

## Chapter 9: Positive Chaos

### Florence

So the first time I was suicidal, I just didn't know what I was doing. Because there were lots of things, and this was even before the prison thing, there were lots of things in my brain because that was after my ex left. And obviously left me with debts that I did not know of, and I was going to clear, because I got a loan of £10,000 for him. And I had to pay it myself.

So I can't remember that first time I told somebody about this loan thing, when I was going through the mental health issue. Maybe she believed me or not, I don't know. The only thing I know was the next time I went to her she was treating me, she was attending and talking to me in a different way from the way she was when I met her.

So when we were about to finish the sessions that year I asked her, "Why the sudden change of mind?" So she said, "You know, some people will come in here, it's fake stories, so sometimes it needs to be investigated to really know the impact or whatever, something something about your health." So I said, "You investigated me? So how much is the truth, and how much is the lie that I say? How many percentage of lies and truth?" And she said, "Oh Florence, a case has been opened for you". And I said, "What kind of case?" Then they said, "Because it was investigated and discovered that you have been through what people should not go through".

I know some people fake things, you know what I mean, but I wouldn't tell you things because I want you to pity me. I always tell people I don't want pity. So when I go to the clinic, they see me jovial. And sometimes the doctor will look at the medical report and look at me. They don't match up. But sometimes you just have to give people the benefit of doubt. I know some people don't believe people on face value. But at least when they come to you for help, try and help them.

You know when I was having my consultations, my thing with Dr. Moira, she gave me this advice and gave me this leaflet that anytime I feel suicidal the things I should do. So there was a day when I was still living in that pastor's house my brain was like sinking chaos everywhere. So I said, today, today. I looked for something in the house to kill myself. I could not find it.

So when I went into A&E I told them, I said, "I know my cortisol is down, but with the way I'm feeling I cannot inject myself. And I feel suicidal. Now after I got the doctor that gave me that injection, is now the suicidal doctor that I was waiting for. And he came to me and he said, "Are you Florence?" And I said, "Yes, I'm Florence". "Are you the person I'm here to see?"

They were discussing about me, amongst the doctors, and they say, “She does not look like one of our patients”. “Why?” I said, “What does your patients look like? My hair is not tangled. I'm not in tattered dress. Don't judge the book by the cover. The fact that I am not in rags does not mean I'm not going through some things. I just don't want people to read me. But I'm reading myself. So all the things you see, they're just vanity. I am empty.”

And before I know it, you're not supposed to be crying for me. “You are crying for me?” So the other guy came in. And he looked at me said, “I'm sorry, it's not that I don't want to talk to you, I don't know how to start from.” They've probably went through all my medical history, so they don't want to touch any sensitive thing that would trigger me more. So they're like [laughs] walking on eggshells when it comes to me. So I said, “No it's alright, I just wanted to talk to somebody or kill myself.” So both of them stayed there, sat down, and said I should start talking.

So they started a conversation. I refused. Before I know it, I joined in. I started laughing. That's what we need. Not to say, “I know”. Not somebody to pity us. Honestly, anybody going through suicidal thoughts, mental health issues, does not need pity. No. What's led to my mental health state is not what's led to the other person's state. People should understand everybody is an individual case, not collective. Don't collect everybody with suicidal thoughts together, throw everybody with a mental health case together. We went through different routes that led to that thing. Try and soften whatever is too hard.

I had problems with my accommodation. I had problems with feeding. I had problems with things. Make life easier. Not add, to say, “Oh, you don't look like one of us? Are you sure? Are you sure?” Don't ask me if I am sure. My medical history says a lot. Everything on your system is not what I say, but it's what I've been tested with. So if you've tested us, if you've checked every avenue and you now see that this person needs help, please don't let us all die. Help us.

### **Eve**

When you were in that hospital room and you were having conversations about feeling suicidal, what did that feel like for you?

### **Florence**

The moment I got into the hospital the thoughts reduced. It's a big challenge to take, going there. Because usually I always just have one option, just go and look for a way to kill yourself. But because I was introduced to another option of go and look for somebody to talk to, I don't want to call that listening place or those people you have to call online, I just want to talk to somebody. There's times when a problem shared is half solved, even if there is no solution there.

