips, pie and peas, and bubbling fritters laced with brown sauce.

There was no central heating of course, and when the six-month winter arrived they were condemned to huddling around the one coal fire in the living room, making occasional dashes to the kitchen, toilet or coalbunker as required. The large rooms, steel framed windows, and emulsion painted walls all added to the Siberian atmosphere, while double-glazing, 8" loft insulation and cavity wall filling were things from 'Tomorrow's World' rather than the present. Once Llewelyn was in the bath with his plastic boats and water pistols he quite enjoyed the experience, but when the immersion-heated water started to go cold all he could do was dry himself at the speed of light, and use mind-over-matter to ignore the icy rivulets trickled down his goose pimpled back. Finally, it was out with the 'Vim', a vigorous scrub to remove the weekly tidemark around the pock marked enamelled bath with its rusty stain from the plug chain, and a dive downstairs to toast his shivering buttocks in front of the smoking coalite. Hypothermia knocked on every door, and he was always glad to escape to his little bedroom at the front of the house, where he would climb under the mountainous bulk of blankets to go to sleep, pausing only to check the gargantuan fruit spiders which lived in far off corners of the room. Sometimes he would raid his collection of 'Beezer', 'Topper' and 'Victor' annuals first, but gradually the cold would drive him under the bedclothes, and he would watch the old Singer sewing machine fade into blackness; its little drawers full of polished buttons and embroidered pips belonging to a half-forgotten man.

As Llewelyn wasn't designed to be the life and soul of every party, he began to develop a wide range of solitary, insular pastimes (yes, including that). He read every book in the house from 'Just William' and 'Biggles' to 'King Solomon's Mines' and 'The First Men in the Moon', and then moved through vast collections of 'Jennings', 'Billy Bunter' and 'The Secret Seven' from the junior library. He was trying to replace the world with something a bit more dependable, and to some extent he succeeded.

Fatally, perhaps, he began to delight in his own introversion.

By 1962, his primary school career was almost over and he was looking forward to more challenging times at the big school (not). During the last term his class received a road safety lesson from the original Coco the Clown, but on the way home Llewelyn was knocked over by a motorbike, sustaining minor injuries. On the last day, his best friend playfully pushed his head onto the ebonised class piano, shattering the right lens of his

mock tortoiseshell glasses on one of its corners. Llewelyn spent the final school assembly picking granules of glass out of his eye, and wondering how his mother was going to see it.

"Are you alright Llewelyn?" one of the more observant teachers said, as he filed out with a red face and watery eyes.

"Yes, Miss" he lied.

"Have a nice holiday, then."

"Thank you, Miss" he said.

Then he walked out through the gates, alone in the blurred crowd.

And angry.

The Unit 2005

It was time for a community meeting again, and I was once more scouring the unit for unwilling participants. I prevailed on six or seven patients to leave their beds, but then noticed them forming a disorderly queue outside the door to the blocked stairs, where David stood feeling around the woodwork and muttering to himself. This was one of his regular obsessive-compulsive rituals, which tended to appear whenever he anticipated a stressful event of some sort, like shopping for fish and chips, or having a bath. I was dangerously short of patience these days, so I dispensed with the professional, politically correct pleasantries and simply bellowed:

"For God's sake David, will you stop arsing around and get yourself downstairs."

This always worked much more effectively than a lifetime of psychotherapy or drugs, and he instantly broke out of his reverie and moved downstairs, freeing the bottleneck. But before I had time to congratulate myself on a rare effective intervention, a nearby toilet door creaked open and out tumbled Richard, with a face like thunder.

"Oh...er.... I thought you went home hours ago Richard."

"Yes....well.....I fell asleep on the toilet if you must know. I'm almost dead on my feet with all this extra work."

"Yes, indeed. You certainly wouldn't call Adolf Hitler entertainment" I said, pointing to the Large Print edition of 'Mein Kampf' dangling from his left hand.

"Hmmm....that's besides the point Steven."

"Oh...I..."

"What *is* the point" he continued " is that I overheard you berating David in a grossly unprofessional manner. I believe the exact expression you used was "stop arsing around"?"

"Oh...yes....er.....sorry about that."

It was a golden rule in psychiatric nursing that staff should keep patients entirely insulated from the rough and tumble of social life, and then wonder why the patients couldn't cope.

"It was most reprehensible."

"Yes....er..."

"Abominable in fact."

"Oh...er.."

"Well, from the first of next month there will be a total ban on *all* rectal jokes, and the penalties will be severe."

"Oh...but I didn't mean....."

"Yes, I would have no option but to issue an official verbal warning which would be entered on your records and retained for a period of six months, after which the matter would be reviewed annually."

"Oh....but...."

"Luckily for you there are still three days to go before the new rules are implemented, so I will make the warning unofficial" he smirked. "But from now on please avoid rectal jokes at all times, no matter how provocative the patients are."

"Oh...er...yes....thanks, Richard."

"And remember, we're still waiting for the inspectors' final report, so we can't be too careful..... Especially you, Steven."

"Er...yes...of course."

"You've got a relative's complaint hanging over your head for a start, and that little outburst in the inspectors' meeting won't have exactly endeared you to senior management."

"I realise that..."

"They could throw the book at you."

And the Trust book could only be a heavy one.

Richard limped off home with his trousers on back to front, and I returned wearily to the community meeting (the very least of my problems, it seemed).

A few patients had continued to refuse the time-honoured bait of tea and chocolate biscuits, regaling us instead with fairytales about sudden illness, extreme fatigue, and paralysis, while those who did attend continued to move in and out of the room like tricky targets in a rifle range, but eventually we settled down a quorum of ten. I immediately took the precaution of turning the volume of the T.V. set right down, but we had got no further than the preliminaries when I noticed that at least eight of the residents were now engrossed in watching the miming cast of 'Coronation Street'. I broke the spell by switching over to a human biology programme on BBC 2, but one unintentional wit said:

"Bugger this biology rubbish. We want to see something about *real* life.

Let's have 'Coronation Street' back on."
"Okay, Damian. We'll just have the meeting first."

Damian

1974

Damion flinched as a shadow fell over the end of his bed, but it was only another boy on his way to the privy, padding softly down the dormitory whilst whistling 'Hotel California' under his breath. Damion relaxed a little, and yearned for his parents to come and rescue him from this awful place, where nice smiles disguised cruelty, and friendliness led to pain. He was apparently an orphan, although he could not allow himself to believe it, and for some years he had been 'looked after' in a place where orphans were sent until something better cropped up. But Damion was a 'difficult' boy, and when better things did crop up, he soon alienated his foster parents with flashes of temper, destructive habits and repeated bed wetting, ensuring that they quickly returned him to the home. Here, he lived in dread of companionship, because he knew that it always had a price; the price of charm and treats, outings and chocolate - pleasure and pain.

Two staff took it in turns to groom him, telling him everything was all right, everything was normal, and everything was a secret. He got used to the touches, then the fondles and the night time visits, and when he was finally raped he didn't dare complain, because there might have been something worse, and nobody would believe him anyway. His mind tried to repress many of the memories, but it was a poor anti-dote, and even in later life he would always remember to lock the bathroom door.

At 14 he was rescued by a kindly, tolerant family who provided a proper home, and encouraged him to trust and grow. But the damage was done and he showed increasing signs of distress,

oddity and escapism, particularly at school where he was eventually referred to an educational psychologist and other experts for assessment. They debated the reasons for his regression and lack of concentration, but interventions failed and soon he was giving great cause for concern, making lewd comments in class, hanging around public toilets and neglecting himself. By the age of 16 he was seeing a psychiatrist, and at 18 he was admitted to hospital in a serious psychotic state.

He had succumbed to his past, and his tormentors, seeking refuge in a delusory second childhood where everything was perfect and unchallenged, and where real life could not touch him again. He eventually passed through a nappy stage, and a period of comics and roller skates, but stalled on the edge of punk rock and sexual curiosity; once more blocked by his demons, and the things he could not face.

At 30 he was still riding his skateboard, collecting Star Wars figures, and attracting company he could do without.

Using my best Chairman of the Board voice, I thanked those present for attending the meeting, read out the apologies, and quoted the last minutes on record (from five months earlier). The patients were so impressed they looked as though they were expecting a hanging, but within minutes the familiar double-glazed looks were beginning to form, and by the time I delivered my first tentative question there was nothing but a resounding silence. Many of them were adopting classic 'defensive' positions, turning right round in their chairs to face the back, rolling into foetal positions, or simply looking fixedly at their feet. To the left of me there was a rustling sound, and I knew that one of the more mischievous ladies had hidden behind a settee, while to the right Primrose had already fallen sound asleep. But I pressed on regardless, and using a series of one to one questions I managed to coax some of the more garrulous patients into life.

Once galvanised, the talkative patients were then almost unstoppable,

using the meeting to broadcast their latest environmental requirements, such as a wide screen plasma T.V. set for the lounge, a continental holiday and bigger bedrooms. Double-glazing had always been a popular request, but now that we had spent £20,000 on having new sealed unit glazing units fitted, the patients were gradually shifting their interest to triple-glazing. They were a door-to-door salesman's dream, and often became so expansive about their material aspirations that staff had to reverse gear and look for ways to curtail their monologues. The technique we used this time was to move on to the menus, asking each patient what they wanted for lunch and tea the next day. This worked, but the hedonistic patients were extremely sensitive to moderation and quickly reverted to exhibitionist behaviours to recover our interest. They had a rare captive audience and were determined to make the most of it:

"I'm not happy here. I know you want to see me in prison."

"I was cursed by a warlock."

"I'm a moonlight shadow."

Some of those who had felt left out, saw immediately that the atmosphere was deteriorating, and seized their chance with provocative and abusive remarks:

"You stink."

"You're ugly."

"My radio's broken."

"I need a cigarette now!"

"For God's sake shut up all of you!" I shouted, immediately realising that I had committed the cardinal sin of raising my voice above the melee.

"Steady on" said my assistant, with a worried side long look which told me he was mentally noting my 'lack of professionalism' for later reference.

The more timorous and bored hadn't really noticed my outburst, and they were already making for their bedrooms under cover of the flak, while voices were now raised on all sides as the thin social veneer of our meeting warped and split. Donning our helmets, my assistant and I called an immediate official end to the meeting, and watched numbly as most of the remaining patients bolted through the door like whippets out of the traps. We then escorted the most abusive lady into the nearby small lounge, and left the exhibitionists to entertain each other. This drew the sting, and we retreated for a coffee. Somebody had turned the T.V. up again, and I heard:

"18 soldiers die in blast."

"More carnage" I said.

"It didn't go *that* badly" said my colleague.

"A man who slipped on a banana skin at home is claiming £100,000 compensation from the importers" the T.V. continued.

"This is absolute madness" I remarked.

"It certainly is" replied the assistant.

"How much (or how little) compensation will the soldiers' widows get?" I wondered aloud.

"What widows?" he frowned. "What are you talking about?"

We took our drinks (and the three soft half biscuits we found at the bottom of a deluxe Christmas selection tin) back to the office, where I flicked through the latest Trust magazine. The Trust seemed to spend more on publishing than Fleet Street, producing a host of slick magazines and bulletins with constantly changing logos and endless self-congratulatory stories. Invariably, the Trust director was pictured on the front cover, sporting his latest 'power' haircut and surrounded by grinning lackeys basking in reflected glory. Page three summarised the findings of our fifth staff survey this year, and I was pleased to see that 80% of the staff involved were "satisfied" with Trust performance. I had seen the full report, and I suppose it would have been churlish to point out that only 35% of staff had actually returned their questionnaires to the survey team, so perhaps the headline figure was a little misleading. Taking a final look at the notice board, I read:

"It is important that all service managers and first line managers involve themselves in the workshop so that the balanced scorecard for the area is developed to meet your needs to manage your service and stimulate greater performance across the Trust.

This will be the first of many workshop sessions, which are expected to scope the needs of the services, and I am sure you will find it invaluable in terms of understanding performance indicators and their relationship with blue star ratings."

