


WELL AWARE

People used to be afraid to talk about mental health. Today, we understand that we all have mental health, just as we all have physical health. Sometimes we have mental health problems, just as we sometimes have physical health problems. For example, do you ever feel stressed, anxious, sad, distracted, angry, confused, hopeless, or frustrated? We all feel these emotions from time to time. Some of us might, at some point in our lives, have other mental health issues. Or we might know family members and friends who are dealing with mental illness.

There are many ways to deal with mental health problems. Sometimes people need the help of experts. But there are lots of things we all can do. We can talk about mental health. We can recognize how mental health affects us – at school, at home, with our friends, in the community. We can learn what we can do to be mentally well. We can empathize with people who are struggling with mental illness.

That's why Pearson developed this series of books called Well Aware. Through these stories and information texts, you'll learn about how a variety of people have dealt with mental health. You'll be able to talk with your teacher and your classmates about what you read. You will be able to think about how these stories and ideas might apply in your own life.

This is an excerpt from one of the books in the series that will get you talking and thinking about mental well-being. We hope you enjoy the reading and have some great conversations. We hope you will become more Well Aware.



Canadian Mental
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Mental health for all

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Red Carnation



Alicia Raimundo with Deborah Ellis





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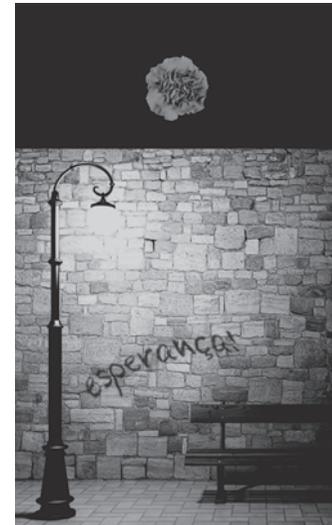
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For teaching ideas related to this book, see the Teacher's Resource.

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Alicia Raimundo with Deborah Ellis

PEARSON

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PEARSON

CHAPTER 2

“We’re putting you on the general mental health ward for a few days,” says Nurse Carolyn later in the morning.

She has bullied me out of bed and is making me walk through the hospital wearing just a hospital gown and a thin cotton robe. My feet make shuffle sounds in paper slippers. I’m no longer hooked up to the IV. I suppose I should be grateful for that, but I’m not.

“Where are my clothes?” I ask.

“Don’t you like the hospital gown? I’m told it’s very fashion forward.”

“I want my clothes!”

“I know you do,” Nurse Carolyn says. “They are safe. You will get them back, I promise you.”

“When? I want them now!”

“Actions have consequences,” she says. “If you try to kill yourself when you are thirteen years old, one of the consequences is that you end up in the hospital, where you have to follow the rules. For now, you will wear a hospital gown.”

I stop walking. “I want my clothes NOW!”

Nurse Carolyn remains maddeningly calm. “Any tantrum you throw, we can handle.”

I look at her. She doesn’t look all that strong, but there is something about her that makes me not want to mess with her. I keep walking.

“I hope your bird dies,” I mutter.

“Chaucer will outlive us all,” she says pleasantly. “African greys live a very long time.”

I’d spent most of the night in Emergency before I was moved to a room. When Nurse Carolyn came to fetch me, I thought it was to let me go home. Then she told me I would have to stay in the hospital for a few more days. She didn’t care that I said I was ready to go home. She didn’t believe me when I said I would not try again. I was lying, but she had no way to know that.

“You can’t keep me here,” I growl as we walk.

Nurse Carolyn ignores my remark. She opens a door and points up a high set of stairs.

“Is there an elevator?” I ask.

“You have been medically cleared to climb stairs,” she says. “The exercise will do you good.”

She climbs the stairs right behind me. If I want to run away, I’ll have to run up—and I don’t think up will bring me any closer to freedom.

We take it slow. I feel a little weak and woozy. Nurse Carolyn doesn’t push me to rush. When I need to stop and sit, she sits with me.

“I’m thirsty,” I say.

“There is ice-cold water waiting for you at the top of the stairs.”

At the top landing, Nurse Carolyn unlocks the door. We go through. I hear the door lock behind me. I think about complaining, but Nurse Carolyn eases me into a chair. In the next moment, she hands me a tall cup of cold water. It feels so good going down my throat!

“You are thirsty because of the stairs,” she says. “You are also thirsty because we gave you some medication. One of the side effects of it is a dry mouth.”

“What medication?” I demand to know. “You don’t have the right! My parents will sue!”

“Your parents gave us permission,” she says. “I hope that by the time you have finished your stay with us, you will be able to imagine the impact your actions have had on the people around you. Come with me. I’ll take you to your room.”

I get up off the chair and follow her. At least I’ll have my own room. I will be able to close the door and not deal with any of the crazy people. I get a good look at them, though, as we walk through the ward. Some are wearing sweatpants and T-shirts. Most are in a hospital gown and robe like the ones I’m wearing.

“Your room is at the end of the hall,” Nurse Carolyn says. “I’ll give you the nickel tour on the way. Here is

the quiet lounge. We ask that there is no noise in this room so that people can come here to be quiet with their thoughts.”

