

“When Trauma Doesn’t Count: An Inpatient Memoir” by Mikelena Panchesin

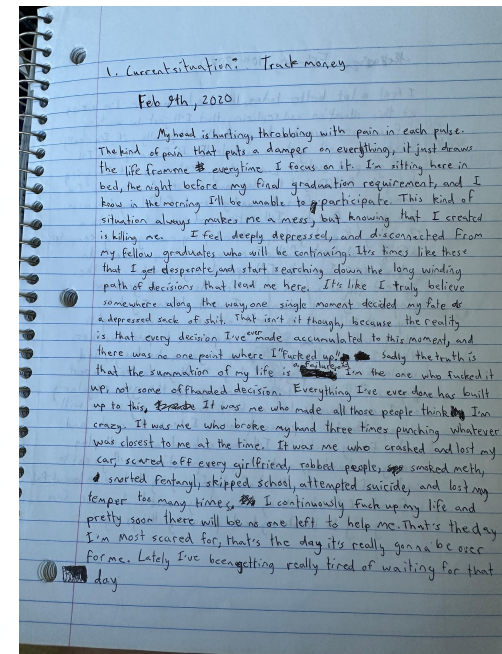
@prismdancer on IG

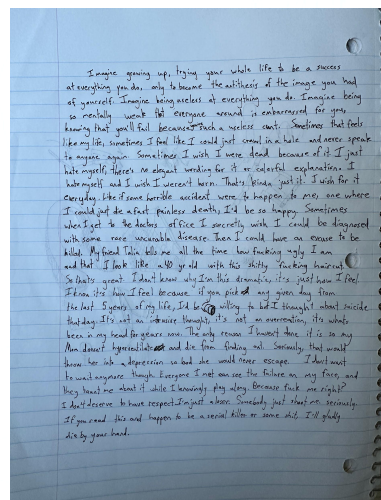
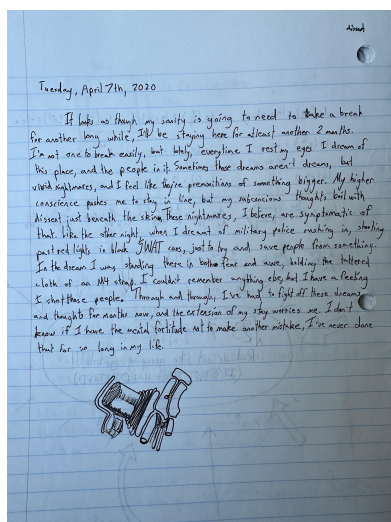


(Left: Pvt. Stefano Panchesin and Dr. Thomas Panchesin after completing Stefano’s enlistment, November 2019; Right: Mikelena Panchesin and Dr. Thomas Panchesin at the delivery of Pvt. Stefano Panchesin’s casket w/body inside to Tucson, AZ in July 2020)

It was August of 2020, and my brother had just killed himself. He joined the military in November 2019, and ended his life on July 4th, 2020 at a military base in Virginia. He was 19 years old when he died - I found out later that he hung himself with his bootlaces after being approved for medical discharge, but was forced to work another 3 months without knowing when he would come home. After being left alone to care for my father (who was dying of cancer) while navigating a global pandemic at just 21 years of age, I had an anxious breakdown and checked myself into a psych hospital. I had some bad experiences at this particular one, but overall I trusted the facility and its providers.

My brother and I had been in and out of psych facilities throughout high school, but despite that he signed a military waiver assuming liability for his health history. Despite knowing my brother personally after treating him, when the doctor at the hospital learned that my brother had just killed himself he ignored what I was telling him completely. “I don’t believe in drugs,” he told me after I confessed that I acquired my medical marijuana card when I wasn’t able to cope with his death, on top of my father’s cancer. “It’s just an excuse to escape reality.” Little did he know, I didn’t have a chance to try cannabis before I checked myself in - or any other type of drug. “You need to get sober, and take your medication as directed. That’s the only way you’ll improve.” I tried to correct his misassessment, but he didn’t seem to care. Neither did the rest of the staff.