Feeling slightly heady again, I took the bold step of ripping this jargon-riddled nonsense of the wall, and cutting it carefully into shopping lists in front of my astonished colleague.

"Steady on" he said again.

"Don't you occasionally feel like being yourself, and saying what you think?"

I said impatiently.

"Yes, but....."

"It's the 'but' that's always the bloody problem. That's why we've finished up being surrounded by all this unadulterated, mind-numbing bollocks!"

"W-w-well...for God's sake.....why don't you leave Steve, if it's all so crap?"

"To pay the mortgage with what?"

(silence)

The Office

A state-of-the-art adjustable chair stood in front of the grubby 1970's beech desk and our emblematic computer with Windows 98, and the charge nurse's interesting personnel files – left on overnight by mistake. Drawers sat in the desk front at 30 degrees to the horizontal, like a Muller-Lier illusion, making the desk look as though it was subsiding into the corner. Perhaps, weighed down by files, and files, and more files.

Bent, vintage filing cabinets lined the walls, while shelves sagged and moaned in the old plaster; first victims of our administrative overkill. Five staff members sat around drinking coffee, tearing strips of flesh of each other's backs, winning arguments, winning races, winning smiles.

The real office furniture.

The kitchen radio still seemed to be set at the high volume which prevailed when the power tools were being used, and I heard an irate voice say: "Some grade A students at top universities can't string together basic sentences, a government education officer said today."

"I wish somebody would turn that bloody radio down" I said to my colleague, "It's been driving me mad all day."

"What radio?" he said with genuine bemusement.

"The one that's been tuned to depressing news programmes since about 9 o'clock this morning."

"I can't say I've noticed" he replied, shrugging his shoulders, and walking off. "But you do *seem* a bit depressed today" he added, looking back.

I sat and thought about what he said, and then suddenly jumped up to test a worrying theory. I found that the kitchen radio was actually unplugged, the T.V. had 'Top of the Pops' on, and the upstairs corridor was deathly quiet. I feverishly examined the radios in the patients' rooms, and found that two were broken (not Primrose's), one was stored on top of a wardrobe, one had been thrown out onto the grass below and the other two were silent. This proved nothing I desperately concluded, but a seed of doubt was growing inside me and I returned to the office in a disbelieving, pensive mood.

Luckily, perhaps, my ruminations had only just begun when they were shattered by the arrival of several extremely thirsty and ravenous individuals on the office doorstep, demanding instant access to the kitchen for supper. "*We need tea now!*" they roared.

"Follow me then" I whispered.

"*We're going to discharge ourselves!*" hooted the residents, sensing a nurse on the run.

"What an absolutely brilliant idea" I rallied. "There's a circus cannon for sale on the internet – be my guest."

(silence)

Like clockwork, the true zealots assembled at exactly 8.00 p.m. every evening, pushing staff towards the kettle with awesome telekinetic powers. Miraculously, those who were too tired to stand up at 6.30p.m. had now risen from their beds in refreshed Transylvanian fashion and were denuding the kitchen of its paltry remaining supplies. In the old days, full English 'breakfasts' were often served to patients who were going straight back to bed and I remember the fire alarms sometimes being set off by the thick cloud of steam, fat and cigarette smoke plunging down the corridor. Nowadays at supper time there was barely enough food to feed a dead parrot and it was fascinating to see the patients climbing around the kitchen like steeplejacks, uncovering long lost packets of crisps, deviously hidden packets of biscuits, and black bananas in Tupperware containers on high shelves. Still, this was one of the last acts in a tedious film noire, and I was comforted by the prospects of glorious release in just over an hour.

Tock tick.

Yes, in one hour the night staff would be here, and for the sake of my sanity I refused to consider the possibility of another late sick call. Cecilia had begun to kick the walls and punch the doors, but it was all a bit half hearted and within twenty minutes she had settled for her chain-smoking norm in the tiled lounge, happily stubbing out her fag ends on the latest vinyl chair arms. I laboured through the care plan write-ups and tried to put a slightly different angle on the patients' repetitious behaviour by using a few different synonyms, the odd novel phrase, a daring piece of interpretation; anything to break the soul-destroying dirge of recording the same non-events every working day. I had Cecilia's short-lived agitation to report, of course, and I prepared myself for the forest of 'very concerned' faces which would greet the news at hand over, even though she lost her temper virtually every evening now, and it had become just another normal abnormality. Then there was the cash to count, and we would prepare one or two of the remaining patients for bed, as a traditional favour to the incoming staff.

Although some of the patients went to bed ridiculously early, some didn't want to go at all, so we now had the rather difficult job of cajoling one lady to leave her chair and don her nightdress. She played the game like a chess grand master; initially ignoring our requests, then postponing her decision, humouring us with praise, arguing that beds were unnecessary, and finally screaming abuse. Our nostrils told us that she was badly in need of a wash and change anyway, and we knew that her arthritis would worsen if she remained sat in the cold all night, so we hovered about riding the storm. Eventually, the irritation of our continuing presence outweighed the annoyance of getting changed, and she gradually edged towards her bedroom at the sort of pace which would have pleased a Victorian photographer.

The other patient we approached got changed quickly, and then returned to her customary chair in the main T.V. lounge for her last three hours of viewing. She was glued to the television for most of the day, only leaving her chair for meals, visits to the toilet and rare baths. She preferred films, but had an encyclopaedic knowledge of virtually every popular programme on the main terrestrial channels, including cartoons, Blue Peter, cookery programmes, all the soaps, and most of the adverts. Clutching the remote control to her chest like a talisman, she would look completely devastated

if staff selected a programme on behalf of another patient. Her viewing began at dawn, and only finished when night staff finally turned the melting set off around midnight.

A lot of our patients' behaviour seemed at first glance to be masochistic, because it didn't appear to deliver anything but discomfort and embarrassment, but on closer examination it became clear that they were often gaining an oblique satisfaction out of their activities. Although they were struggling in life according to most conventional criteria, some of the patients took an almost professional pride in their deviant acts, smiling or laughing after they had hit out, or when they'd been returned to the unit after absconding, or when they had thrown their food about. One young lady delighted in urinating around the unit, and found it particularly hilarious to defecate in her wardrobe and chest of drawers. It was what the sociologists called a 'crystallisation of deviant identity', where a sense of achievement and worth was attached to antisocial conduct. Patients developed a distinct hierarchy on the unit based on their aggressiveness, disruptive potential, manipulative ability and intelligence, and they also learned antisocial behaviours from each other, with new admissions frequently adopting some of the older patients' idiosyncrasies, tricks and manoeuvres within a short space of time.

"My radio has broken" said Maddie, showing me the offending article.

"Oh, yes?"

"Can I have a new one, please?"

"By all means" I said, throwing the radio into the waste paper bin, and jumping on it with both feet. "We'll go out tomorrow and get one."

"Thank you."

"Crash!"

From somewhere upstairs there came the unmistakable sound of sustained violence.

I walked quickly to the offending door, listened to the banging, shouting and clattering which reverberated around the room, and calculated carefully when it would be safe to enter. After a few minutes, the general racket gave way to one last, loud soul-jarring thud, and in the pregnant silence which followed, I knocked gently and went in. Cecilia stood looking through the shattered window, while her smashed sink rocked to and fro on its copper pipes, and three large holes stared at me from the plasterboard

covered walls. The bed was on its side, with two legs missing, and the television was resting at the end of its long trajectory - on the unit vehicle's bent bonnet. My blood ran cold.

"Are you pleased with yourself?" I enquired, with forced calmness.

"Piss off!"

"Is there any good reason for this?"

"Piss off!"

"Could it be anything to do with the fact that you wouldn't go to the shops today because it was too cold for you, and now your mum hasn't turned up on time with your fags and sweets?"

"Fucking piss off you fucking bastard!"

"Well, I've got a message for you Cecilia, so open your ears as wide as you can. If this behaviour continues, I'm going to judge you a risk to your self and others, and I'm going to Section you under the Mental Health Act to make sure you don't leave the unit. If you leave, the police will have to bring you back, and if the doctors decide to put you on a longer term Section, you will have to get the Consultant's agreement before you're allowed out again. This may affect your routines quite a bit."

"Piss off!" she yelled, barging past me onto the landing.

"I'll give you a few minutes to think about it" I said, following her out.

I was cold and calm, watching myself from the sidelines.

Llewelyn

1956

Pulled roots.

Llewelyn's first memory was probably one of privileged contentment, as his three-year-old eyes surveyed the massive buffet lunch and immaculate white cloth on their large, mahogany dining room table.

"I hope it's alright for the Colonel" he heard his mother say.

The crab sandwiches were a special treat (for his Dad), and he was looking forward to his first tentative taste of the orange-red meat which he could just see along the edges of the little triangles of thin white bread. His mother was 31, blond and attractive in her summer print dress, but the scene begins to fade as he watches her smile and they together bid farewell to their little middle-class dream.

His father was a Lieutenant in the Royal Electrical and Mechanical Engineers who had joined up in 1955 to escape a life in the Welsh pits. He was a fairly squat, determined, vain, clever and single-minded man, who was feared by both his men and his family. He had a quick temper, cruel mouth and demanding nature, but then to be fair, so did Llewelyn's mum. They had a big army house at the barracks, a red Austin-Healey sports car and a 'batman' to do all the odd jobs, but apparently not enough. There was a nerve stretching tension permanently in the air, regularly raised voices, recriminations, anguish, tears and memory.

Llewelyn's parents were clearly not destined for a golden wedding anniversary and by 1957 his father had left the army, gone to Hong Kong and divorced his mother, leaving them both with a semidetached suburban house in a declining coastal town. This was apparently good for Llewelyn's weak lungs, and he settled down to a sickly childhood in a funereal neighbourhood populated by retired people who monitored his every movement with gimlet eyes and photographic recall. His last memory of his father was a copy of the 'Odham's Wonder World of Knowledge' which he helpfully sent Llewelyn for his fifth birthday, before disappearing into international obscurity.

The only remaining link with him took the form of strange overseas envelopes which had red and blue striped edges and appeared every month with pound notes in them. Llewelyn's mother nearly died of stress

if one was late, and she treated their arrival like the Second Coming, doling out the cash into tidy little heaps which corresponded to the household bills.

Their new house was a red-brown bricked property with a small crazy paved rose garden to the front, and a slightly larger lawn and rockery garden to the rear which could be reached using some precipitous steps next to the coal bunkers. A side path led from front to back, culminating in a galvanised metal dustbin; the scene of countless dust storms as Llewelyn or his mother battled through gale force sea winds with the pan of ashes from their coal fire. The house had been half built in the late 1930's and completed in the early 1950's, with an intermission for World War II and economic stagnation.

It was a nice place, but they didn't really have the money to keep it that way, and as time passed the guttering rusted and sagged, tiles fell, the chimney moved slightly in high winds, and the little wooden gate rotted off its hinges. As other people opted for fitted carpets and gas fires, they stuck with worn rugs, varnished surrounds and a peculiar brick and wire object which they soaked in paraffin overnight to give the coal fire a kick start in the morning. They did have the house repainted every few years ("to keep up appearances"), and they were the first in the Close to break away from the regimental green which had prevailed since the place was built, choosing instead a natty cherry red and white. They were positioned next to the railway line, however, and the soot from the steam engines soon added a black scum to the tacky paint.

"This colour really won't do" a masculine spinster later said to his mother. "But it matches your cheeks perfectly" his mother replied.

Their neighbourhood was considered to be in a 'good' area, on the outskirts of town in a largely Victorian enclave, yet within walking distance of the sea, duck pond and larger shops. As time passed, however, the local facilities only extended to graffiti on every tenement wall, and a blanket of litter over the dog dirt. The wonderfully verdant gardens which used to be the pride and joy of retired people and little families, gradually became weed-infested jungles or parking bays for decaying Morris Marinas on three wheels and a pile of bricks. The distant war memorial was dwarfed by a lucrative telephone mast, and the nineteenth century iron bridge was topped with rusting steel mesh to prevent suicides.

