

# Creases

by Jack CJ Stark

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## CONTENT WARNING

This work of fiction contains scenes and discussions of mental health illnesses, self-hatred, depression, self-injury, and suicide.

Treat each other well. Look after yourself.

Peace and Love.

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**5:00am**

My alarm will go off soon. I knew there was little point in setting it when I got into bed. Another night of no sleep. This has become a regular thing. I can't remember the last time I slept every night in a week. It's an odd feeling - insomnia. Being so tired you can't move or think properly, yet not being able to get to sleep. It's an uncomfortable familiarity.

The insomnia is just another side effect of the depression. The depression I have been battling for the last 15 years. I have tried a dozen different antidepressants, been seen by many different therapists and tried countless self-help techniques. Unfortunately, it doesn't feel like any of it is helping.

I get up. There's no point in staying in bed. Sleep isn't coming any time soon and I read that staying in bed when struggling to sleep is not good. Something about associating the bed with lying awake. I probably should have got up about 3 hours ago if that's true. I should have got up when I knew sleep wasn't going to happen. I'm not sure if I would have had the energy to get up even if I wanted to. Just fighting through the crushing feeling on my chest in order to take a breath has become exhausting recently.

*So you stayed in bed, and did nothing. Like a pig. Like a sloth ridden pig. You're not even trying to help yourself. If you know it's bad to stay in bed, then why not move? Because you're a failure. You fail at life.*

I stumble my way into my en-suite bathroom, piss and walk over to the sink. I need to do something now. I'm not sure what. There is a reason I came over to the sink. What could it be? What do I have to do next?

*Haha. Go on, figure it out. Most people would have just done it by now. But you, no, you need to stand here like a wet lettuce.*

Wash my hands! That's it. That's what I need to do. I pump the soap onto my hands, and wash them under the cold water. I walk back into the bedroom and sit on the Ikea chair next to my bed. I take a moment to just sit. I'm not sure why. I don't know what I think will happen if I just sit here. Really, I'm just wasting time. This is what I do now, I sit and do nothing. I sit and wait for the days to pass, so I can get back in my bed and wait for it all to start again.

I look down to my left forearm. The criss cross pattern of scars from the times when I have felt I had no other choice, no other release. Many of them are flat, or slightly indented. They used to be red, but they have now faded to white. A couple of them, the ones formed from the deeper cuts that I had to sew back together, raise up from the skin. Forever there, forever a reminder of the times I was weakened. I hate them. I hate looking at them. I hate how they remind me that I am a failure, and that I am weak. I hate how they remind me that I give in to the temptation. Sometimes I think about cutting off my arm so I never see them again.

I grab my iPad. Partly as a way to distract myself from the scars, and partly out of habit. I open Twitter.

*You're addicted to Twitter. You're an addict. You think because you don't drink or smoke or do the drugs that your family do, that you are better. But you're not. You're an addict, just like them. Your drug of choice is Social Media and cutting.*

The usual tweets. Nothing of too much significance but sometimes I find it helpful to see people going about their lives. It serves as a distraction from my own. I can live vicariously through them. Some people have tweeted about the news. Again, nothing of much significance.

A few tweets with links to book reviews and blogs. Most of the people I follow are in Europe and so Twitter tends to be quiet through the night.

#MentalHealthAwarenessWeek is the number one trend. I click on it. I know I shouldn't but I can't help myself. It's what I expected. Some people sharing their story, some people lecturing others on how they shouldn't let their illness become them, and many people tweeting messages of support. A common theme that I've noted recently is people saying 'It's ok to not be ok'. This seems to be the latest buzz phrase when we talk about mental health. A new one pops up every six months or so.

*See. You make such a big deal out of your illness. Look at all these people that are saying it's ok. You just want to be a victim.*

I am a victim. I am a survivor. And that's not what they are saying. They are saying that it's ok to ask for help.