So when I was in the room and they were talking to me, and I refused to talk, they started talking about themselves, what they were going through, what they ate, the naughty things. And the ice in me started melting. And I started laughing. They just wanted me to be better than when I came in. So I was relieved. And then the female doctor said, "I knew you had it in you, please don't kill yourself, we still need people like you to talk to people outside."

So she was going to offer me that, that there's a talk they do fortnightly about people living with mental health and things, would I be interested? I said, "Ah, don't put me into it now because I am still going through it, so it's probably, because it's always better for somebody who has been through it to talk to people who is going through it."

So somebody comes to me now to say they're going through it, I will say I have been there, but still is a different thing from somebody who only went to school and read it in book and come talk to me about mental health. What do you know? What you read in the book? No. You have to be practical for me to talk to you. So talking to them in the hospital, in fact, I was so relieved.

### **Eve**

What happened next?

### **Florence**

They didn't let me go that day, because it was around nine o'clock in the night. So in the morning, when I woke up again, I told them I was going home around six o'clock. They said no, that I need my breakfast [laughs]. So I said, I don't do breakfast. They say breakfast is on them. I said I don't like this food that they do in the hospital, so before I know it I saw McDonalds breakfast. And I'm like, "Where did this come from?" They said somebody offered. So somebody else, I think the person was a consultant, came in to do their rounds and spoke to me, "How are you feeling now?" I said, "I'm OK". "Any suicidal thoughts?" I said, "No." That I felt kind of relieved. He said, you know, "There are numbers that you can call". I said, "I know, but I don't want to call numbers. I'd rather talk to somebody." So they said, "You can come in anytime."

### **Eve**

Has there been any time when you've been feeling very suicidal and you've had conversations with clinicians about it, have you ever heard clinicians use the word "insight"? Like you might be described as having insight into what's going on for you, or not having insight into what's going on for you.

### **Florence**

Oh yeah. I was in the diabetic and endocrine clinic. It was not a doctor, it was a nurse appointment. And she was asking me, because every other year, or every two, three years, I have to go and do my MRI to check my brain. So I was talking to her about it and I'm saying, I don't know maybe that's why I'm having problems. I don't know maybe that's why I'm thinking. And the nurse was like, "Oh I think it is what happened to you before that is making you think." I said, "No, I'm not a baby. Are you telling me that the headache I had last week, is why I'm here to complain today?" "No no no no no." She said, "Maybe the past history is what I'm thinking of."

So I said, "Let us end this section, I don't want to talk again. Do I really look like an illiterate to you, or an attention seeker?" "No". "I'm not here to seek attention. I'm only telling you how I'm feeling. And you are saying, maybe it is what happened seven years ago." So what she did was, she said, "Oh please give me one moment I want to go to the toilet." So I said, "I'm going anyway". "No, no, no, no, no." There's something that I need to sign.

So I think when she came in again she came in with another lady who came in to apologise to me. I have to be honest she came in to apologise to me and said what the nurse was trying to say was maybe. I said, "You are doing the same thing your nurse did, asking me if I am sure that it was not what happened before." So she said, "No, the way she put it was wrong." That she was supposed to ask me to compare how I felt then to how I'm feeling now. I said, "Then was then. Now is now. I'm here to talk about now. If I want to tell you how I felt then, I would be dead. Let's talk about now. Now is I am fighting to be alive. I don't want to be suicidal. But people like your nurse creates suicidal thoughts into us. No."

I know my case is complicated [laughs]. I don't look like my case at all. Doctors say it all the time, new doctors that I meet. Old doctors know me already. But any time I go to the hospital or any place and probably my old doctor is not available and I see new doctors and I talk to them and they look at my medical report they will say, "Are you sure you are Florence?" I say, "Yeah." "Are you sure?" I will say, "Yes. If you ask me again!" [laughs] There's no point. I'm alive. I would have died. How many times have I tried to kill myself?