There was only one other family with children in the Close, and they were

snobs who thought Llewelyn's mother was a concubine because she was divorced and had blond hair, while he was undoubtedly 'spoilt' because he was an only child. Consequently, their boy didn't speak to Llewelyn until the 1970's when he became a tearaway 'biker', and even then the conversation between them was limited to:

"Now then."

"Now then."

A Moment of Madness

It would have been around 1964 when something bad happened. Llewelyn was walking down one of the terraced streets in his hometown, minding his own business, when two older boys dressed in parkas came around the corner. They didn't say anything, but when he was level with them, one suddenly bowled him over with a shoulder charge, sending him sprawling on the pavement. "*Look at this gonk!*" one shouted.

"What are you doing down there four-eyes?" smiled the other.

He tried to scramble to his feet, but another shove rolled him over, and then he was a ball in the bullies' game. At first the tears came, but after a little while, he felt himself going cold and remote, as though he wasn't really in the middle of it any more, but looking on from the side. For a while he stopped trying to get up, and when they took a breather to laugh, he took them by surprise and bolted down the street. One of them ran after him, but it took the bully quite a while to catch up, so when he finally cornered Llewelyn, gasping for breath, he seemed to take this as an insult. His face was evil and menacing, and at first Llewelyn froze, but when he started pushing Llewelyn again, he was prepared this time, and kept his feet. Then something else seemed to take over, something deep and powerful and dark.

With all his strength, and a sort of madness, he pushed his tormentor back, *hard*.

The bully was standing near a low wall which guarded the descent

into a basement flat, and when he fell over the wall and hit the concrete at the bottom with a chilling hollow sound, Llewelyn was as surprised as him. He didn't bother to look down though, he just ran and ran, taking the long way home to avoid the bully's mate, and half expecting the police to pick him up. They didn't, but his mother soon got the story out of him when he reached the house; his perspiring red face and trembling hands an obvious declaration of guilt.

After the predictable good hiding, she took him around to the police, who didn't know anything about the situation until they rang the hospital, and discovered that a youth had indeed been admitted with head injuries.

"*You've fractured his skull!*" his mother screamed, while the policeman looked on, more at Llewelyn's mother than the lad himself.

"He's usually so quiet and polite" she sobbed.

"Still waters run deep sometimes" the policeman commented.

They was a long talk about it, but it never came to juvenile court, because the police soon discovered that he'd been bullied and provoked. They knew he hadn't intended to really hurt the youth, and anyway, Llewelyn was too young for the full weight of the law.

Of course, he hadn't *tried* to injure him, but he was bloody glad he had.

The youth was just plain evil, like some people are.

Like some people just are.

The Unit 2005

Only ten minutes to go, and the office clock seemed to stop. The five minute variations from clock to clock around the unit assumed great significance, and we scurried around the ground floor making sure the pots were washed, the patients were dry and the desk was tolerably tidy. Newly arrived staff were always either deliriously happy because they hadn't yet started, or morose and snappy because they were about to. The latter group were often extremely touchy and pedantic about the state of the unit on arrival, and this was the main reason that last minute spring-cleaning tended to occur. One right-headed staff member described this process as sprinkling dog dirt with sequins.

Thinking about the relief staff, my mind wandered off and recalled the last night duty I'd done at the unit, and how numbingly typical it was.

Artefact

Seen in a night nurse's locker

- 7 tins of rice pudding
- 1 packet of chocolate digestives
- 1 copy of 'Tit Bits' magazine, circa 1968
- 1 quotation taped to the inside of the locker door:

"Vote for insanity – you know it makes sense"

The Monster Raving Loony Party

I left the house when the kids were going to bed, scraped the frost off the car and drove past the snug little bungalows with their frozen cats and miniature wishing-wells; my mind going forwards and the world going backwards. Dark streets lanced by the yellow beams, too soon for revellers, too late for shoppers, deserted and sad, washed by filthy rain, and swept

of meaning. The wails and monotonous reached out of the unit's front door like a monastic chant, but I forced a grin at the annoying levity of staff on their eager way home, while the old tired rituals began once again.

I watched the last chain-smoker going to bed, wishing I was in mine, and flinched as the growing silence was shattered by a patient deciding to have a bath at midnight - waking three others up. There was more silence, more doors, more wandering souls, then a period of tenuous tranquillity as the clock moved slowly on to 2.00a.m. Armies of unseasonable flies, wasps, mosquitoes and moths floated and buzzed around the hot reviving lights, while my eyes struggled to concentrate on a Bronte classic rendered meaningless by fatigue. Needing to walk around just to stay awake, I inspected the tightly screwed on, plastic covered prints of impressionist scenes for the tenth time that night, and heard every snore, sigh and mumble in the building – not because they were near, but because I was sensitised to the slightest sound, like an unwilling guard dog.

Thinking of the people who'd died at the unit over the years and the ghost stories that occasionally circulated, I heard the fire door on the landing creak open and I waited to see who would come down, but no one did. Blaming the wind, I walked into the kitchen to put the kettle on, and turned around to discover Cecilia standing right in front of me like silent death. The small hairs lifted on the back of my neck and an electric current shot up my spine, reverberating around the limbic systems of my brain like shellshock. Disguising my horror, I privately wondered if these experiences were making me go prematurely grey, or shortening my life in some invisible way.

Cecilia returned to her bed after receiving a drink, then proceeded to crash her bedroom door shut twice, totally indifferent to the others sleeping. The house of cards trembled, but luck remained with me, and the patients continued to snore and groan while my radar scanned the floorboards for signs of imminent eruption. I claimed my break, and laid on the stinking settee, listening to the wasps circling far above my head with the lights turned off, and wondering if one would be sociable enough to visit me. I looked up at the ceiling 'planetarium', with its red flashing smoke alarm bulbs, the little green glows of the antiseptic dispensers, and the residual fluorescence of the main tubes, feeling like a long-term prisoner seeing things on a blank wall. I jumped as the hot carcass of the television

cracked violently in the flow of cold air from an open window, waking me from my half sleep. And I smiled because the conditions were so perfect for not sleeping, while David talked to himself upstairs; living a nocturnal life in preference to the challenging day.

Break Time

Those on night duty were entitled to an hour's break during the ten hour shift, although many preferred to reverse this ratio, cramming the entire workload into two thirty minute sprints (one at the beginning, another at the end) and 'resting' for the interim. Some would sleep like the dead for long periods, apparently immune to the surrounding fumes and prehistoric noises, while others would remain in a half-conscious stupor; suspended somewhere between slumber and a hypnotic trance.

The first group could be creative to the point of genius in their construction of suitable sleeping quarters. In scenes reminiscent of the 'Krypton Factor', they would expertly transform jumbles of chairs, cushions, sheets and coffee tables into magnificent double beds, rarely seen outside the confines of a lush BBC costume drama. Although wary neophytes might content themselves with rolling out state-of-the-art sleeping bags, or adopting a variety of unlikely yogic positions on the small sofas, the most decadent staff of all would simply commandeer spare bedrooms upstairs, set their alarm clocks, and disappear. If *both* staff members fell into this 'sleep' category, it would seem like a very short shift indeed, but on the down side they might wake up at 0600 hours to discover the unit had been burgled, important telephone calls had been unheard, or the manager on call had been unable to check the unit (oops).

But they never missed the pizza man when he turned up with their supper.

Those who chose instead to stay 'awake' in a curious state of suspended animation, would normally sink into a capacious easy

chair, put their feet up on a footstool, and cover themselves in three or four hairy blankets like a chrysalis in the corner of a doorframe. They would then remain immobile for the entire night in front of the flickering, inaudible TV set, just occasionally showing signs of life by moving a scaly, telescopic arm towards the cornucopia of food and drink conveniently parked on an adjacent coffee table. Their senses were so finely tuned to signs of unrest upstairs, that they would remain completely unaware of other staff members if they walked into the room.

Almost as if they were asleep too.

At 4.00a.m, I heard the first few early risers shifting around their wardrobes and running their taps to let us know that they were up, while the rest turned off their radios and began to settle down for a morning in bed. There was a crescendo of shouting, hooting, soiling, wetting and washing as the patients were 'assisted', and then we dragged our bodies to the office ready for release. A recently bathed patient appeared at the office door with a fresh brown wet patch on the back of his trousers just as the early staff arrived, and snide accusations of indolence rained down on us like shrapnel, from a choral row of saintly know-it-all faces.

Thinking how easily our explanations had been dismissed, I chipped the opaque frost from the windscreen of my car and watched the world wake around me; a fox scavenging in the bins and the first siren of the day. The hydraulic tappets clattered and I pulled away onto the street, passing the man with the dog who always waved even though I didn't know him, and the man without a dog who never waved, even though he was our next-door neighbour.

I bounced over the 4" traffic calming humps and dropped down the 3" sunken drainage covers, wondering why they'd bothered relaying the roads when the original potholes had provided a better surface. I took a slalom course around the deepest pits on the main road, looked out for tank drivers testing their vehicles, and remembered how my kids called this the Grand National, whooping with joy at the water jump.

Arriving home at last, I parked the car in the garage, and then reversed it

out again because I couldn't open the driver's door far enough to get out. I thought how the garage was probably more suitable for a Doberman than a car and I saluted the people who had become so very rich with all those saved bricks, as I shuffled out sideways like a half dead crab. I went to bed as the kids were getting up, attempted to sleep while the neighbour mowed his lawn, the window cleaner watched me closely, and the latest conservatory went up around the corner. I felt my body saying night time and my mind saying daytime, while the kids were saying "hello, where have you been?"

"Bzzzzzzzz!"

But of course I wasn't home yet, and the bell summoned me back to the present. It was one of those little ironies of unit life that when you were desperate to leave, you often inadvertently locked the doors so that the relief staff couldn't get in. I unlatched the door, apologised to the nurses on the step and led the way to the office for the hand over. The qualified nurse was something of a smart Alick, and I recalled once asking staff members why he practised limbo dancing so much.

"Oh, he's not limbo dancing, it's just his normal swagger" they replied.

"Hello, Alec" I said. "You certainly look smart this evening.

"I not only look smart, I *am* smart" he smirked, utterly oblivious to my knight's move attack.

He then announced that he'd finally discovered his true vocation, and when I enquired what this important work was, he said triumphantly:

"Sperm donor."

"Well, you're certainly a wanker" I observed. "So you should at least make a commercial success of it."

Many years ago a casual psychometric test had soon disinterred his personality:

"Your favourite fruit?"

"Melons and bananas."

"Favourite vegetable?"

"Cucumber."

"Favourite car?"

"Anything with a long bonnet."

"Favourite song?"

"Ding Dong Merrily on High."

In fact, he always entertained new female nursing assistants by demonstrating that he was taller lying on his back, than standing up (providing he had an erection).

This evening he was dressed in a loud multicoloured, large-lapelled suit, with matching oversized spectacles and permanent, insane grin. There was a rubber spider hanging from his male breast pocket and a phallic shaped water pistol sticking out of his half open flies.

"Don't tell me. You're either auditioning for the circus, or just trying to blend in."

"You're not far off. Actually, I've just been interviewed for a senior presenting role on Saturday night T.V."

"Splendid. What *fun* you'll have."

"Yeah, it should be a fantastic *laugh*."

"Saturday night *fun*. Fun, fun, fun, fun and more fun."

"Toddlers falling over on video."

"Ha ha."

"Frighteningly untalented people convinced they can sing."

"Ha ha ha."

"Coloured balls going round and round in the machine."

"Ha ha ha ha."

"Thick sweaty people arguing in a room."

"Ha ha ha ha" we hooted, holding our sides.

Somewhat winded by this mutually therapeutic hilarity, I gave the report, which was virtually indistinguishable from yesterday's report, except of course for Cecilia's wholesale demolition of her room. I'd called the emergency glazier and asked him to board up the window, but otherwise there had been no time to reverse the mayhem and Cecilia would have to spend the night in a spare room. This said, we bid each other goodnight, and I moved towards the front door.

It was then that I noticed a crumpled heap of limbs and cloth resting in a dark red stain, half way down the bottom flight of stairs.

"Christ!"

It was the lady herself.