*That's not what they have said. They have said it's ok for people to have mental health illnesses. They have explicitly stated that not being ok is ok. You spend a lot of time fighting to get people to see that it's not ok, and to what end? All these people cannot be wrong. You are wrong. It is perfectly ok to not be ok.*

No, it's not. It's not ok to not be ok. That statement, and that culture of complacency is why we suffer so much. That is why we can't get the help we need, why governments are not funding appropriate research or treatment options. We wouldn't say that it's ok for someone to be living with cancer, or heart disease, or lung disease, or liver disease. No, we would try to fix that, regardless of the cost. The same cannot be said for those of us suffering from a mental health illness.

*There you go again, wallowing in self-pity. Maybe you should just get it done. Kill yourself now. Why won't you just kill yourself now? Nobody will care. They will all pretend to care. They will sit at your funeral and force out a tear and say how tragic it was that you didn't get the help you needed, but it will all be fake. They will act that way because that is what society expects of them. Once you are burned and gone, they will get on with their life. Their better life. Better for not having you in it.*

I close the iPad cover. Maybe there is something in what people are saying. Maybe my self-pity is the problem. If I tell myself I am ok, and that things are ok, maybe, just maybe things will start to feel that way. I could trick myself into not feeling like shit every day. I could start to get better.

I need to get ready for work. I take a quick three minute shower, brush my teeth for exactly two minutes (thirty seconds per quarter) and apply moisturiser to my face. My eczema is flaring up. My skin has split above my eyebrow. The skin around my eyes and on my cheeks is red and sore. The cream stings.

*You look a mess. You look disgusting. People are going to be looking at you and thinking, 'What a disgusting, crusty, fat, ugly pig.' They are going to look at you and feel sick.*

It's ok.

I get dressed. The same outfit every day. Black trousers, black vest and a black linen shirt. I put on my black ring, my black Fitbit band and a black sleeve that covers the scars on my forearm. It's easier to wear the same outfit each day. I read that it's something done by those genius billionaires. For me, it just makes the morning easier. When my mind is already foggy and I struggle to think about everyday tasks, it's easier to have just bought five of each item of clothing. I can just grab a prepared hanger with the outfit for that day each morning. Little to no thought. I put on my black boots and grab my black backpack. Out the door I go, for the train, for the journey I hate doing each day to get to the workplace I don't want to be at.

**8:40am**

The train journey was difficult. I hate the walk and I hate the waiting. As usual, it was late, which means I am now late to work. Only by ten minutes but that is enough to throw my morning out. It means I am not the first in the office. I like to be first in. It means I can get ready and prepare myself before the others arrive.

I don't bother to check my calendar, I already know what I have on this morning. Our quarterly Key Performance Indicator and Business Planning review. It is as boring as it sounds. Everything we discuss could just be emailed to us. But no, instead we must sit around a table and go through endless charts and spreadsheets to be told what we already knew.

After forcing fake pleasantries with a few colleagues, I make my way to the conference room. It will be another 45 minutes or so before anyone else arrives but I try to ensure my presence has as little impact on others as possible. Sitting in the conference room, checking emails on my iPad will mean I don't get in the way of anyone else.

*Do you remember what happened when you started here? Do you remember when you started and everyone else went off sick?*

Yes, I remember. The workplace was understaffed and the team had been overworked and struggling for a while. It's why I was asked to move here. To support them.

*But you started, and then they went off sick. Your presence pushed them over the edge. They couldn't stand to share a building with you.*

That's not the case. They would have gone off sick anyway. My arrival was just a little too late really.

*But what happened when you took six weeks off?*

They returned to work.

*And when you returned to work?*

They went off sick again.

*Exactly! The thought of being in the same building as you was enough to force them out. Because that's what it is like to be around you. That's what you do to people. The thought of*

*talking to you is enough to cause people major distress. It's why you don't have any friends left. How many of your 'friends' decided they couldn't cope with you and turned their back on you?*

All of them.

*Yes, all of them. Not a single person could manage being your friend. I don't blame them though, being your friend would test the patience of a saint. When people ask how you are, you are supposed to lie and act like you are ok. They don't like it when you tell them the truth, no matter how much you try to say it quickly and move on to asking about them. You think you're being smart with it, but you're not. You're just making things difficult for people. You're just staining everyone with your negativity.*

Those people said they wanted the truth. They said I didn't need to lie and pretend I was ok. They asked me to be honest with them and let them help. They said they wanted to help. They said they would always be there for me. They said they understood.

