

## Paper for VICSERV Conference April 2006 by Sandy Jeffs

### The Politics of Asylum

Large institutions like Larundel were what might have been described by John Arlidge in 1854 in his treatise on the state of lunacy as 'the colossal refuge for the insane...where a patient may be said to lose his individuality...a gigantic asylum is a gigantic evil and figuratively speaking a manufactory of chronic insanity.' Larundel may not have produced such a 'gigantic evil...in the manufactory of chronic insanity' but my own experiences of the unique culture of Larundel, revolving around the sharing of one's madness with others, sometimes led to an excerebration of one's own illness. But did Larundel ever provide asylum? I admit I enjoyed walking around the gardens, smelling the roses, sitting beneath the gum trees and walking the extensive paddocks. I knew I could be there for as long as I needed. I was fed and housed and sometimes cared for. But it was place of emotional pain and custodial care where both good and bad happened. There were many horror stories in the annals of Larundel's history punctuated with moments of healing and care.

To mark the final closure of Larundel in 1999, after the last ward was decommissioned, it was decided to have a farewell ceremony. It was a hastily prepared function to which people who had worked there as nurses, clinicians, administrators, social workers, occupational therapists and maintenance staff were invited. A friend of mine got wind of this while she was working in an acute psychiatric ward as an advocate for the inpatients, and alerted me, suggesting I go along. I'm glad I did. I was the only person in the room who had been a former patient. I asked to address the gathering, some of whom I recognised as staff who had looked after me in my many admissions. I felt the weighty responsibility of knowing I was speaking for every mad person who had ever been in Larundel. I reminded them that Larundel only ever existed because of madmen and women like myself, and that we were standing on sacred ground haunted by mad spirits. I suggested Larundel was like a church no longer in use, and a desanctification of it was needed, a blessing to release the souls of the tortured mad who had paced these grounds, captive to their minds' unease and society's neglect. I then read two of my poems: It was a poignant occasion, and for me full of solemn memories.

The once rambling gardens and rolling paddocks of Larundel are now a sprawling mass of houses and courts and high-density living. Carefree cries of families oblivious to the history of these once troubled precincts now mingle with the ghosts of the mad who once wandered here. Will these old madhouses on the edge of town be forgotten? Will the sighs of the lunatic looking longingly to the outside world be remembered by anyone? Is what we do now better? Is today's catchery for mental health, *care in the community*, a reality? We have closed the madhouses, but do the mad really receive more recognition, care, compassion; indeed, asylum?

One of the first people to use the word **asylum** as a name for a madhouse was the Englishman George Man Burrows in the early 1820s. This was a time in madhouse history when the English reformers such as William Tuke were instrumental in establishing asylums such as the York Retreat. Tuke instituted his therapeutic model of 'moral treatment' on the ideal of bourgeois family life. He minimised restraint, and patients and staff were encouraged to dine together, live together and work together.

He encouraged daily routine. His therapy was based on rewards and punishment, kindness and reason, mildness and humanity, in the hope of restoring of self-control. One was taught how to overcome one's morbid properties resulting in the strengthening of one's mind to create a self-reliance. He had hoped to facilitate the cure, or at least soften, the destiny of the sufferer. This social movement aimed to treat the insane with humanity and dignity.

The word **asylum** is defined in the dictionary as: an institution for the maintenance and care of the insane, the blind, orphans or the like; an inviolable refuge, as formerly for criminals and debtors, a sanctuary; any secure retreat. It comes from the Greek *asylon* the neuter of *asylos* meaning inviolable.

**Inviolable** means: that must not be violated; that is to be kept free from violence or violation of any kind or treated as if sacred: an inviolable sanctuary; that cannot be subjected to violence, or injured.

Madhouses such as Larundel, have been replaced by acute psychiatric wards and whatever services the Psychiatric Disability Rehabilitation and Support Services can provide with limited funding. There are huge problems identified in Australia's mental health services by reports such as the 2005 *Not For Service Report* from the Mental Health Council of Australia. Does the *care in the community* model offer asylum for the mad?