I'd seen this sort of thing many times before (and worse), but for some reason this particular scene stunned me. I stood shell-shocked, sick and

tired, wet with sweat and numb, like a mortician at the end of a messy career, I felt my limbs gently tremble.

* * *

But Cecilia's downfall didn't cause much of a stir with the night nurses, because things of this sort were always happening, and there was a constant shuttle service of ambulances from our psychiatric hospital to the General, often running on a more regular basis than the local buses. After she'd gone, we sat around the biscuit tin and justified ourselves a bit. One nurse said:

"Well, something was bound to happen to Cecilia. She was getting more and more agitated and the drugs just didn't do anything for her."

"I'm afraid it was a bit of poetic justice really" I said.

"Yes, she got away with bloody murder" said Alec. "It would have been different if she was my daughter."

"She's got a basic personality problem, and the drugs don't make a scrap of difference to that."

"A bit more discipline earlier in life might have helped."

"Or even now" I commented. "She's already kicked a pregnant woman in the stomach and broken someone's arm on this unit, but the police don't want to know about it."

"On the acute unit, one of their nurses got a broken nose, so they took the person to court. The judge threw the case out, even though the Consultant told him the patient knew exactly what they were doing at the time."

"Yeah, being in a mental hospital gives you more immunity than a foreign diplomat with seventeen inoculations."

"No wonder it's becoming so popular."

"One tearaway I know makes for the community team every time he assaults someone. By the time the police get to him, he's always incoherently 'hypo-manic' in hospital - case dropped."

"Yeah, it's easy to forget that some people are mad *and* bad."

"And some people are just plain bad."

That was finally it, so I stood on the threshold of the unit blinking in the moonlight, like a newly released prisoner unsure of what to do next. I was

there but not there, feeling almost disembodied, ready for nothing.

"I need a cigarette now!" rasped in my left ear.

"Don't follow me then!" I spat back to the empty doorway.

I was beginning to get frightened by the voices and the other odd things that were happening to me, but I put it down to bad fatigue and a few worries, and I marched on. The air was icy and invigorating, and it filled me with a second wind as I set off across the car park towards home and hearth. Bleak streets were covered in half frozen slush and peppered with the yellow stains of dog and cat, while complaining drains choked and spluttered under their seasonal load of floodwater, crisp packets and grime. Yet attitude is everything, and by simply walking out of the prison door I could now imbue these mundane sights with a wonderful piquancy; a sort of thrilling aesthetic so different from the useless, pointless farce of the last twelve hours. I had a little bit of freedom, however cold and damp the streets were, and it stretched like a thrilling rainbow away from the confines and contrivances of the psychiatric policy world I had just left. I drew the air in hungrily, and walked away from the hospital, my spirit flickering back on.

Yes, spirituality. The Chelsea pensioner of casualties in this society of narcissists.

My Learning Journal

Spirituality

1997

'Spirituality' is sometimes mentioned in our unit when the nurse completes an admission form and wants it to appear comprehensive and politically correct, but in practice it usually means nothing more than noting the patient's religion, and organising church attendance if the patient clearly wants it. Just as 'work' is a neglected therapy at the unit, so is the spiritual dimension of care almost barbarously inadequate. We fill in 'C. of E.' on official forms or allow somebody 50p for the Church collection on Sundays, when we should really see spirituality as a vital and implicit part of the patients' whole life. *In a sense, spirituality doesn't have to be explained or recorded, but it does need to be lived.*

In other systems around the world, mental health nursing is often based on communal and spiritual principles which give the patients an essential feeling of worth and involvement. The settings are typically pastoral, and the patients benefit from direct contact with their physical environment (e.g. through farming, gardening, working with animals and craft work). These concrete, 'hands on' experiences can be very effective therapy for those with thought disorder problems, because residents can focus on constructive, immediate, tangible and shared activities. Often, the patients rotate around the different jobs available, giving them some insight into their overall social and work situation, and there's a spiritual framework which gives the day-to-day activity greater meaning and coherency. This might be formal thanksgiving services linking certain agricultural dates like harvest time, or it might be meditating on the appearances, tastes and textures of everyday objects, or simply experiencing the regular seasonal cycles of the pastoral setting.

I recently visited such a place; the busy farms, the church with murals painted by residents, the gauche faces with beautiful eyes

and proud smiles, the wonderfully turned woodwork and collections of moving verse in little clean shops, the tranquillity of the setting, and the purpose of the people. They seemed to have a life worth living, not an existence to endure.

All this is in stark contrast to our little part of the community care system, which tends to keep people away from constructive activity through hospitalisation, benefit dependency and paralysed referral systems. If the patients do pursue any organised activity, it's usually contrived and dislocated, taking the form of endless 'training' courses, poorly attended exercise sessions, and coffee clubs. I'm afraid this leaves the patients no wiser about their community, and no wiser about their role in it.

I passed the duplex (or should it be duplo) apartment blocks, and the space that was once occupied by a fine Regency hotel, and I wondered why our town had to be like everybody else's. I felt some change jingling in my pocket, looked at the cheap breezeblocks stacked in a corner, and intuited the answer. An original sandstone wall still stood defiantly around the cleared area, and I felt pleased that this tiny piece of my childhood had escaped the reclamation yard, even though it now doubled as a white board for dullards' 'tags'.

Around the corner a whole avenue of Georgian buildings *had* remained intact, but they had been inhabited by D.S.S. colonists and now the option was clear; flaking paint, rotting timber, the odd boarded window, and groups of unemployable wastrels wandering back from the off licence with gallons of cider, baseball caps, and guttural voices. An old lady was outside clearing the slush and litter off her doorstep, while two fine youths with lager cans sat opposite in the concrete portico of the community centre, aiming obscenities at her. The icy pavements had apparently been polished by a proud council.

The cadaverous form of my neighbour approached again, and this time I blocked his progress with some clever American footballer tactics, until he was forced to reward my extravagant salutations with an incoherent grunt. Twizzle-headed people with laser eyes dissected me as I passed, and bumptious heroes with blimp egos and bold postures filled the bars.

Audiences and stars assembled on every street corner, and the news boards spread joy:

"Thugs kill hamster by tying it to a Catherine Wheel firework."

"Pity the hamster couldn't return the favour" I commented to a mute passer by.

"Huge rise in youth crime" crackled a distant radio.

I gladly left the area, but after a short time I brushed the edge of a nearby council estate, and saw the blue glow of police lights reflecting off the night sky, like the aurora borealis of a penal planet. This area had degenerated into a post-apocalyptic bomb site, with decent people held prisoner in their own homes by roaming bands of giro-paid thugs, intent on vandalising cars, stoning windows, dismantling 'bus shelters and burning wheelie bins. With ultimate pathos, a few brave souls continued to cultivate their gardens amidst the wilderness, but these little refuges were routinely devastated every weekend by gladiators returning from the well-patronised pubs. Just now and again somebody would come out to remonstrate with the chanting heroes, and they would be rewarded for their courage with a relentless campaign of unremitting violence, or arson. The police were well aware of the situation and a new community constable now met the Residents' Association and Play Group once a month, while the estate burned around them.

Sunday Sensation, 25th March 2005

Growth of Parasite Culture

A family of 9 in the M—— area are receiving almost £40,000 a year in State benefits, while a working family around the corner receive only £30,000, it was reported yesterday. A combination of child benefit, incapacity benefit, income support, housing benefit and other 'special payments' easily trumps the double earned income of their neighbours.

The 'bread winner' of the subsidised family is on long-term sick

leave due to stress, but his family remain optimistic with a £120 a week smoking habit and a £60 a week bingo investment. They keep busy by educating some of their children at home.

Fiona D——
Social Services Reporter

It was really getting too dangerous to walk home at night, and I breathed a sigh of relief when the blue glow faded, and I entered respectable suburbia. The first telephone box was smashed to pieces as usual, and every garden wall had spray paint running along the top like a child's railway line. Broken conifer branches lay about, while traffic cones had been removed from the nearby road works and redistributed on peoples' front lawns. It was clear that the hooliganism was growing relentlessly beyond its original borders, and that I needed to calculate how long it would take to reach our cul-de-sac a mile further on. Given that some of our new neighbours managed to communicate by stringing four-letter words into sentences, and their kids made cannibals look like urbane lounge lizards, I estimated about one year to removal time.

At last the rows of brown dog kennels and silver German cars which comprised our estate appeared, and I could smell sanctuary. Like Quasimodo dodging the whips, I broke into a loping gait and made for the furthest reaches of the sprawling mass before me. It wasn't Enid Blyton or John Constable, but it would do, and as I looked over the roofs towards the outline of an escarpment, and the moors beyond it, I breathed a sigh of relief. Some of my favourite walks lay in that direction, and for a few moments a montage of pleasant memories filled my mind; bike rides with the kids, tea rooms in historic places, quiet strolls in sylvan settings, and collecting shells on breezy beaches. Life wasn't all bad, and the prospect of a few days off began to thaw my frozen sensibilities and lift my affect. A little freedom was in sight, and I would savour every atom of it.

Bolstered by these thoughts, I strode on towards our house, and the drizzle seemed marginally warmer. A firework went off somewhere to my left, reminding me of Bonfire Night two weeks ago, and my thoughts wheeled on to Christmas. 'Money' automatically sprang to mind, and I

looked across at a nearby £350,000 villa which was just five years old and had already received three new bathrooms and two new kitchens from three different owners. The house was currently owned by two very busy professional people who spent 85% of their time working, sleeping or on holiday, and only 15% of their time actually awake in the house. Spending so little free time in their home, they had to pay a gardener £25 a week to do the lawns, hedges and weeding, a 'morning' lady £30 a week to do the washing and ironing, a nanny £150 a week to look after the children, and an odd job man £20 a week to do the small household repairs and walk the dog. Once, in a rash moment, I'd told the owner that for £50 a week I would occupy his house during the evenings and save him the trouble of living there at all.

He thought for a while and smilingly offered me £40.

Yet, it wasn't a happy marriage (if that's what you'd call a big business deal on the skids) and tonight I couldn't help noticing a pterodactyl fastened to someone's neck in the kitchen. Or that's what it sounded like.

Most of the houses had their downstairs lights on with curtains well drawn back so that casual observers on the street could admire the latest chain store colour schemes and prominent recent acquisitions. It was probably only a matter of time before the retired Major at number 7 would jump to his feet when he heard footsteps outside, and use his Malacca cane to point out treasured objects to interested parties in the garden:

"Pay attention you chaps next to the elm tree. On a recent reconnaissance operation to British Home Stores we secured these highly prized objects (wafting the Malacca cane about the lounge). We have now put the enemy next door at a serious strategic disadvantage...."

To one half of the population, society had become a collection of audiences, and to the other half, a collection of charities.

The street was like a building site as usual, with people constantly competing to distort their homes with as many horrendous extensions as possible, apparently aiming to swallow up their entire gardens and meet in the middle. In another ten years the place would be like some Fritz Lang megalopolis, with every 'detached' house linked by a series of arches and tunnels, and every window within a metre of somebody else's; the owners glaring at each other like fighting cocks, and their children wondering what 'green' used to look like. Everybody in the estate seemed to be

basing their lives on a series of glossy magazine articles which helpfully told them what to want, and then led them down the main shopping street with Saturday metronome regularity. On average, each household now had one and a half children, three cars and a permanent skip.

Nearly there, I passed the house with the 'his and hers' matching BMW's, went a bit further, and almost turned in at the wrong gate. The next-door neighbours were so fascinated by our trail blazing consumerist tastes that they had spent the last three years unconsciously echoing them. We had finished up with similar black cars, similar gravel paths, similar house paint jobs, similar fences, and even similar house names. His wife had an identical hairstyle to my wife's, their kids changed bikes precisely one week after ours, and they appeared to be equally interested in 'Next' catalogue clothes. There was certainly no need to bother with genetic cloning in our street because we achieved the same ends by cultural means, and I toyed again with the idea of equipping our family with yellow plastic Macs and top hats to see if the neighbours would start copying that too. Well, at least we weren't fighting each other over the height of conifers, and they'd been good enough to invite us to a house party next week. They had of course been across to our house for a drink a month ago, and now their decorators had just finished..... but surely there was no connection. Perhaps we'd be better off like the neighbours at number 11, who always charged a small entrance fee for their parties.