*And then they turned their back on you the moment they realised it's not that easy. They simply threw you to the curb. And you can't say anything because you have me. Nobody trusts the crazy guy. You're mentally ill, therefore you have zero credibility. Everything you do and say will always be viewed as a reaction to, or a viewpoint caused, by me.*

*You won't find a way out of this. There is no way out. Your family hates you. Your work colleagues can't stand to be around you. Nobody can handle being your friend. THIS is your life forever. Even the fucking mental health workers deserted you and they are paid to put up with your shit. Not for all the tea in china, eh?!*

I guess not. It's ok.

**10:25am**

The room is full. Maybe eight people in total, which doesn't sound much, but it's eight too many for my comfort. The chairperson was late which meant everyone else had to waste time making small talk. No one spoke to me other than to force out a 'good morning'. I continued to sit in my chair, avoiding eye contact and wishing we could just get this over with.

Now the meeting is finally in full swing. Lots of corporate speak about 'performance' and 'key indicators'. Mainly it's people using buzz words that they don't really understand the meaning behind. Use enough bullshit language and you can fool anyone into believing you know what you are talking about. It's a game that we all play. We all know that we are playing it, yet we continue anyway. I suppose some people find this interesting. I don't. I find this mind numbingly boring. I'm not interested in playing these games.

Someone is speaking about the latest project they want to pilot in a specific geographical area of the town with a targeted user base or some shit. I just couldn't care less. The words they are speaking have become nothing more than a mumble of background noise. The corner of the page in my notebook has a crease in it. The crease is much more interesting right now. I find myself staring at the crease, becoming less and less aware of what is happening around me. In the precise place where the paper has been folded, there is a straight, raised scar across the paper.

*That crease spoils the fresh look of the notebook.*

Yep, it does indeed.

*It's ugly.*

Yep, it is. I try to use the side of my pen lid to fold out the crease. Trying to iron out the raised marking that now inhabits the space.

The thing with creases in pages is that once they have occurred, they can never really be removed. No amount of ironing, squashing, weighing down and attempted fixing will ever fully return the page to its previous unflawed condition. The page will continue to be fragile in that place. It will be vulnerable to bend again. But from now on, it won't take as much pressure or force. The crease won't always be visible to the world, but if someone looks carefully enough

they will see it. The page will know the crease is there. You will know the crease is there and you will forever need to be thoughtful in handling it with caution.

It's ok.

*Oh my god we are so bored.*

I know.

*This is it. This is your life. Sitting in rooms with people that don't want to be with you. Pretending that you know what you are doing. They keep you around out of convenience, you know? Your purpose is to take on the shit they don't want to deal with. They shouldn't have to deal with shit. They are above that. You, on the other hand. Well, you don't deserve the courtesy of not having to deal with shit.*

We are all worth an equal amount.

*Yeah, you keep telling yourself that hippy peace and love shit. You're not fooling anyone with it though. Just because you keep saying it doesn't make it true.*

It's ok.

My eyes drift upwards to look out of the window. The building I am in overlooks some football playing fields, a park, a little river and rolling hills beyond. Some people like to remind me that I am lucky to work in a building with such beautiful views.

*True, at least you get to look at a lovely view as your life falls apart and you fail to be a normal person.*

I can tell myself that this is beauty. That this is what people seek out in life. But to me, it just looks like grass. There was definitely a time when I would have been able to appreciate the beauty in things. But not anymore. Not for a while now. Now, I'm numb to it all. Indifferent to life.

It's ok.

On top of the hill in the distance are two trees. The outline of one tree looks like a large sheep. The other, looks like a bison. They are facing each other, forever locked in a staring contest. I have taken these and used them in my latest novel. Well, it's very much just a work in progress. A story that I have been writing for the last three years and still don't feel it is anywhere near the standard of quality I would like it to be.