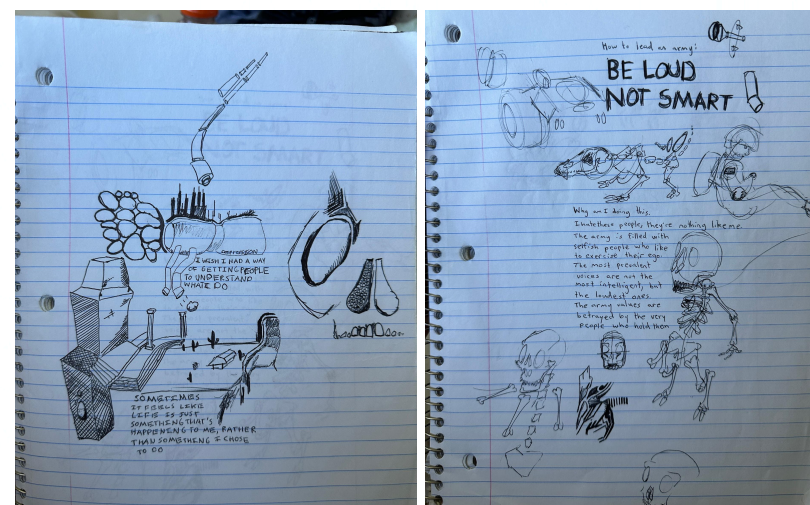




(Top to Bottom: Excerpts from Pvt. Stefano Panchesi's journal during military service, dated February 2020, April 2020, and April-July 2020 [exact month unknown])

After ignoring my charted history of PTSD and my brother's recent suicide, he diagnosed me with Bipolar 1 disorder and prescribed medication to treat my "mania." The nurses and behavioral techs all knew my brother after being a patient there, but the doctor refused to acknowledge my obvious trauma. After trying a cocktail of medications that made the numbness and anxiety worse, I requested information on my meds like what class of drug they belong to, what they were supposed to treat, and any side effects. When they refused me 3 times, my requests turned into demands. Eventually, after threatening to file a complaint with the hospital board I finally received printed

information on all my medications. Despite not displaying any psychotic symptoms, I was put on 2 different antipsychotics (which explained why I wasn't getting any relief). There was no therapy offered for my very recent trauma. And to make matters worse, one of the meds I was put on had a high risk of ovarian damage and even infertility. When I confronted the doctor, I was met with a calm, "Yes, your medication can damage the ovaries and cause infertility. I didn't think it would be an issue."



(Left/Right: excerpts from Pvt. Stefano Panchesi's journal during military service, December 2019 [exact day unknown])

After voicing my concerns about the medications, the doctor wanted to send me to a long term inpatient facility in Phoenix, Arizona - over 100 miles away. "Your bipolar disorder won't get better until you take some personal responsibility," he told me. He recommended I stay for anywhere from 30-90 days at minimum. At the time, I was taking care of my dying father alone (who I would later discover had 5 months left to live). The

facility he picked out seemed like it incarcerated people instead of treating them. I told my mother during a 10 minute phone call what the doctor recommended. She relayed what she had found from a quick google search - that the facility was intended for folks recently released from prison, who could no longer officially be incarcerated but were still deemed a “danger to themselves and others.” Their mission was to treat patients who were court ordered to be there, whether or not they agreed with their treatment plan. After our phone call, she printed some info from their website and dropped it off for me to read. Since I wasn’t court ordered to be in that hospital, I was allowed to decline the doctor’s recommendation. But I still wonder how many of my dad’s final months I would’ve missed if I hadn’t. Maybe I would’ve missed all of them.



(Left: Photo of Dr. Thomas Panchesin during an appointment to apply for a medical marijuana card, November 2020; Middle/Right: Dr. Thomas Panchesin 2 days before death, January 2021)

After declining treatment at the facility in Phoenix, I made an appointment with my outpatient psychiatrist and was

discharged. We continued to treat for PTSD, and I started therapy to cope with my brother’s death, my caretaking responsibilities, and the isolation caused by the COVID-19 pandemic. I didn’t improve for many years. But I learned to cope with the fear that if I checked myself into another hospital, I would not receive the care that I needed.