This was cuckoo clock culture, where every social action was repeated through the weeks with fiercely guarded pinpoint accuracy. Cars were washed on Saturday, gardens tended on Sunday, wheelie bins emptied on Tuesday, dogs walked at 0600 and 1800 hours, nights out were arranged for midweek, houses and cars were changed every two years, and people always died five years after retirement. I could already feel the invisible wooden rod pushing me out through the tiny door as the clock struck nine, and I prepared for conjugal warfare.

"Cuckoo."

Looking up at the deaf widow's permanently ringing burglar alarm, I went through the correct gate, found the front and back doors bolted on the inside and wondered if it was indeed the right gate after all. But the rear fortifications were eventually dismantled by my indignant spouse who would probably have greeted me with well- practised indifference, if she'd bothered to open the door as well as unbolt it. I went upstairs to get

changed, said a silent “goodnight” to the children in bed, and wondered what they’d been doing all week. On my return to the lounge I was castigated at great length for working too much, and then reminded that we needed more money.

“*Will you please bugger off, and stay bugged off!*” I snapped back to her stunned face.

I had, after all, completely redecorated the kids’ bedrooms with 500 of their stockpiled school certificates – what more did she want?

Minor Annoyance Disorder (M.A.D.)

I read somewhere in a glossy magazine that experts have now identified a marital problem called Minor Annoyance Disorder (MAD). A series of repeated irritating behaviours such as leaving the toilet seat up or putting wet towels on the bed may, over a period of years, propel the marriage towards the rocks. Although at first sight divorce would appear to be totally out of proportion to the trivial causes, these minor conflicts often *disguise* major underlying difficulties which the partners won’t face (e.g. financial or sexual problems). It was the serious unacknowledged problems which led to surface strife.

At least Carol and I didn’t suffer from this disorder.

Our big problems disguised the little ones.

One famous T.V. character always had the vision of a rhinoceros’s backside whenever he thought about his mother-in-law, and it was the same with me whenever I thought of Carol. Except in my case I also imagined peppering the offending posterior with birdseed discharged from a large antique elephant gun. On my last birthday she had given me a second hand copy of ‘Das Capital’ with the top right hand corner gnawed off by a family pet and a faint stamp on the inside cover saying ‘N— Library – withdrawn/30p’. When her birthday came around I was tempted to retaliate with a gift-wrapped nit comb, but conscience got the better of me and I shoved a £10 pound note in the kids’ handmade card instead.

“You need a haircut” she would snipe in the morning.

“You need a better barber” she would point out in the evening.

Her instinct for conflict was virtually paranormal, and whenever I inadvertently broke wind in the house I knew that she would almost instantly materialise behind me – nose wrinkled in disgust and an accusatory remark primed and ready. Even if I had seen her at the bottom of the garden ten seconds earlier, she would somehow manage to navigate three flower beds, cross two rooms and scale a staircase before the offending emissions dispersed, pinning herself to my back like a Mitsubishi Zero pilot going for kill number 9. These weren’t even psychological games any more; they were just expressions of almost perfect, intuitive antipathy. And to think that once, a very long time ago, I called her by a pet name. ‘Christmas’.

My head throbbed painfully and I lay back in the chair, allowing the unit and the world to f-f-ade away. I began drifting towards sleep and the unit appeared in front of my closed eyes like a bizarre horror show curiously suspended in a Victorian ‘what the butler saw’ machine; but then the truth occurred to me. Far from being a fairground contrivance, the unit was really just a fearful exaggeration of the ‘normal’ conventional life we all led, where physical decay, political correctness, bureaucracy, consumerism, selfishness, wastage, puerility and stress had sprouted with unusual vigour, but the same genus.

The unit was in many ways, just life under a microscope.

I absentmindedly swatted a tiny surviving black fly that had wandered across from the pot plant, absolutely blind to my own precarious nature.

I was light-headed and very tired, but I knew I wouldn’t sleep.

I needed Kate, badly.

Kate

2005

Putting on my shoes again, I slipped out of the silent house, and retraced my steps to town. Kate's light was on, and I hovered outside like a peeping tom, wondering if she was alone, or whether she would just slam the door in my face. We hadn't contacted each other since that night at the club. No 'phone calls, nothing.

"Knock, knock."

(silence)

"Knock, knock."

The door creaked open onto its restraining chain, and Kate's cold eyes surveyed me through the gap.

"Oh, Steve.....what do you want?"

"Just to talk."

"There's nothing to discuss, Steve. Don't make it harder than it already is."

"Please.....a few minutes won't do any harm. I'm totally screwed up at the moment."

"You look like hell."

"I know."

"A few minutes then. That's all."

The door swung back, and I trudged in, full of good intentions, but awash with self-pity; the most unattractive trait known to womankind. I gave a predictable dissertation about the state of my marriage, frustrations at work, the vileness of society and my regrets about our weekend away, but her eyes remained passionless and distant, as she tapped the table irritably, clearly waiting for me to end.

"Look Steve, I'm sorry about all this, but you already know what I think about it. You've brought a lot of this trouble on yourself and you just won't bend. Maybe we could have had some sort of future together, but I know now you'll never leave Carol, and you won't compromise over anything else..... We're just prolonging the agony here."

"You're right...I know that...but I'm trapped Kate."

She looked at me, and something like the old concern passed fleetingly over her face.

"You can sleep on the sofa tonight Steve, *but that's it*. Then maybe you'll accept that it's finished, and we can both move on."

(silence)

"Steve?"

"Okay... Yes...thanks."

She brought in a spare duvet, said a flat goodnight, and retired to the bedroom. The lock turned, which really hurt, and a few minutes later I heard her mobile playing 'The Laughing Policeman'. A third of one side of the conversation made it through the acoustics of the wall.

"Sorry.....nothing I could do.....see you tomorrow."

The Mad Doctor

Seeing a staircase, I walked up it and searched around for something familiar I could pin my rather confused senses to. I spotted Richard's office and pulled open the door, seeing before me a massive wall of bulging filing cabinets totally blocking the way in. From his perch on the top cabinet, Richard looked down on me, and grinned.

"Ah, hello old boy. We've finally cracked it. Everything that's ever happened in this unit in the last fifteen years has been documented on these forms. There's even a file for how many times staff have farted since their contracts commenced. The inspectors should be absolutely thrilled."

"Yes, things are well in hand here alright" I agreed, as I carefully pushed over the nearest cabinet and watched the whole lot fall like a house of cards, burying Richard up to his crimson neck.

Taking a coloured divider out of one of the files, I marked it 'Waste of Space' and popped it neatly between Richard's trembling jaws, pressing the top of his head like a hole-puncher, before closing the door quietly as I left.

"I'm sorry, but I've had enough" I said.

More than enough.

And with adrenaline flowing through my veins like rocket fuel, I

suddenly realised that I had somehow been given the power to overturn this insane world, and trample its vacuous conventions into the dust. I could turn my thoughts into instantaneous action, impose my will on every situation, and imagine the wildest scenario and see it happen. I was imbued with supernatural strengths and transcendental powers. I even had the ability to make something vaguely sensible happen for once.

In the mood to take all before me, I flew downstairs and entered the dining room, where Sidney appeared at my shoulder wearing an immaculate waiter's outfit, red carnation in his button hole and hair slicked back with pomade.

"Would sir prefer the larks tongue, or caviar *vole-au-vents*, this morning?" he mewled pitifully.

"You can stuff that for a bunch of soldiers" I replied tetchily, looking over his shoulder.

Behind him, the residents were all sat around the dining room dressed in shooting tweeds and plus fours, barking instructions in our direction.

"Hurry up, you slackers! We've got a bed to catch."

"Who do you think you are? We've got our rights you know."

"Step on it, or there'll be an official complaint."

"Chop! Chop!"

Seeing the monstrous meal re-heating machine vibrating in the corner, I had a flash of inspiration, and armed with my new superpowers I quickly reprogrammed the fan-assisted warmer to 'turbo suck'. Pointing the machine towards the carping crowd, I opening the aluminium door and watched them all disappear into its welcoming bowels, each delivering a parting comment as they went:

"It's too hot in here!"

"It's too cold in here!"

"Where's the juice?"

"I didn't order this!"

"These chairs aren't very comfortable!"

I then whisked the machine down to the postal area, and taking a large white address sticker from my utility belt, wrote:

**Please deliver this urgently to -
The Workers' Co-operative Community,
Somewhere in Wales.**

Returning to the main corridor, I then observed Cecilia systematically kicking and punching great holes in the walls as she proceeded towards me with a menacing, Mephistophelian leer on her face. Instantly, I summoned up a large metal grab of the sort seen in car crushing yards, seized her firmly (but gently) by the hood of her Marks and Sparks jacket, and manoeuvred her through the nearest window into a large blue bottle bank, on which I pasted the address slip:

**Officer-in-Charge
Public Protection Unit.
The Shetlands.**

"Believe it or not Cecilia, *other* people have rights too."

Depositing the bottle bank next to the meal warmer in the outside postal area, I next used effortless telekinesis to summon up a private militia, which I despatched into town to round up the large group of staff members who were currently on pseudo sick leave. After a short while, the malingerers appeared, variously dressed in pyjamas, nightdresses, bondage gear, gorilla suits and other items of regular midday wear.

"Ladies and gentlemen" I began. "From now on, receiving £1,200 a month for sitting at home with your finger up your bum is no longer a career option. You will either return to work immediately, or you will exchange your houses for tents. Do I have your full co-operation?"

"*Yes! Yes! We have seen the error of our ways!*" they squealed,

going on to demonstrate their fitness by lifting barbells, doing press ups and adopting Mr. and Mrs. Universe poses.

“Congratulations and well done” I rejoined, shaking each one of them by the hand. “I have arranged your transport.”

“Transport?”

They were then whizzed into the two large recycling bins at the rear of the unit, and addressed to:

**Fast Track Convalescence,
Bolivian Iron Ore Mines,
Bolivia.**

Taking a look around, I was pleased to see that the unit was now quiet and peaceful at last. Like no man’s land after a terrifying artillery barrage had ceased, the world stood still, and a profound silence baffled the senses. The clocks had stopped, the T.V. sets were dead, the activity board was blank, and there was not a person to be seen. It was obviously time for a well-deserved break and so I sat downstairs drinking champagne, eating truffles, and watching the manager’s favourite Marilyn Monroe video; until the feeling slowly returned that something was still wrong.

Something remained unresolved.

“Open the door” a voice rasped.

There was indeed a violet coloured door on my left, and with heart bounding, breath shortening and flesh creeping, I moved reluctantly but inexorably towards it. In best horror movie style, it swung open of its own accord and I was pulled into a dark chamber by invisible hands. The flickering light was provided by three or four black candelabra set on crumbling stone walls, before which I perceived a large Jacobean table surrounded by a dozen satanic forms. Looking like a group of gigantic ravens they wore sable cloaks, and peered at me through leather masks with hard, black eyes.

“Good grief, what a ridiculous getup” I said irreverently.

"Silence!" boomed the head honcho. "You are here to be sentenced for the most heinous crimes known to HealthTrust law. *Now, kneel before your masters!*"

"Piss off you pretentious sod" I responded. "And take off those masks, so I can see my accusers."

Stripping off their masks with a synchronised flourish, the satanic beings revealed a row of hideous, slavering animal faces.

"Ah... ha! I thought as much – the senior managers making a rare clinical visit" I said "What can I do for you?"

"Silence microbe! We are here to dispense omniscient justice!"

Although I should have been quaking in my boots, I couldn't help noticing that the weird animal faces were actually more recognisable than the managers' everyday physiognomy. Their true personalities shone through the grey, anonymous uniformity of their normal appearances, and I gazed with growing interest at the mean-looking weasel, the breast-beating baboon, the assortment of over-promoted aardvarks, and the strange hunched creature from the Island of Dr. Moreau, who said:

"You are charged and convicted of (a) insisting that patients take more responsibility for their own lives, (b) arguing that paper work is less important than effective clinical care, (c) suggesting that managers are overpaid, out of touch poseurs, and (d) implying that staff who receive £1,200 a month for not being at work should be sacked.This is unspeakable blasphemy of the highest conceivable order, and you are therefore sentenced to the most ghastly punishment it is in our power to inflict."