*You mean your failed project? I think we can say that you have failed at it. You can't call it a work in progress when you haven't made any significant changes or contributions to it in several months.*

I suppose it is a failed project.

*A failure, producing a failure. That's kind of fitting don't you think? It has a nice ring to it. You should write that down.*

“Have you even heard me?”

What? Shit. No I haven't. I wasn't listening to anything that was being said and now I have the Regional Director glaring at me from across the table. I look around, the other people in the room are looking at me, clearly waiting for me to answer the question I didn't hear.

“Erm, I'm sorry, I zoned out for a moment there, could you repeat the question?” I follow up with a light nervous laugh in an attempt to break the tension. A couple of colleagues laugh gently to themselves.

*They're laughing at you, not with you.*

Our Regional Director doesn't laugh.

“Well, are you listening this time?”

“Yes, sorry, go ahead,” I say, desperately trying to avoid eye contact with anyone. I look down at the crease on the page.

“I asked if we could get child level data for all KP6 indicators?”

I take a moment of thought. Just long enough to make it look like I was really considering the question, but not long enough to piss her off any further.

“Yes. I think so. I might have to combine a couple of reports but we could get that together. It'd take the team a couple of days as they are still working through the GLD scores that you requested,” I reply.

I don't know if this is the answer she was looking for. She gives very little away in her facial expressions. It's a technique she has mastered over the last 20 years. A way to control her subordinates.

“Why are they still working on those? I asked for that about a month ago. What is taking so long?” She is not impressed.

*What is taking so long is that you forgot to task them with it. You spend all your time either staring blankly at the PC monitor or looking out of the window at the trees on the hill instead of getting on with what you need to do. You suck at being a leader.*

It's true. I haven't been able to focus on any piece of work for a while. But I need to give an answer, and I can't let on that it's because I am no longer capable of doing my job.

"We had a couple of unforeseen delays that we had to work through. Problems with the back end of the system not releasing the crystal reports in the way that we asked. It took some time for us to discover the issue and then we had to rewrite the SQL strings from scratch." It's all bullshit. It doesn't make any sense what I have just said, but hopefully it's an answer that will baffle her enough to not question anything further. She won't want to admit that she didn't understand what I was saying.

"Fine. Just get me the KP6 info by Friday at the latest." She takes in a deep breath and sighs out the air.

"Sure." I think I sound confident enough to fool the people in the room. The reality is, I have no idea how to get the data she wants, but I don't feel comfortable enough to say this. She already has it in for me and I don't need to give her any more ammunition. Better to blag my way through and figure it out later than admit my own stupidity and lack of abilities.

*Ha, dickhead. And when you can't figure out how to give her what she wants, then what? I guess you'll just deal with that later, right?*

It's ok.

**1:05pm**

The meeting ended before lunch. This is good. I don't like it when those meetings run over as we tend to be told that we are having an impromptu working lunch. I don't particularly want to be sharing a room with those people during my working hours, let alone during my own time.

*It's ok, they don't want to be sat with you either.*

I sat outside on a bench to have lunch. Well, I sat on a bench during my lunch break. I wasn't able to eat anything. My appetite just isn't there today.

*No but later on you will pig out on sweets and chocolate like a gluttonous monster.*

Now it's early afternoon and for the last hour I have sat at my desk and stared at my PC screen. This has become my thing. This is what I do. I sit here, and stare at this screen. I have managed to open Outlook and I can see that I have 2244 unread emails. I should read through them but I just can't bring myself to do it. I don't have the patience to read through countless group emails with people discussing whether anyone has seen the tin opener that was kept in the kitchen drawer and now can't be found. I take a moment to consider walking ten minutes down the road to the supermarket and picking up a new tin opener. I don't. I can't be arsed.

I don't want to be here. I don't want to have to wake up each morning and drag myself into this place. I don't want to have to keep pretending I am ok when I am not. I simply can't handle it. It's time to go back to the doctor. I need that help.

*They didn't help you the last dozen times you asked for help, what makes you think it will be different this time?*

I don't know. I just know that I need help. I need to silence you.