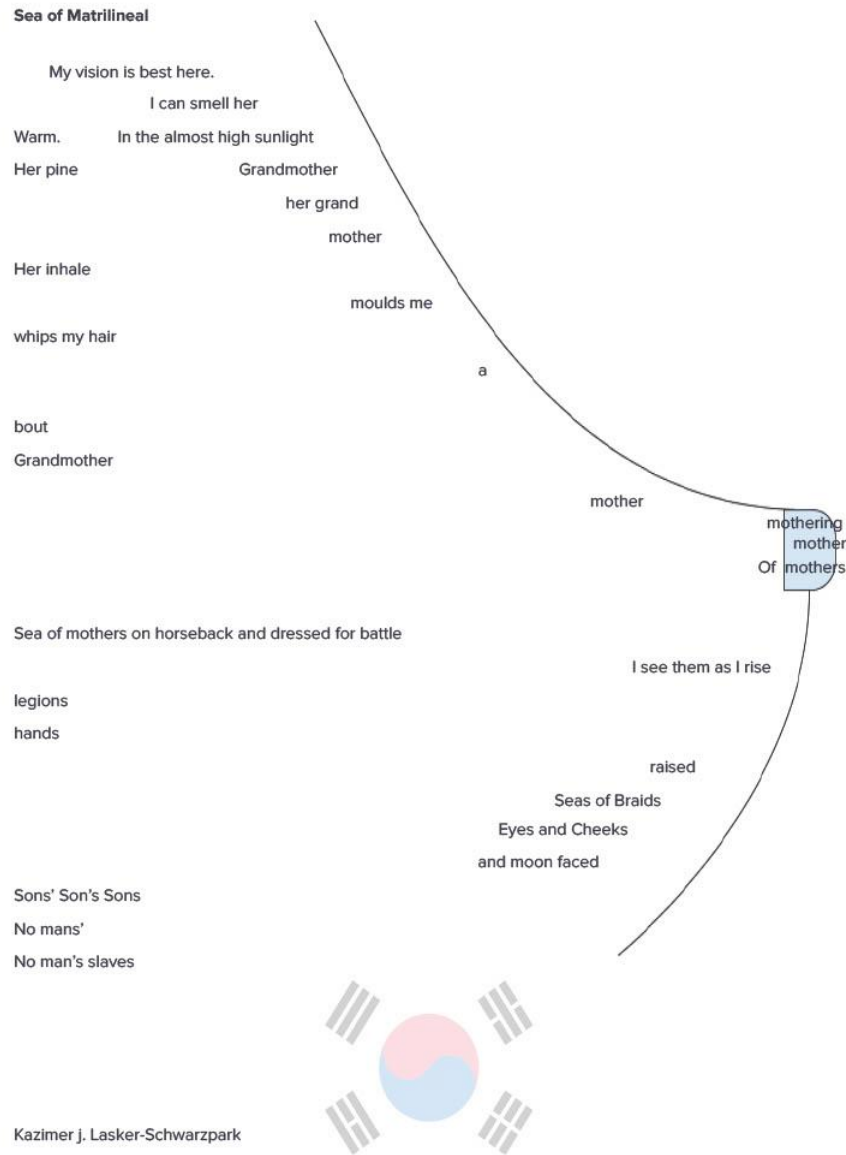
To this day, my brother’s suicide still haunts me. I still have flashbacks of my dad’s cancer, and watching him suffer and die alone. And I still wonder what I would be met with if I tried seeking help in an inpatient setting. I take my meds as directed, see my outpatient doctor and generally agree with my regular treatment. But on the days when I break down, unable to feed myself or function, I long for more support and inpatient providers I can trust. I often wonder what I did to deserve that, despite telling them exactly what I was going through. Perhaps it was my age, my gender, or the intensity of my grief. I try not to consider the most painful reality - that my trauma wasn’t bad enough to count.