### **Eve**

There's just so many things in my mind and that I'm feeling all at once. I think I'm not sure almost where to go, because there's so many things...

### **Florence**

Go anywhere. We will say anything, go on, it doesn't matter. It's alright, don't worry.

## **Eve**

I think I'm just feeling there's been so many things that have happened to you in a row, so many awful experiences with your ex partner, with the abusive behaviour, with going to prison, surviving prison, the way you were describing the officer pushing you to the ground...

## **Florence**

Yeah, that was terrible. Pushing me down and kicking me. It was reported and the prison chief actually came to my room to apologise to me, because I wouldn't let it go. My lawyer wrote a letter to them. I wrote a letter to the officer in charge, because obviously they have CCTV so it wasn't something I lied about. And there were inmates there that were ready to [laughs] to pounce on the officers! And I was like, "No, no, no, no, no, let go." "No! Florence, we are not going to let go! It will happen to somebody else." "When it happens to somebody else, you can do it. But because it is my own case, don't fight my battle."

The officer regretted it. But the day she came to apologise to me I said, "I don't want her apology". Because she was forced to apologise to me, which means you don't see what you did as wrong. So I don't want your apology. But the chief there, the overall boss there, came to my room one day and they really apologised to me. But what if I had died that day?

Because I was deprived of going to the nurse's station, I was kicked back to the cell room. It was evening that the nurse came to my room. By then my blood pressure was, they had to call the ambulance that evening. I've got everything on record. So it's not something that has been made up. They called the ambulance that evening. I was responsive but I was not responding, if you know what I mean? I was not responding to whatever they were saying. The ambulance came in and took me away to the hospital. I was there for about one night. The following day I was discharged back, and everything became war there.

So when I think about things like that, it can lead to suicidal. That is another thing that needs to be treated. The way people are treated in some of the prisons is appalling. Is appalling. It's not everybody that goes there that are criminals. Some of them are victims of circumstances beyond their control. Don't just treat people like criminals. Once you're in prison, "Oh you are a criminal." You are condemned to death. No. It's just like mental health. It's an individual thing. They should temper justice with mercy.

I know most people don't want to talk about prison. I do. I don't talk about it with joy, but with pain. Because I had to go inside there to know what was happening. To know how people are feeling. Maybe that's going to be my evangelism, I don't know. Everybody needs to be attended to. Suffice to say,

mental health practitioners should always visit prisons as well, to talk to prisoners.

**Eve**

Did you receive any support for...?

**Florence**

No, no, in the prison, no. In Yarl's Wood, yes. I'm not talking as an outsider, I'm talking as an insider that has been there.

**Eve**

What was it like to be in Yarl's Wood?

**Florence**

One of the reasons why I went to Yarl's Wood was the pastor that I was supposed to live with was out of the country. And he was there for a month. And my sentencing was over. And they could not hold me back anymore, so they said I should go and wait in Yarl's Wood.

Yarl's Wood is not like prison. You have your mobile phone. You have things. You can do things better in Yarl's Wood than the prison, but it is still a prison. And it's another place, another learning place, I don't know, maybe out of God's plan, that I had to go again. Because now I know how it is and how it feels to be in that position, camp, now, and how they have been treated. Have they been treated well? No. Will there be room for improvement? A lot.

You know, it takes someone who can afford things to live there. I thank God because I had someone here who was sending me money, so I was comfortable. Even through all my prison things, I was comfortable. So, anytime I'm in the machine to buy things, you get people there, and I ordered things for people. Because it's not a good thing to be in places like that and you can't afford to take care of yourself. Like, little things. Like buying drinks for yourself. But, for people who cannot afford it, is not a place that is encouraging. You are sending people there to improve their life, and you are still putting handcuffs on their hands. That's the way I feel it.

**Eve**

You were saying before that when medical professionals look at you and look at your medical history, the two don't seem to add up.