"And what is that?" I enquired.

"You will continue to work at the hospital's Psychiatric Rehabilitation Unit until the day you croak."

"Aaaaaarrrrrrccchh!!! No! No! No! Not that, you vile fiends" I shrieked in despair and outrage.

"Yes! Yes! Until the day you croak!" the drooling managers chanted, beating their fists on the table, and wetting themselves with delight.

"Please don't make me angry" I warned in a deepening voice, my

pupils involuntarily dilating, and my shirt splitting open to reveal a barrel of bulging green muscle above modesty-preserving elasticated trousers. *“Oh, too late! Now it’s your turn for a bit of natural justice!”*

Seizing the oak table with irresistible force, I whirled it around my head and watched the managers hanging onto it like bats in a tornado. On and on I span the table, seeing their puke pebble-dash the walls and their dribble splash the floor, thinking of the time and money these prize buffoons had wasted, enjoying every little moment of their overdue comeuppance, until at last I flung the table down into a dim, slimy corner; the perfect resting place for their ilk. But the managers had been carefully selected for their mindless obduracy, and I watched with interest as the table scuttled out of the room, propelled by pairs of cockroach legs, scurrying for freedom, pausing only briefly at the coffee machine.

“Hang on a minute” I said.

And there was just time to stick on the address:

**Flip Chart Heaven,
Pie in the Sky,
Never Never Land.**

Punching the air like a triumphant quarterback, I revelled in the emptiness of the unit and the cathartic moment. At last I was free, and the quivering front door appeared in the distance like an approaching star gate, but when I got near enough to touch it, all I could see was a massive grey portal towering above me at an impossible height. Devastated, I wondered why fate had dealt me such a cruel blow at such a late stage; until a spectral hand rested on my shoulder and made my soul jump through my throat:

“I need a cigarette now!” roared a familiar voice in my ear.

“Then I’m afraid you’re going to be bloody disappointed for once” I said.

“What! I need a cigarette now! Now! Now!” she yelled.

“Not now” I whispered.

“*Now! Now! Now! Now!*” she chanted, as I turned my back, and waited for providence.

“*Now! Now! NOW! NOW! NOW!..... **BANG!***”

My head jerked around and I saw that the lady was no longer there. Instead, a huge effigy sparked and flashed, sending plumes of white fire into the air, filling the corridor with acrid smoke and thick soot. The door swung open and I fled.

Silently, I watched the flames licking the gable ends of the empty unit, the windows cracking and the walls going slowly black. Resisting the temptation to bring a toasting fork and loaf of bread, I contented myself with warming my hands on the inferno, singing one chorus of ‘Roasting Chestnuts on an Open Fire’, and walking past the nearby telephone box without delay. Richard and some of the other stragglers stood next to his customised bubble car with Roll Royce grill, looking like stunned survivors of a broken Chinese terracotta army, and decidedly ill. Saying nothing.

From then on it was easy. My magical powers were unstoppable, and as I strode through the frozen streets my imagination performed effortless miracles of reform and revision. The moon became full and bathed the town in friendly light, a warm breeze began to thaw winter’s grip, and curtains were opened revealing cheerful families with smiley faces. Children played without being cruel, adults waved without design, and dogs approached with wagging tails and no bite. I replaced every cheap and nasty concrete carbuncle with wonderfully restored period buildings, emptying Swiss bank accounts to pay for it. I removed all signs of graffiti by organising chain gangs of graffiti artists to lick the buildings clean, and I ensured that every scrap of litter was returned to the perpetrators, through their letterboxes.

All those who continued to fill the town with their pets’ dung, woke up to find the excreta occupying their living room carpets, and every criminal was automatically victim to the same crime themselves until they stopped. There was no more career

unemployment with twenty-five year old men skate boarding all day, no more compensation for being stupid and falling over a matchstick, no more sick pay for professional hypochondriacs, and no benefits for those who only used their walking sticks when somebody was looking.

People stopped climbing over each other in their thirst for toys, they accepted they weren't always right, they grew up and had a sense of history, tradition, nationhood and community. They gave up wearing baseball caps and living off their parents until they were 40, they stopped talking about things instead of doing them, and they promised to forget about money for at least ten minutes every day. They rediscovered the idea of God, thought about how feeble and short-lived human beings really were, and put arrogant sneers and smart suits into smart perspective. 'Fat cats' were put on crash diets, and golden handshakes for corporate failures were re-routed to state pensions for ordinary heroes. 'The Age of the Ego' was reviled, outlawed and forgotten.

Well, that was the long-term plan.

On my way down the street, I noticed the old lady brushing the pavement in front of her house again, while the two post-punk wastrels were once more spending their valuable time taunting the old dear with monosyllabic insults and girlish tittering. Without further ado, I arranged for these fine young people to be escorted to the public toilets by four nightclub bouncers, who carefully supervised them cleaning the urinals with cotton wool buds, before enlisting them in the army. I then marched steadfastly on towards the council estate - ready to face my greatest challenge.

Happily, my super powers did not fail me, and I surged through the streets erasing graffiti, repairing fences, replanting shrubs, replacing broken windows, and sweeping up seas of glass shards and rubbish, like Robocop on a mission. The blue police lights were again illuminating the sky above the pubs and shops in the centre, and I observed an embattled young constable trying to control a mass of braying half-wits by wagging his finger at them.

It was time for real action, and I transported the policeman to a safe position outside the estate, replacing him with a battalion of seasoned commandos who easily rounded up the gurning thugs and took them away in cattle trucks for a year's moral retraining on Dartmoor. One jug-eared oaf temporarily escaped, and complained:

"This ain't fair! They must be breaking some law doing this!"

Pointing out his hypocrisy in seeking shelter from the very law he had flouted with contempt all his half-life, I sent him spinning towards his whining chums with a contemptuous flick of my finger. The last truck moved off with shrill piglet screams emanating from the back, and rousing applause echoing down the streets as grateful residents reclaimed their lives for the first time since 1991. Handing my garlands to a young girl with large green eyes and raven ringlets, I then quitted the estate like Elvis Presley leaving Hawaii, and set sail for home at last.

A heady combination of fairground lights, perfumed air, and the stentorian boom of my own heartbeat, propelled me along the roads of Edwardian houses and down the gentle slope to our little 'neighbourhood watch' retreat. I put pink spots on the matching silver cars, introduced the workaholic man to his workaholic wife, and changed our three bed-roomed house to a four bed-roomed villa so that the copyists across the road would have an interesting experience the following morning. I strode into the house, found Carol waiting patiently for me in her dominatrix outfit, and gratefully accepted a glass of vintage claret which she handed across to me, whilst winking a welcome at my hump-fronted trousers.

"Welcome home esteemed husband. May I give you succour?"

"By all means, my dear."

I settled back and watched the hypnotic grind of her athletic white flanks, while Motorhead played sweetly through my headphones, and a Cuban cigar sat snugly behind my right ear.

"I'm going to discharge myself, in a minute" I said.

All was well with the world; and perversely I slept.

"Wake up" said a distant voice.

"WAKE UP!"

The problem was, I couldn't. I really couldn't.

Kate

2005

When I did wake up, I was still disorientated, and the room hung around me like a pointillist painting, with dots of colour forming half-familiar images on a dazzling white canvass, forcing my eyes firmly closed again.

“Dad.”

The word brought the room vaguely into focus, and now I could make out three people looking down on me, in my white sheets in a white room with white light.

I was back.

Almost.

For a while I felt bewildered and numb, with my memory mercifully dim, selective and distant. I was drained rather than refreshed, and my mind seemed to stall whenever it met the past, and the problems preserved there. Drugs had obviously put out the fireworks, but when I tried to refocus my mind, uncover the causes of my collapse and get things back in perspective, I struggled. It was difficult enough for the therapist to help me revisit past events, but it was impossible for him to change the world which had created those events, and would create them again – if it got the chance. Therapy could only help me ‘adjust’ to things I thought were wrong. In a sense, it could only help me fail.

My ‘aberration’ had certainly superimposed a liberating fantasy on the world, but the reality itself stood unchanged, leaving me balanced between the anaesthesia of collapse, and the alienation of recovery. I sat in limbo, sensing society waiting outside the ward, and fearing its incursion. I hid within the hospital, far away from my hometown and the embarrassments contained there, waiting for the past to heal and the future to happen. The unit, of course, remained gloriously untouched by my pyrotechnic delusions; its armour-plated system destined to kill the patients with disabling kindness, long after my nightmare was over.

So, time passed in the nondescript day room while people with parallel scars on their arms dived for broken crockery, others returned from the E.C.T. suite with glazed looks and cups of tea, and new admissions combined their paranoid delusions and hypo-manic flights of ideas into a

bedlam of noise and threat. Staff chased fleeing patients, and sometimes patients chased fleeing staff, while opportunist anorexics made for the nearest toilet to regurgitate pellets of food under cover of mayhem. Snooker balls went through windows, and a 1950's drug trolley squeaked around the ward four times a day, dispensing manna from neuroleptic heaven. Hours of boredom were punctuated with flashes of bloody violence, and intra-muscular injections peppered supine buttocks with daily regularity. Then I began to receive my first visits.

"Good morning, Dr. J——" said a voice at my elbow.

"Morning" I replied, wondering who the pin-striped stranger might be.

"I'm Dennis G——. I represent Legal, Accident and Slow Recovery Ltd., a firm specialising in employer's liability."

"Really?"

"Yes. Forgive the intrusion, but I think you may be entitled to substantial compensation for the stress which led to your recent...hem...difficulties, and I would like to offer our firm's services."

"So, you're an ambulance chaser?"

"That's not a term we would use ourselves Mr. J——. We see our job more as defending the rights of the little man against large, negligent organisations."

"Very noble" I commented "but I'm afraid it goes against my principles to suck money out of a system which is already riddled with users and charlatans, so I'll have to pass on it."

"Surely your family...."

"No, sorry, please don't wheel out your manual on persuasion techniques. I'm certain."

"Well, if you're absolutely sure you're certain, I'd better call back another day" he said. "Perhaps when your wife, or doctor, is present?"

"Look, the fact that I don't want to pursue the easy money of litigation doesn't make me mad. Maybe I don't want the stress, or need the greed. Maybe I just don't want any part of a society which is turning into an anarchic shambles."

"Of course. Very well" he said, in a manner and tone usually reserved for unreasonable children. 'Bye for now Dr. J——."

"Goodbye indeed."

I watched his blue and white chalk striped suit disappear down the corridor, and wondered if 'tosser' ran all the way through his body, like 'Brighton' in

Brighton rock. I also wondered where he'd got his information from, and why people seemed so determined to destroy their social organisations with individual avarice. It was like bees eating their own hive. A few days later, a 'Legal, Accident and Slow Recovery Ltd.' standard letter arrived:

Dear Dr. J—,

Further to the interest you have shown in pursuing a compensation claim against your employers, we would be very pleased to act for you in the matter, and look forward to receiving your advices in due course. We hope you don't recover too quickly from your injuries, and assure you of our best attentions at all times.

Sincerely,

D. G —.

During the next ten days I received a battery of extremely persistent letters, leaflets and telephone calls from Mr. G— and his cronies, but on the eleventh day they suddenly dried up. I was soon to discover why. A letter arrived from the Trust.

Dear Steven,

We have now completed our investigation of the circumstances leading up to your current period of sick leave.

All relevant Trust policies and procedures have been consistently applied on the unit and we feel confident that the working environment has been enhanced by 'Investors in Workers' initiatives and 'Improving Peoples' Lives' protocols over the last 5 years. A detailed risk assessment undertaken by the Trust Audit Department has shown that activities on the unit average only 6.5 on the 'Watch yourself' scale, and we have therefore concluded that the working environment has only an incidental connection with your current problems. I should also mention that 87% of Trust employees who recently returned their questionnaires agreed that working conditions in the Trust were "fabulous".