*(Left: Delivery of Pvt. Stefano Panchesin's body to Tucson, AZ in July 2020;
Right: Mikelena Panchesin at Stefano's funeral viewing, July 2020)*

**Editor's Note: I was particularly moved and haunted by Mikelena's story and the parallels between our experiences. I was also hospitalized in Arizona throughout my mother's hospice care, and had the sheer "luck" of being released shortly before her passing. Besides these coincidental external factors, what stands out is the similarity of the harshness of our treatment. I remember being sternly told to "quit drugs" (despite substance abuse being neither of our primary issues) and being given high doses of antipsychotics and muddy indications as to what their side effects may be (including similar talks about fertility). Without exerting any demands, I was in the process of being court-ordered. Why is compliance the primary signifier of wellness, when "treatment plans" are created by strangers (often insurance companies, if we're being honest) with no context for your life? Mikelena and myself fall into the same demographic, so we were treated according to whatever behaviors may be typical of this demographic and not our own individual circumstances.*

“Sea of Matrilineal” by Kazimer j. Lasker-Schwarz
 @kazdoingthings on IG



“Hospital Memoir: How to Shatter Patient Trust” by the Editor / @haegeum.mp3 on IG



Kinder in der psychiatrischen Anstalt am Steinhof, Wien XIV. Photographie...

(“Children in the psychiatric institute Steinhof, Vienna XIV”, Weber, 1962.)

Although I’ve been told not to ruminate, I can’t help but feel haunted by my first experiences in a psychiatric facility in Austria around 2016. Against the wishes of my therapists, years later, I couldn’t help but find myself back there on certain nights when sleep wouldn’t come - even though I was a continent and a lifetime away, I always found myself thinking about the patients I left behind and of the medicine that left me with permanent muscle movements I had never had before.

The architecture of the hospital was beautiful, a piece of history, but felt so much like movies I’d seen about psychiatric facilities - *One Flew Over the Cuckoo’s Nest* came to mind with the patterned tiles and rustic fixtures. When a nurse-in-training told me the same building had been used by the Nationalist Socialist Party, that there was a memorial for the 700-2000

children and psychiatric patients that had been tortured and killed there (Idnes, 2015), it was hard for me to feel like anything good had come out of my treatment. I know now, with a sound mind, that my doctors had no direct connection to the medical scientists that stalked the same hallways in the 1940s, but one, the one assigned to my case, regarded me with such contempt that I struggled to see her treatment as anything other than an ideological punishment.

“I don’t like drugs,” she had told my mother and I, sitting casually on her desk with her legs swinging. The whimsy was a sharp contrast to her harsh demeanor. They had found cannabis in my system and the suspicion of further drug abuse followed me throughout my entire three-week stay. “This will be good for her,” she assured my mother as she approved my third, high-dose antipsychotic, the other two having been intolerable with their side effects, and one even causing hallucinations (quetiapine). This week I was to try risperidone at 5mg - a “really high dose”, my mother said with concern. “She’s that psychotic,” the doctor replied, brushing her off. I recalled how I was never weighed, how my doses were never adjusted. “Really, she needs to snap out of it. This might develop into schizophrenia.”

Later, we went to lunch in the hospital cafeteria. I had been given my morning dose of the new drug, and felt pretty good - pretty “normal”. My mother and I ate and laughed, always finding a way to make light of the uncomfortable. But throughout our conversation, I felt my eyes drifting up and to the left. “What are you looking at?” my mother had asked with concern. “I just need to look up-” I replied, my eyes forcing themselves up and left again. My shoulder began to draw itself towards my neck, out of my control. “Can you stop doing that?”