**Florence**

They don't add up. They don't add up because when they look at my medical history they see I've got Addison's disease, my blood pressure is not controllable, I'm diabetic, that I am on two different tablets, one has just been changed again yesterday, I had brain surgery, pituitary adenoma they call it, which puts me permanently on steroids twice a day, an injection that I have

to take, I've got plantar fasciitis, my sight is 50/50. So if I start counting and they start reading my medical history and my medications, and they see somebody else sitting in front of them, somebody with mental health, somebody with Addison's disease, somebody with all those things, and is still laughing and chatting. I'm not sitting in front of you for you to pity me. I am not going to let it win. I'm going to win. I will not let people read it on my head.

**Eve**

Do you think people find it hard to believe all the things you've survived?

**Florence**

Yeah. Yeah, that's why one of the reasons why the doctor went to investigate it. Because, you know, I don't open my mouth. And when I open my mouth and I tell them things, people will look at me. Maybe they will say, "How did she survive it?" Or they will say, "Is she telling the truth?" Or they will think something is not right. You know, I am trying to survive. But I know, without proof, it is difficult for people to understand.

**Eve**

You mentioned a bit earlier on when we were talking about experiences with medical systems, and I think if I remember you were saying, "Is it because I'm a woman? Is it because I'm a Black person?" You were asking yourself why you'd had the experiences you'd had. Could you tell me a little bit more about what it has been like to be a Black woman going through all the things you've been through?

**Florence**

[sighs] That is another big question. And this is not my imagination. When a Black woman with my intonation goes to the hospital, some practitioners' IQ is so low not to think that even though she is a Black person she is still educated. But they tend to look at you as a Black person. When they want to talk to you they will be speaking loud as if you are deaf.

I was at the pharmacist yesterday, and there was like one-hour queue. So the lady, when she called for my turn, and there was another elderly man to pick up his own prescription who happens to be Black. And I saw the way she spoke to another British or whatever woman, patient, but when it was the turn of that man she was saying, [feigns a shout] "Have you used this medication before? What is your name?"

Where I was sitting I was like, [tuts] "If she dares use this tongue on me". Because I heard the way she was speaking to others. So when it was my turn and she said, with that same tongue, [feigns a shout] "What..." I said, "I'm not deaf". And everybody was looking at me. I said, "I'm not deaf. Talk to me". And she was like, "No, I didn't say you are deaf". I say, "Yeah, don't

shout. Because you're talking does not mean I'm deaf, or you think you're English and I will not understand your English. Yeah I do not have your intonation, but it is English. And I'm 100% sure I'm more qualified than you. Talk to me like a human being”.

And the next thing, I heard people clapping! And I hate things like that, you know. Honestly I hate things like that because I did not know some people were furious already. So I caused chaos there! And I said, “You don't have to shout when you're talking to a Black person, as if the person is deaf or cannot understand your English. I see the way you spoke to other people. I hear the way you speak to a Black person. Except I tell you I can't understand, then I've got hearing problem. Then you can shout for my ear to hear. But if not, no, talk to me like me. Don't look at my colour.” [laughs] She felt so stupid!

It was not a negative chaos, but was a positive one. There are times you have to correct people positively. She does not even know she is doing that. Or she's been doing it and she's gotten used to the idea of talk to white people in one way, talk to Black people in another way. But yesterday [laughs] she was not the one who finished it. Somebody else came to finish my [laughs], somebody else came to ask, stood beside her. And the guy, I think he's the pharmacist inside that does the medication, came to say, “We are sorry, she did not mean it”. I said, “No, train her!” I can see she was not comfortable. I said, “I'm not trying to make you uncomfortable. But perhaps you don't know. But it is wrong. Because you're talking to people one way, so you have two tongues, or two voices, for people. It shouldn't be.”

And I'm like, Oh this is Black [History] Month! [laughing] This is Black [History] Month, I'm making a mark! When I heard people clapping, even white people were clapping! Not only Black people that were clapping. I said, “No, no, no, please stop, you people should stop clapping” [both laughing]. I just didn't want it to continue, you know, it's not fair.

I expect people to do to others as you want others to do to you. We should be treated like human beings, you understand?