What characterises *care in the community* in 2006? Ill-equipped and unsupported families under stress trying to care for loved ones; people with serious mental illnesses who are isolated and living in substandard accommodation; poverty for many; homelessness for many, prison for a disproportionate number of mentally ill; lack of supported accommodation, needless suicides; more chronically ill people living in the community than ever before; an under-funded NGO sector that is trying to plug the holes left by an under-funded mental health service. The only glimmer of hope lies in the flickering flame of the NGOs who are working towards creating a better deal for the mentally ill. They give me hope that the community might really *care*.

What characterises an admission to an acute ward? Loss of power; a threatening environment; a culture of despair; loss of privileges; loss of freedom; forced treatment; confusion; anger; boredom; drugs and a short stay. Is this asylum?

And what about mentally ill women forced to share wards with threatening or violent men? How emotionally healing is such an environment? What about those women with a history of sexual or physical abuse? Too often vulnerable women are forced to share the wards with aggressive male patients and are made to relive their abuse by being in an environment that is dangerous rather than protective. These women are at risk of total emotional collapse in their already fragile state. Is this asylum?

We live in a world that demands quick and cheap solutions to problems. The western world is obsessed with fast cars, fast food, *fasta pasta*, fast banking, speed dating, fast lives. Psychiatry, too, has moved with the times and it is driven by the irrepressible and disturbing forces of diminishing time and space. What do I mean by this? The serendipitous discovery of antipsychotic drugs in the 1950s changed the face of psychiatry and emptied the overflowing madhouses. The shift from custodial

paternalism of the 1950s, 60s, 70s and 80s to expeditious treatment of patients in acute wards in the 1990s and onwards was made possible by these drugs. I have seen and experienced psychiatry's shift from the 'talking cure' to drug therapy and with it, a new paradigm of psychiatry that has come into being. I call it *fastpsychiatry* for the fast world in which the notion of asylum has disappeared entirely.

Acute wards are simply places in which to heavily medicate someone in the initial phase of an acute episode. One has to be either homicidal or suicidal to even access these wards, but when one does there is no notion of them as being refuges or sanctuaries. They are frightening places that don't even have the respite of a garden. People are expedited through these wards to make room for the next person. There is an over-emphasis on outputs and these are measured by an arbitrary and artificial one-size-fits-all set of parameters. The pressure is intense for people to attain recovery that is somehow measured by these pre-set measurable indices of what recovery is. We all know one person's recovery is not another person's recovery; that it is in fact a very personal journey best judged by the person themselves. As for these acute wards, I would suggest there is no attempt to even make them places of asylum because that would be time consuming and virtually impossible in the current climate. Time is of the essence in the modern world. The adage that best captures the spirit of our western world is *time is money*. In fact, the mental health system and acute wards are like a McDonalds drive-through where you can pick up a diagnosis and medication, with the CAT teams providing a home delivery service.

It is far quicker to medicate a patient than talk to them. This mind-set also pervades the private psychiatrists' consulting rooms as well. Many of my mad colleges talk of being shunted out of the consulting room after a brief consultation with a prescription and a hollow feeling that there was no time given by the psychiatrist to their emotional needs. While drugs have their place in the treatment of madness, they are not the be all and end all for the treatment of the mad. Does just medicating the brain create an emotionally healthy person? You can medicate the brain but you have to talk to the mind. But talking to the mind requires time, and in a world obsessed with outcomes and quick fixes, a longer journey to healing the soul equates to time and money.