my mother pleaded, unsure of what was happening. She fled the table to fetch a nurse. I tried to stand, but my eyes were frozen, along with my shoulder, somehow pulled up-and-left with an invisible string, and my legs were no longer my own. I collapsed and held tight until the nurses brought a wheelchair and returned me to my room. My mother wrung her hands, furious and concerned. “Is this normal?” she asked when the doctor appeared from her rounds. “This is better than the alternative - you don’t want your daughter stuck in a psychotic state.” My muscles were burning, I was writhing, barely able to speak. “This should feel good - sort of like a drug,” she said, as a nurse restrained my arm and gave me an intravenous muscle relaxer - akineton. My mother was sent home with false reassurances - it was getting late - and I tried to settle in for the night. I wouldn’t get to sleep, though, as when the akineton left my system, the muscle seizures returned. They intensified until I couldn’t breathe - I managed to drag my frozen legs down the hall to the nurse’s station, where they injected me again. Even they were livid - this wasn’t the usual tremors and mild akathisia they were familiar with in antipsychotic use (Tachere, 2017). The next day, I was switched to another high-dose antipsychotic, and then another, until I left the facility and was weaned off everything by a family psychiatrist.

Years later, my neck still turns in that direction without my control. Sometimes, my shoulder and arm spasm with a familiar sensation - and I’m brought right back to the hospital, the summer of 2016. How can a patient be expected to grow from their treatment, when their treatment altered them in a way they never asked for? I was never informed about the effects of what was given - just a brief mention of medication

name and dose - but informing me would not have helped, since I was unable to refuse any treatment. After risperidone took control of my limbs like an invisible puppet master, and especially after it started to seize my airways, I tried to push back for lower doses, a different class of drug maybe - but without the doctor's approval, all the nurses could do was watch me cry and beg, literally on my hands and knees, shaking their heads. When it became too much - other patients needed attention - the threats began - "If you don't do this, we can't allow visitors. If you don't take this and behave, you'll go back to the closed ward." I swallowed my medicine then, remembering the physical restraints they'd used on me there when I was brought in the first night.

My current therapist tells me the most important thing between a patient and their provider is trust - especially in cases of paranoia and psychosis. I wish I could tell my doctor about how she destroyed my trust when she decided that I was in a state of severe delusion because I had told her my mother was on the way "from America", and how I lost even more faith in her as she refused to acknowledge that I had been telling the truth when my mother did show up a few days later - jetlagged and angry. She continued her treatment of my "severe delusion" anyway, seemingly needing to break me down with higher and higher doses of things that were crippling my physical body. My mother could only watch in horror, until she was finally able to remove me from the facility entirely and take me to a family psychiatrist who immediately lowered my doses until I was off what they'd given me. In this new doctor's opinion, this facility was constantly on the brink of malpractice. Her treatment plan would have been entirely different - low doses, anxiety focused,

treating the trauma that brought me to check myself into the hospital in the first place. I was able to trust that process, even if it was slow and careful, because my concerns were finally heard. "You should not have to sacrifice your daily functioning for your medication," the new doctor insisted.

I think of her when I try to draw a steady line and my arm jerks.

Citations:

"Beyond anxiety and agitation: A clinical approach to akathisia". Tachere. 1 May 2017.

"Kinder in der psychiatrischen Anstalt am Steinhof, Wien XIV". Weber. 1962.

"Nazi doctors murdered 700 children at a clinic in Vienna". Idnes. 31 May 2015.

“Alone” by Spooky

@spooky.da.scary._ on IG

In my life I've been through quite a few things, mental, physical- you name it, and through all the things I've been through there's always been one place I never wanted to be, the mental hospitals. These places were not designed to help me, they were designed to hold you until you show some signs of normality and even then that could take a long time. I've been to the Tucson, Arizona behavioral hospitals about 6 times and each time I came out more depressed and more ALONE... You know that feeling when you have all these people around you saying they are helping you or saying they are going to help you, but then just feel completely ALONE... No matter who says it no matter how many times they say it you always feel ALONE. The system wants you to take their meds to “fix” you, but in reality if you didn't feel like you were the only one fighting the battle you wouldn't need their meds. It's funny though because when I was in the mental hospital all I wanted was to be left ALONE... All I know is whether you're in the system, or on your own it's weird that, we all feel ALONE...