The quiet lounge contains an ugly, stained, orange-and-yellow sectional sofa and a couple of equally ugly easy chairs. One older woman is sitting by herself, putting red polish on her fingernails.

“This is the nurses’ station,” continues Nurse Carolyn. “Over there is the patient kitchenette. You can make yourself tea or coffee or hot chocolate, and there is always fresh fruit to snack on. We don’t allow junk food on the ward. Meals are brought up from the main kitchen to the day room.” She points at a large room with tables, more sofas, and a television set that is tuned to *The Price Is Right*. Men and women are sitting around the room. Some are playing cribbage. Some are watching the TV.

“Where are the other kids?” I ask.

“We don’t have a special ward for adolescents,” Nurse Carolyn says. “For now, you will be with adults.”

That makes me even gladder that I’ll have my own room.

“Here we are.”

Nurse Carolyn stands beside the open door and gestures for me to go in, like she’s welcoming me to Buckingham Palace. I enter the room. I immediately want to walk back out again. It is small. There is a narrow

bed by one wall. At the end of the bed is a tall cupboard. The blanket on the bed is an ugly blue. I can live with that, but I cannot live with what else is in the room.

I have a roommate.

Across the room from the empty bed is another bed. Sitting on it and rocking is a woman at least as old as Nurse Carolyn. She looks like she hasn't combed her hair since the day she was born. She is eyeing me in a way I do not like.

"I need my own room," I say, trying to push past the nurse. "I can't stay in here with her. I need my own space. I always have my own room."

"You mean you have your own room at your parents' house," Nurse Carolyn clarifies. "Here, you don't have your own room. Here, you have to share. Your roommate's name is Rosemary. Why don't you say hello to her like a civilized person?"

"Can I trade blankets with you?" this Rosemary person asks. "They gave me a pink blanket, but I like the blue ones. They wouldn't let me trade without asking you. Can I trade blankets with you?" She holds out her blanket, folded and fresh from the laundry, like the one on my bed.

Nurse Carolyn is looking at me. I don't care. I plan on ignoring everyone.

"Rosemary is a person," she says. "A person who deserves a response."

I don't want Rosemary's pink blanket. I don't care about the colour. I just don't want to trade. But Nurse Carolyn is watching me. I'd feel like a fool arguing with this woman over a blanket.

"Take it," I mumble. I get a glare from Nurse Carolyn, so I hand the blue blanket from my bed over to my roommate. She smiles brightly and hands her pink blanket to me.

"Gold star," Nurse Carolyn says with approval. Then she leaves me alone.

I look in my cupboard, hoping to find my clothes. It is empty, except for a very old copy of *Chatelaine* magazine.

At least it's something to disappear into. I take the magazine to my bed and flip through it. I settle on an article about a woman in Calgary who trains dogs for people with epilepsy. I hope this horrible day goes by fast.

AFTERWORD



The events in this book are based on what happened to me when I was thirteen. I don't consider myself a writer and I would like to thank Deborah Ellis for helping me to tell my story.

While some details were changed to make the events work as a story, this book does accurately describe my thoughts and feelings at the time, as well as many events that actually took place.

After I left the hospital, I went to high school. No one was talking about mental health, and no one seemed to be struggling like I was. Eventually, I opened up to a friend and I really benefited from her support. But I didn't tell anyone else my story and I got tired of hiding it.

When I went to university, I started sharing my story with other students. I also did volunteer work to educate people about the importance of taking care of their mental health, and the kinds of support that are available.

While still in university, I gave my first public speech to a large audience—it was streamed live over the Internet! The reaction to my story had a big impact on me. People were telling me things no one had said to me before, like “You're so brave.” It really helped to change how I thought of myself.

Since graduating from university, I have worked to develop mental health programs and to increase awareness of mental health issues across Canada and internationally. Some highlights for me have been making television appearances on MuchMusic and MTV, and participating in a panel discussion that was part of the United Nations International Youth Day in 2014. I have now given more than 600 speeches—and I plan to keep on talking!

The road has sometimes been rough and sometimes smooth. I have learned a lot. I learned that speaking about these issues can be very powerful, and that telling my story gave me a lot of strength. I learned that many people struggle with mental health issues, and helping them can be as simple as showing I care—listening to them, asking them what they need, and reminding them that we can still laugh together. But most important of all, I learned that anyone can become a superhero by helping others and trying to make a difference.

Alicia Raimundo

DISCUSSION STARTERS

1. In what ways is Alicia a typical teenager? How is she different from most teens you know?
2. How would you describe Nurse Carolyn's personality? Why? Is she a good nurse for Alicia? Why or why not?
3. What is Alicia's attitude toward the other patients in the general mental health ward? Do you think Alicia would react differently to those patients today? What evidence supports your opinion?
4. Alicia feels that just thinking happy thoughts isn't enough to help her get over her deep feelings of sadness and hopelessness. What does help Alicia? Consider the information provided about her life during and after her stay in hospital.
5. Has reading this book changed any of your ideas about people who have a mental illness? Explain what ideas changed (or didn't change) and why.
6. Now and then, everyone has to deal with emotions such as sadness, anger, anxiety, or even depression. Why might it be difficult to talk to someone about feeling these emotions? Why is it often important to talk to someone if you are feeling strong emotions like these?