Madness is usually a very distressing condition, especially if one is riven with paranoid delusions where everyone is a threat. The mind in madness is disturbed, often lost in its own billowing psychotic fantasia that precludes the rest of the world. The emotional pain and anguish of psychosis causes great suffering and untold upheaval. Even the darkness of depression can plunge a sentient being into a macabre and self-immobilising mind-set where the world is a deathly place. All emotional distress is a cursed condition; nothing equates to it. Madness colours the way one sees the world. A troubled mind will see a troubled world; a paranoid mind, a threatening world; a sad mind, a sad world. In madness, even one's own home can be a prison and one's friends the gaolers. I know in psychosis, when my inner world is hostile, the last thing I want or need is a hostile outer world. I need asylum, somewhere where I can go that will protect me from myself and the wider world. I don't want to be forced to stay, for example, in my home where I force my friends to be my gaolers. I don't want to have to limp along in the world, fighting my madness and pretending to be able to cope. Living chronically ill in the community does not allow for healing; maybe getting away from it for a short while can be therapeutic. I need a place where I know I can stay for as long as I feel the need to be there.

I am not suggesting for one moment that we go back to Larundel and those large madhouses. I am **not** invoking the word **asylum** to call for the reinstitutionalisation of the mad as some have done. I envisage a model where we could perhaps have a large number of refuges dotted around the city and suburbs. These refuges would be havens where the buildings are pleasant, the gardens lovingly tended, the food is good, there are options for different therapies, art and music therapy, women friendly spaces, where medical and natural healing alternatives compliment each other and compassionate care is the driving force behind the treatments. These refuges and sanctuaries would not be enslaved to the constraints of time and space or money or the need for a quick fix. They would be places where people talked to healers of the soul.

Asylum is an old fashioned notion from a past life when there was more time in which to achieve things. It is a mediative concept; one that, in essence, is about time and space. The word asylum has become a pejorative term and people associate it with the old madhouses and the inhumane institutionalisation of vulnerable people. This is why the politics of asylum needs to be debated, so that we can create a new concept, one that challenges the model of *fastpsychiatry* and its fixation on the brain and neglect of the mind. *Fastpsychiatry* in its present form cannot accommodate the notions of asylum and care of the soul.

We can do better. But it will take a social movement like the moral therapy movement in 19th century England to create new places of asylum and treatments that accompany them. Where once it was seen as humane to provide asylum for the mad, it has now been lost in the fast-time obsession of modernity, the rhetoric of government buck-passing, a *fastpsychiatry* that refuses to talk to its patients, a medical model that is concerned only with the brain, a hospital system that works on short term treatment, a society that has allowed the proliferation of homelessness and poverty and the incarceration of the mad in prisons. We more than ever need places of asylum in our modern western world which is fixated in its delusion of expeditious time. The word psychiatrist means *healer of the soul* but healing the soul and talking to the mind has been usurped by the new paradigm of *fastpsychiatry*. We need to reform *fastpsychiatry* which has been caught up in its own madness. Perhaps *fastpsychiatry* needs to heal its own soul before it can heal the souls of the mad.

### **Asylum**

In a meditative mood, I sit here and reflect  
on a world sequestered from the driving, droning masses.  
Here, far from the madding crowd,  
with lunatics of all kinds,  
I share moments of longing to be far from here.  
I share moments of great intensity, of great sorrow,  
and of a great otherness I cannot give to words.

Call it a sanctuary, a refuge, or shelter,  
call it what you will,  
but here I am God, the Devil, the Queen,  
here we are imagined souls of grandeur  
acting the parts beautifully, emphatically,

so that we mutter the incomprehensible,  
yet know we are here in retreat for the while.

No other place offers this necessary respite  
from the rationalized, dizzying world,  
except perhaps Gray's country churchyard,  
which provides a serene abode for the  
dwellers of the 'lowly beds' and 'narrow cells'.  
Although some of us join these dead people,  
mostly we ride the storms here in our asylum.

This is not to Romanticise our retreat,  
for many faults are here;  
for many fears are realized in horrific detail.  
Sometimes there is great suffering and no succour,  
but here we have come to know of the  
fickleness of life's character, and for the time being  
we remain removed from the world, here in our sanctum.

We demand our right to asylum,  
for somewhere to be at those times  
when turmoil and chaos destroy  
our minds and those beyond.  
Here we sail away with the wind in our hair,  
and as we are the Ship of Fools, we embark  
on a journey to all asylums through all ages  
where we meet with Fools and Jesters who show us the way.