“Untitled” by Anonymous

Digital photography, 2024.



“T U C S O N” by Amanda Rochelle (3.7.2018)

@ajrscrambled on IG

you are a gift I never
asked for.
I want to love you rightly; to take your
existence as a gift from
God. but if I'm honest,
I'm afraid to trust you
again. your rays &
residents scorched my
sullen heart by inaction
& indifference.
it is a great pain to
invest your life in the
wrong people & the wrong
place. I thought for sure the latter was my issue
but I've discovered quite
the opposite. It's not a
location problem, it's a
heart issue, a human
brokenness. One I've
served to others & tasted
myself.
There are people in your
life that simply don't
care enough to love you,
to support you, to
believe in you, or even

think of you at all.
what you do with this
enlightenment speaks
greatly of your character
& resilience.
for year I used to beat
myself up over & over
with the cruel words of
people who haven't earned
the right to speak into
my life.

Losing my dad, my mind &
my reputation was in a
way the greatest way to
sift people out. the ones
who were more invested in
the mission than in me.
to them, I was a tool for
a purpose. I stopped
being a human, I was
simply my gifts, my
willingness to serve, & a
person you could bank
your reputation on.

Once I stopped fitting in
the pretty little boxes,
many many people who
'supported me'

dissociated. & that still
stings.

I felt like, there wasn't
room for me to fall
apart. there wasn't room
for my brokenness because
it was all about the
mission. I see now how
twisted that way is.

maybe they wanted to use
me more than they wanted
to love me. & real talk.
I am prone to the same way of thinking.

i wish i were what some
of you think i am.
doubt-free, joyful,
passionate EVANGELIST.
but, that is simply not
ALL that i am.

i am ALSO a woman who's
grieving, who struggles &
who's trying to process
her trauma with her creator.

so all this to say.

I QUIT.

i will no longer define
myself by the opinions of
others, my ministerial
resume, or my abilities.
& i'm trying to be okay
with that.

there is beauty here.
now.

& it is enough.

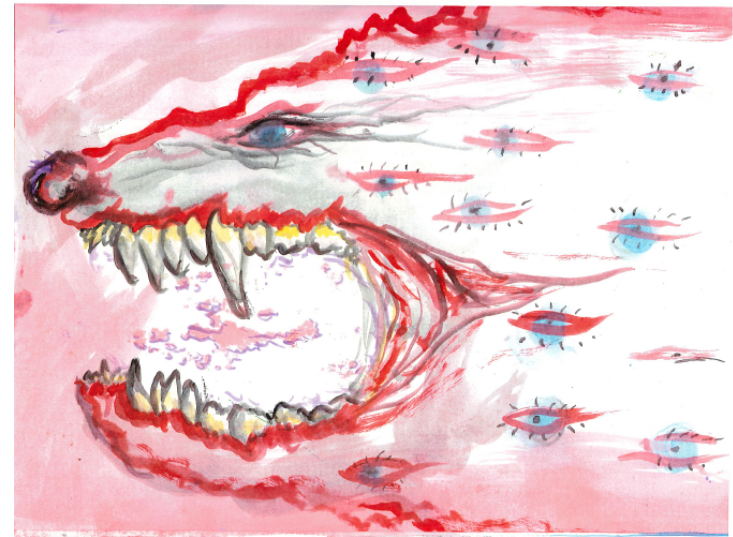
“Origami Cup” by Anonymous Patient of Palo Verde Behavioral Health in Tucson, AZ

Editor: This cup was gifted to me upon my final discharge from a psychiatric facility in April of 2023. The patient had a spinal cord injury and spent days coloring this mandala while standing against a wall, then folded it into a cup to give to me. Hours of labor and attention went into this piece - meant to be entirely temporal.



“Guardian” and “Thought Log” by the Editor

*Editor: Both works were completed while at inpatient facilities in 2023.
Top picture is watercolor, bottom picture is marker and ballpoint pen.*

[illegible]

Historical Highlight

Here we would like to highlight individuals who have made exceptional contributions to the field of psychiatry, to the movement of psychiatric liberation or who otherwise fought for the good of the madman.