We note that you have decided not to pursue a compensation claim, and take this as an acknowledgement of our blameless position. We are of course quite happy to approve an extended period of sick leave, in the hope that you may one day return to your work fully fit. The Occupational Health Department have things well in hand, and your next appointment

will be notified sometime in 2009 or 2010.

May I take the opportunity to enclose a complementary ashtray with the Trust's new '4 Star Care' crest, and a copy of the Human Resources publications 'Becoming a Long Term Patient' and 'Self-Therapy'.

I should mention, however, that we have recently received information which suggests that you may have more to add to your statement about the unfortunate incident involving resident Cecilia S—— last month. We would like to interview you about the matter as soon as possible, but recognise that this may have to wait until you are more fully recovered. We will be in liaison with your consultant Dr. P——.

Best Wishes

R. S——.

Unit Manager

My eyebrows had long since merged with my hairline, but I sat back in my smelly leatherette chair and laughed grimly at my own astonishment. The gritty cogs of the machine were obviously closing doors against me, and I knew that before long I would be surrounded in pearl, like any other irritant in the oyster's mouth. The organisation was a vast homeostatic mechanism which neutralised every challenge and equalised every disturbance, perpetuating and reproducing its myths and stupidities like an unstoppable juggernaut.

But the last paragraph sent a chill up my back, as I tried to revisit my last evening on the unit, and make sense of the dislocated images, mist-filled gaps and painful intuitions which might somehow explain this forthcoming 'interview'. What did it mean?

"Hello, there."

I swivelled 90 degrees and observed the svelte figure of Carol weaving through the coffee tables towards me. She had clearly spent the morning in the bathroom as usual, with freshly tinted hair, sparkling teeth and the intermingling aromas of shampoo, anti-perspirant and patchouli oil intoxicating all in her wake. But as momentary eye contact was lost, my visceral admiration wavered, and I detected that her bonhomie was far too extravagant for the circumstances. She always performed for new audiences like Betty Grable at a big break audition, effortlessly switching her binary personality from 0 to 1 for maximum effect, but this time

something was different. As she sat in front of me ignoring everything I said and beaming sideways at perfect strangers, I noticed an extra special *esprit* in her manner which I hadn't seen for many years. After 15 minutes of unreal politeness, awkward vacillation and routine fencing, I looked at the right ear which was turned towards me, and enquired:

"Where are the kids today?"

"Sorry?" she said, pulling her attention away from the pink-shirted charge nurse at the end of the room.

"Where are the kids today?" I repeated.

"Oh, one of my friends from work has taken them to see Star Wars XXIV at the Ritz."

"I see. Is it Andrea?"

"Sorry?" she said, abandoning her non-verbal rapport with a tweedy young doctor in the doorway.

"Has Andrea taken them to the cinema?"

"Oh no. It's one of the others – nobody you know."

"It would have been nice to see the kids."

(silence)

"*It would have been nice to see the kids!*" I insisted.

"*For goodness sake, there's no need to shout!*" she shouted. "I just thought it would be better if they enjoyed themselves for once. It's no fun for them in here."

"I didn't choose to be in here."

"Didn't you?" she sneered. "Quite a few of your workmates seem to have been in and out of places like this, just so they could cop out. Why not you?"

"For God's sake, I had a genuine breakdown! It was because I was having to cope with all that low grade corruption and filth and endless stupidity that I couldn't take any more."

"Well, in the end it doesn't make any difference whether it's genuine or not. You're still here."

"It doesn't make any difference?"

"No not really."

"But I was fighting for something that was right and fair. Something less wasteful and less rotten...."

"If the world's as mad as you say it is" she interrupted "the only sane thing to do is to adapt to it, otherwise you'll be driven mad yourself."

(silence)

"You've always been anti-social Steven. That's your big problem."

"Well..... if society means a collection of performing narcissists, mindless bureaucrats, animalistic thugs and shameless freeloaders dancing together over the cliff – yes, I'm very much against it."

(silence)

"Anyway" she said "I've got to meet Biler...my friend at 4 O'clock to pick up the kids."

"Bill who?" I enquired.

"Look, I can't explain now" she said. "I'll write soon, but I'm going away for a few days break."

"Whereabouts?"

"I'll write soon."

"Take care then" I said, no longer wanting to hear the truth. "And have a nice time."

For a few moments she looked shaken and contrite, her eyes shining like mine, shared memories holding us in our seats, but then she was gone. And gone for good (or bad), I could no longer tell the difference. Only the perfume, and the image of her catwalk back remained.

"You're going through a tough time Steven" somebody commented.

"It could be better" I agreed, not really in the mood for talking.

My interlocutor was Stan, a man of about my age who had been admitted to the ward three weeks ago with an acute relapse of psychosis. He was stable again now, and I had been impressed with his articulate understanding of mental illness, society and the ward. He seemed curiously at peace, even though his family rarely visited and his early promise at university had been annihilated by schizophrenia and lengthy periods of hospitalisation. His 'romantic life' had disappeared at roughly the same time as his success, and no doubt this had made him sensitive to my current plight.

"I'm afraid they don't really understand places like this" he said. "It's embarrassing and frightening to them."

"I suppose you can't blame them for wanting to be somewhere else" I said.

"Yeah. Love and morals only take people so far. Then it's 'what about the children', and 'I deserve a life too'."

"You don't think she'll be back then?"

"Who can say? I'm only glad I don't rely on things like that any more."

"So what will you be doing when you leave?"

"I'll go back to the village."

"Where's that?"

"C—— Village. It's one of the religious communities up on the H—— hills."

"Oh, one of the therapeutic communities?"

"I suppose you could call it that, but it's really a way of life rather than therapy. About half the people who live there have never had a mental disorder, they just like the idea of working as part of a large family. It's back to basics, of course, and 'close to nature' in a way which sounds cheesy, but really isn't. You ought to come out and see for yourself."

The tea trolley trundled around the day room, interrupting our conversation, and my mind began to tick. I was in the mood for radical changes, as people always are when a crisis breaks the mould of routine and complacency. Could C—— Village provide a solution for me? I knew that these places sometimes took whole families, and my imagination began to soar in a wildly evangelical direction. Could I persuade Carol.....?

The next day I woke up with the larks (two patients were making love in the bathroom, and another was absconding down the alarmed fire escape), and after an early breakfast I set to work writing the most important letter of my life.

Dear Carol,

I don't want to revisit the problems we've had over the last few years, and I certainly don't want to apportion blame. I remember the good times as well as the bad, and underneath it all, I still love you.

There may be a way out of these problems, and I want you to think carefully about what I'm going to say, for all our sakes. One of the people here has told me about a place not too far away, where families can live and work together in a farming type of community. He says it brings people closer together and restores their sense of value.

Please tell me that you would like to hear more about it. It could make all the difference to our lives. It could be what we really need.

Tell the children I'm thinking about them.

Love

Steve

Putting this in the post, I picked up my incoming mail, dodged the tweedy doctor who seemed to be stuck in the doorway, and returned to my room. I went through the usual invitations that mentally ill people receive from credit card companies, and at the bottom of the pile I found a letter from Carol which must have been posted the previous day.

Dear Steve,

Sorry I've got to break the news to you this way, but I didn't have the heart to tell you yesterday. Things have been very difficult between us for years now, and your illness was the last straw. I can't go on like this and I would like us to spend some time apart. We've talked about divorce before, and when you're better I think we ought to go through with it. I won't even ask why you were in that girl's flat that night.

I've met a man (Bill) who really cares for me, and who has shown me the things I've been missing. He's been very kind bringing around toys and sweets for the kids while you've been away, and they both seem to like him. He's so honest and open, I just can't throw the chance away.

You may think I'm being insensitive doing this while you're in hospital, but Bill says a clean break will probably do you the world of good. He's so thoughtful, he even asked me if it would be okay for him to send you a 'get well' card - you can see why I want him to move in with me. Please say you understand.

Love

Carol

P.S. Don't worry about the garden. Bill has brought over his new cylinder mower which cuts the lawn in stripes.

I resisted the gut reaction to rip the letter into shreds or burn it in my crested ashtray, knowing that this would then prevent me from subjecting it to endless dissection and reinterpretation. I was aware from previous experience that short term anger would probably give way to longer term wishful thinking, and that until further information arrived I would paw over every piece of existing evidence with a detective's eye. Did the letter really mean what it looked like at first sight? Was there any hope between the lines? Did the description of my competitor reveal any weaknesses? The self-flagellation could go on for weeks and months, right down to the bone.

I felt trashed.

Certainly, this wasn't the best preparation for my weekly meeting with the multidisciplinary team, and when the time came to walk down to the meeting room, I felt more like hitching a horizontal ride in a hearse. But I must have looked better than I felt because the first thing the consultant said was:

"Well Steven, the medication seems to have suited you. The nurses say you haven't reported any 'unusual' sights and sounds for over two weeks. No voices in your head, no radio broadcasts meant just for you, and no feelings that the world was against you. You must be feeling a lot better?"
"Well, I've given up the fight against vastly superior odds, if that's what you mean."

"Yes, that sounds pretty rational to me."

"How long do you think it will be before I'm fit for work?"

"Er...well looking at your occupation, it could be quite a while yet, but I'm certainly pleased with your progress."

"So, what happens now?"

"Well the next step is to reduce your medication towards a maintenance dose. Then the nursing staff will arrange some home leave for you, to see how you get on outside the ward. I'm sure your family are looking forward to having you back."

"Absolutely" I stupidly said.

"Excellent."

"Have you heard of C—— Village?" I hedged.

"Christ! You don't want to go there do you?" he laughed. "It's all mumbo jumbo and 'let's worship the divine leader'."

"No different to here then?" I remarked.

"Very good, Steven" the consultant chuckled. "Now. Are you absolutely sure we've dealt with all the issues that were troubling you."

"I think so" came my unconvincing reply.

The consultant had a backlog of ill and 'ill' people waiting to be admitted, so in the following days he chose to overlook my increasingly sardonic remarks and my growing interest in religious communities, keeping instead to the agreed discharge care plan. I had received nothing further from Carol, but a preliminary letter had arrived from her solicitor advising me that divorce proceedings were about to begin and that I might want to appoint a 'legal advisor' of my own. The day of my home leave was getting

nearer, and I was finding it difficult to explain my wife's ongoing 'incommunicado' status to the nurses. Sleep was difficult, and the headaches were returning.

The following day, I sat slumped in 'my' chair in the day room, thoughts neutralising one another, clouds gathering, nerves jangling and.....

"Hello, Steve."

It was Kate, and my heart jumped into my loins.

"Hi, there" I murmured. "Fancy seeing you in a place like this."

"Well, I told you I was starting the training. I've got my first placement on the elderly ward, downstairs.

"Oh.... Still, it was nice of you to look in."

"Well, I saw your wife at the theatre and she.... she explained that things weren't exactly..."

"Brilliant?"

"Er...yes."

"Was she alone at the theatre, by the way?"

"Well...no."

"So you probably wondered if she'd traded me in for a new model?"

"Well yes, but she explained how she was getting a bit depressed about it all. Apparently, she was trying to cheer herself up on a works outing, but only one other person turned up..... He was a cocky bloke with a very long nose. I didn't like him much."

"Yeah, I get the picture."

"I feel really sorry for you Steve. You look dreadful."

"Well..... never mind about me. What have *you* been up to?"

"Oh, apart from really enjoying the training I've.....er.....I've got myself engaged."

(silence)

"Say something Steve."

"Congratulations, Kate."

"There's something else Steve."

"What, even more wonderful news?"

"Yes.....II don't really know how to say this. You may have heard about it already. But the night you had your breakdown....you were saying all sorts of horrible things in your sleep. It sounded like you were really angry and you wanted to kill somebody. Then you talked about Cecilia,

and how you'd "fixed" her once and for all.....It was awful Steve.....I had to tell somebody."

"Ah....I wondered what Richard meant in his letter."

"So you know about it?"