Marsha M. Linehan is the creator of dialectical behavioral therapy, one of the only effective types of therapy for Borderline Personality Disorder (BPD) and other trauma-based disorders. Born in Tulsa, Oklahoma on May 5th, 1943, Linehan suffered from severe suicidal ideation, practiced self-harm and was subsequently diagnosed with schizophrenia. She was sent to The Institute of Living in Hartford, Connecticut, where she was subjected to electroconvulsive therapy, solitary confinement, and the administration of chlorpromazine and chlordiazepoxide. Throughout her stay at this facility, Linehan felt that her treatments did not help her improve and that she may have been misdiagnosed overall. At just 18 years old, upon release from her

facility, Linehan vowed to enter the field of psychiatric care if she ever found a successful way to treat her self-diagnosed borderline personality disorder. Marsha M. Linehan went on to attend The University of Chicago, where she earned an MA and a Ph.D. in experimental and social personality psychology. Her research led her to create a new branch of cognitive behavioral therapy - “dialectical behavior therapy”, or “DBT” - to reduce suicidal behaviors and severe emotional dysregulation. Linehan realized two concepts while developing DBT: 1. In order to achieve meaningful, happy lives, people must learn to accept things as they are. 2. Change is necessary for growth and happiness. As a flagship of these two concepts, DBT has been helpful in treating not only Borderline Personality Disorder, but also substance abuse disorders, eating disorders, PTSD and more.

Further Resources

Resources shared by patients and providers.

“Madness Network News” Online Archives

<https://www.madnessnetworknews.com/>

A huge inspiration for the creation of “Madness Magazine”, “Madness Network News” is one of the biggest first-hand accounts of psychiatric treatment in the west. Visit the online archives to read the original newsletter, shared between psychiatric survivors in the Bay Area in the 1970s-1980s.

Arizona State Board of Behavioral Health Examiners: Online Complaint Submission Form

<https://azbbhe.portalus.thentiacloud.net/webs/portal/register/#/complaint>

If you were mistreated throughout your behavioral health care within the state of Arizona, please consider filing an official complaint with the Arizona State Board of Behavioral Health Examiners - while it may feel like one complaint “does nothing”, a combined effort will always lead to stronger results!

“Staying out of the Hospital: A Guide to Surviving Psychosis”

<https://prisoner Correspondence Project.com/product/staying-out-of-the-hospital-a-guide-to-surviving-psychosis/>

A pamphlet which provides support and guidance or people who are going through mental health crises from a non-judgemental and holistic perspective.

“The Dialectical Behavior Therapy Skills Workbook for PTSD”

ISBN: 978-1684032648, New Harbinger Publications

This clinical workbook breaks down effective, patient-guided exercises for PTSD using dialectical behavioral therapy. While designed to be used in a clinical setting, its patient-guided exercises have proven useful even in individual application.

Community Care on Wheels

@communityonwheels on IG

Mobile mutual aid project providing essential items & resources to unsheltered/street-based folks in Tucson, AZ. Santa Rita on Saturdays.

Alcoholics Anonymous Tucson

<http://aatucson.org/meetings>

Alcoholics Anonymous is a peer-led recovery program that laid the foundation for many other “12-step” models of therapy. It remains one of the few self-help groups that is non-professional, unaffiliated, non-denominational, apolitical and free-for-all. Don’t hesitate to reach out if you are suffering from alcoholism or other substance abuse disorders, eating disorders, destructive gambling behaviors or sexually maladaptive behaviors, as you are not alone and there are 12-step programs for your issues.

We Love to Hear From You!

If you would like to share your own experiences receiving psychiatric care, providing psychiatric care or you have seen a loved one experience the psychiatric system, don't hesitate to reach out to us. We accept stories, resources, art, or anything else that supports our community and the hope for psychiatric liberation one day.

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Although we do not know where the future of this project will take us, if further volumes do arise, we would love to continue including reader submissions and insights.

Thank you for taking the time to read our stories.