"I can't remember a thing about that day Kate, apart from seeing you. But Richard wrote to say I was going to be interviewed about Cecilia when I'm better. Now I know why."

"I'm sorry."

"You're certainly an idealist, Kate. The book comes before everything else doesn't it?"

(silence)

We prolonged the meeting for another ten or fifteen minutes, exchanging platitudes and slightly uncomfortable looks, before she bid me an unlikely farewell. I looked at her departing hour-glass figure like the man with X-ray eyes, imagining myself taking chances rather than leaving them, seeing my tongue flicking down her spine to the coccyx, feeling the nylon over her knees, drowning gladly in the flesh and blood.

"Hello, Lawrence" she said to the tweedy young doctor wedged in the doorway.

"Hi" he said, waving his hand (although it was still in his pocket), then strutting away, his impression left on the woodwork, his plans in the toilet. Gazing through the grimy, cracked window which overlooked the car park, I saw Kate and Brad Pitt getting into a nice red and white Mini Cooper (with pepper pack, no doubt). At least she had the grace to look a bit sad.

But only a bit.

The next day, one of the nurses told me I had some more visitors, and I craned my neck with anticipation as the clattering footsteps echoed down the corridor. The hammer came down and my emotions hit the bell, but on seeing three familiar faces from *the unit* turn the corner, those same emotions crashed to ground with a sickening thud (and kept on going).

"Christ" I said involuntarily.

"Well, that's a nice greeting" said one of the nursing assistants, cheerfully.

"What brings you here?" I asked knowingly.

"Oh, we felt like a long run out in the car, and this was a good excuse" he answered with disarming honesty.

"We had a bump on the way here" said Sidney.

"Pardon?" I said.

"We had a bump in the car, but no damage done."

"Oh, good."

"How are you, Steven?"

"Well, I'm due to go on home leave soon, but my wife's decided to divorce me so it's looking a bit awkward."

"Bloody Hell Steve" he chuckled. "Never mind though, there's always a bed for you at the unit."

"That's reassuring."

"I thought he looked as shite as a sheet" said Sidney.

"Still, you're a dark horse really Steve. I never thought you'd screw the system like this."

"What do you mean?"

"A nice few months on the sick, most of it recuperating in the pub."

"But this is real sickness."

"*Ha! Ha!* That'll be the day. God, you're a droll bugger. How do you keep a straight face?"

"Change the subject will you?" I said, feeling a strange anxiety creeping up on me.

"Oh, well, things are pretty much the same at the unit, with plenty of new initiatives, zero movement, lots of sickness and...."

"Are you still doing the charity walks?" I said, noticing for the first time that all the staff were wearing Telly Tubby costumes, beautifully co-ordinated with Pearly King top hats and antique red noses, dating back to the early din period of charity mindlessness.

"Oh, no Steve. Charity walking is so *yesterday*. We're into charity hawking now."

"Hawking?"

"Yes. It's dead simple. We all dress up and stand around spitting at each other's boots for an hour while people queue up to watch. It's an absolute riot of 21st century *fun*."

"Ha ha ha ha" we chuckled.

"Well, as long as you're having *fun*, that's the main thing" I said. "And it's all for charity, of course."

"Oh... er....yes.....naturally."

"Have you heard about Cecilia, by the way?" interrupted the other assistant.

"No?"

"She died in hospital last week."

"Oh."

"Yes, she was in a coma you know."

"No, I didn't know."

"There's one hell of a stink going on about it. But at least you're well out of it."

"Yes" said Sid. "There's a big noise coming down from hindquarters ...er...headquarters, to sort it out....."

"I need a cigarette now" cut in a familiar voice.

It was indeed a familiar voice with a familiar question, but for some reason it sent a seismic shock wave running up my back. The tribulations of the last few months seemed to hurtle back into full view, and my numbness vanished. The future opened up nightmarishly around me and a sickly phlegm filled my throat. The air crackled and hissed, and an old enemy returned; refreshed.

"I need a cigarette now! Now! Now! Now!" Hettie suddenly howled.

"We'd better be off Steve. See you soon. Sorry it's all a rush."

"Wanks very much" said Sidney, pointing at me.

"Bye Sid."

"We're buying a new house you know – I can't wait to put down a deposit."

(silence)

I wasn't really aware of the squad departing, and after a while I wandered down to my room and sought the refuge of bed. My head hammered, but sleep seemed to arrive instantly, and I twisted away into a dreamscape of schoolyards, fruit machines, sickly sweet smells, and sadness. I saw my mother's white face accusing me from the shadows, and the sagging shell of our old house with its cluttered rooms and grates with ashes. I ran through endless streets of rain and sorrow, panting and terrified, until at last a yellow light appeared above a varnished door, and I saw my children looking silently down. I shook the bolts, and circled the house, finding a narrow view inside - where familiar thighs gripped a half known man, and convulsions merged with spider blackness.

Then all around a pink sea span with hypnotic swirls of crimson, and a bright red sunset appeared before me.

Epilogue

A year later

I woke up without the alarm, and looked through the bedroom window, seeing before me a panorama of green hills, glittering streams, yellow fields and market gardens. The church and community hall were also in sight, and I admired the way their striking, Scandinavian lines still somehow harmonised with the ancient English landscape. I wasn't the first one up, and our 'family' now numbered ten people; six adults and four children. We shared the domestic chores between us, and today it was the turn of myself and two other residents to make the breakfast.

There were many houses like this in the village, and together we ran the farms, workshops and training centres which made up the community. We lived and worked together, took turns with the jobs and talked things through when problems arose. There were some arguments, but not many, because the cows and fields wouldn't wait for debate, and our lives followed well-established routines rather than 'progressive' projects. We received no money, lived quite basically and followed the seasons rather than our ambitions. We lived only on what we made, grew and earned, and we agreed that the community as a whole was just as important as the individuals within it.

To us, a constructive act was worth a thousand words.

I had now revised my views of psychiatry, the unit's patients, my marriage and me. We had been on collision course from day one, and it was probably pointless to attach blame, theorise causes or crave reforms. The collision was driven by unfathomable chaos, massive seamless shifts in personal, political and organisational affairs, and the rolling storm of existence which ultimately buried the individual alive. For those reasons, I could no longer blame society for being puerile and materialistic, managers for being bureaucratic, patients for being over-dependent, and colleagues for being irresponsible. They in turn could easily blame the conditions and constraints which surrounded them.

It had been a painful process, but my unconscious mind had finally stripped away the layers of repression that had numbed and diverted the pain of earlier years. One by one, the feints and parries of materialism, knowledge, and relationships had fallen away to expose the simple truths of an angry,

isolated, struggling life. A life which I could now rebuild on stronger foundations.

So I boiled our eggs and toasted our bread, casting my mind back to the painful days before I came to C———, and giving thanks that the recycling thoughts were now less frequent and less vivid. I had learned the hard way that life could only be enjoyed by swimming with the tide, and that my foolish attempts to grasp parts of life to myself were always destined to fail; each experience slipping through my fingers like water. Life was naturally dynamic, and at times I had resisted the changes, inviting pressure to grow around me. In a ship riding broadside against the rising swell, I had seen the anchor chain snap, and I'd plunged into the depths.

But helpful hands had pulled me out, and I'd moved away from competition, acquisition, exploitation and anger, towards a safer harbour of community, sharing, equality and acceptance. My new family had supported me, I had listened to my own heart and left my vanities behind. I had regained the human spirit, and become well again.

Carol had been profoundly shocked at my suicide attempt, and good old 'Bill' had been relegated to the past as soon as the size of his debts and the target of his ambitions had fully emerged. He had been "very keen" on providing my wife with a third child, but initially failed to mention the vasectomy he had received five years earlier – an oversight which cast many of my own failings into a more amenable light. She had certainly advanced as far down the road of infidelity as my tortured dreams had indicated, but my own chequered past clearly made this forgivable, and for a while the dropped jigsaw was back on the table. She disapproved of C—— Village, however, and her letters were becoming less frequent.

I jerked around to a piercing voice.

"Some health service managers have received pay rises of up to 30%, raising suspicions that money is being taken away from basic care to fund 'fat cat' salaries....The number of people saying they're too stressed to work is rocketing...but many of them are just so bored they want a rest from work. Some Doctors dispense sick notes on demand...The compensation culture has made them very careful... but if malingerers were dismissed, there could be millions available to help the bankrupt N.H.S....."

I leaned over, switched off the radio, and went out to work. It was late summer and hot, the harvest had started, and my lean brown body ached enjoyably as I greeted the others and we walked down the dusty path, towards the farm. A row of rooks watched us from the bough of an ancient oak tree, and wreathes of wild flowers covered the nearby hills, while behind us trudged the oldest resident in the village, with his incongruous blunt scythe.

Along the way, I opened the solitary letter which had arrived for me that morning, and read:

Dear Steven,

You will be glad to hear that our investigation into the death of Cecilia S— — last year is now complete. Evidence has now come to hand that a fellow resident assaulted Miss S—— immediately before the reported incident, and that this indirectly led to Miss. S——’s fall and subsequent death.

We are sorry for any distress the investigation has caused you at such a difficult time, but the evidence above mentioned has only just come to light following a similar incident on the unit last week. The person responsible has admitted involvement in Miss. S——’s assault too.

All the best for the future,

R. S——.

So, a reprieve after all this time.

I carried on walking, adding a merry whistle to my skipping gait, surprising my companions who hadn’t heard me whistle before, and who no doubt wished they would never hear it again. We arrived at the East Field and began the day’s work, gradually feeling the sun climb and fall on our backs, seeing the gold sheaves multiply, and the land gradually return to earth. Then, late in the evening, we turned for home, the old black sheepdog ran ahead, and (being sensitive sorts) we lifted our heads to the shimmering horizon.

Along the bumpy track, heading for the main road, came a little blue car with vintage go-faster stripes and rusty wheel arches. The window wound down and a girl asked one of my friends if this was the right way out. She turned in my direction, and the harps played.

It was Kate.

It was corny.

But it was very nice.

She had come to see me, but couldn't find anyone who knew the nurse called Steven J——. This was probably because at C———— we only called each other by our preferred names or nicknames, and I was known usually as.....well.....something else. I was of course no longer a nurse.

The others left us, and we looked at each other with wide eyes.

"I'm sorry, Steve" she said, moving a little closer.

"No Brad Pitt today?"

"Definitely no Brad Pitt."

The church clock struck six, and we walked towards our new home, in a dream.

Without shadows.

Hospital Suicide of Local Man

Dr. Steven J——, a local mental health worker, was found dead in the bathroom of C—— Hospital, an inquest heard today. He had been a patient there since suffering a mental breakdown six weeks ago. Dr. J—— was discovered bleeding heavily from cuts to his wrists by a concerned member of staff, and was transferred to The District Hospital where he failed to recover from his injuries.

Consultant Psychiatrist Dr. P—— told the Coroner that Dr. J—— appeared to be recovering from his illness and was expected to go on home leave the following weekend. He did not feel that a recent reduction in medication had any bearing on the matter.

In a letter to the Court, Mrs. C. J—— stated that her husband was a sensitive hardworking man who took his job very seriously. She could think of no reason why he wanted to end his life, although he had recently been caught in a fire at his workplace and was badly traumatised. The Coroner's verdict was suicide.

James A——
Court Correspondent

Sidney sat in the middle of his 1970's dystopia, admiring the composite stone fireplace which had gradually grown around three quarters of the lounge and now boasted eighteen tasteful alcoves for subdued lighting, pot plants, paperback books, and three telephones. Blue ladies in plastic frames rested on oceans of diagonal pine cladding, while a whirligig crimson shag pile carpet completed the scene. He could even remember *having* two shags on it in 1979.

By 1999 he had the piles to match.

"I gave somebody the push at work a while back" he told his wife.

"Oooh.... I didn't know you were in management now Sid."

"I'm not love."

(silence)

"It was the evening I went back to collect my copy of 'Roget's Thesaurus.....'"

"Llewelyn?"

She only used his hated first name when something serious was about to happen.

"It was an accident really.....but there was a tussle at the top of the stairs.....and....."