*If something could have helped you, it would have done so by now. You can't be helped. None of the antidepressants have worked. The counselling was useless. The therapy had no positive impact. You've been asking for help, and yet nothing has gotten better. Give up. You are beyond help.*

It's ok.

I pick up the phone to call my manager. The conversation is short and to the point. I tell her that I am not doing well and need to take some time off. I let her know that I will be trying to speak to my GP today, and I'll log on from home to delegate important tasks that can't wait.

I close Outlook. The emails can wait. I can't. I pack up my things and head out.

"Is that you done for the day?" the receptionist asks as I try to make a quick and unnoticed exit.

I wish I was done. Permanently.

"Yeah, I'm going home," I reply.

She flashes me a smile. "Have a nice evening."

"You too."

2:50pm

I am walking along the main road that leads from the train station to the estate that I live on. Along the road is my GP's medical centre. As I approach the building, I hesitate for a moment.

*Do you really want to do this? Do you really want to risk walking into this building and leaving in an ambulance to be taken to a psych ward where you will be locked up like a common criminal?*

I need the help.

*You need to end it.*

That's what I am trying to do.

*You know that's not what we are thinking about. End it. Carry on walking. Get home. End it.*

I walk into the centre. I am fortunate enough to have a very good GP, and the support staff they employ are clearly treated well. They appear happy to be at work, and treat the patients using the centre with kindness and respect. The woman on reception smiles when she sees me enter.

*It's a fake smile. It's just politeness. There is nothing sincere there.*

"Is there any chance I can get in to see my doctor today?" I ask even though I know it's highly unlikely. The normal wait to see the doctor can be anything from three to six weeks. The receptionist doesn't need to ask my name, or the name of my doctor. I've been in here enough times for her to know these details already.

"I don't think I can get you in today, love. She's fully booked," she says with a sympathetic tone. She gives me a date of her next available appointment. Three weeks and three days away.

"I can't wait," I state. "I need to speak to her today. Please." The tears start to collect in my eyes and I desperately fight them back. My hands are shaking and so I grasp them together in an attempt to steady them. I don't want to stand in this open space in tears, looking ridiculous.

The receptionist gives a slight nod. "I can get someone to give you a call today. I don't know who it will be, and I can't say exactly when it will be, but it will be today. I'm really sorry, but it's the best I can do."

"It's ok, I understand."

"Are you going to be ok until then?" she asks.

I'm not sure why she is asking. If there is nothing more she can do, does it really matter if I will be ok? I nod, take a deep breath and say thank you. It barely comes out as a whisper but it is all I can manage as I turn to leave and head home.

**3:15pm**

It takes less than half an hour for the call to come through. It isn't from my GP, but from her husband, who is also a GP in the same practice. I have seen him a couple of times in the past and have always been impressed with his manner and treatment. He has great skill in listening to someone in crisis and helping to calm them. We discuss how I am struggling. How each day is becoming more challenging. How I can't focus on anything. How I feel like such a failure. Most importantly, how those negative thoughts have become unbearable and all consuming. How I want to die.

"Have you spoken to your CPN recently?" he asks.

"Not for a few weeks," I reply.

"Why is that?"

"He's currently off sick, I think. I tried to call him last week and was told he was not in work at the moment."

"Have you been assigned someone else in the meantime?"

"No."

"Ok. How would you feel about going into hospital today to speak to someone there?"

He has phrased it as a question, but I know that he is saying this is what I should do. Hearing him say it makes the whole situation become very real. I can't fight back the tears any longer and I break down crying. The doctor's patience comes across as having no limits.

"Talk to me. What are your thoughts?" the doctor asks after a minute or so. He doesn't sound frustrated in any way. He sounds genuinely concerned and looking to offer help.

"I'm scared. I don't want to be locked up. I don't want to go there and be treated like some common low-life criminal that fucked themselves up by doing drugs because I'm not that kind of person. I'm ill and I deserve to be treated better than that," I admit. Saying this out loud to someone for the first time was much more difficult than I expected it to be.

"You are not low-life, and you won't be treated like that. I promise you. I can phone the hospital now, and see if I can get you an urgent appointment."

I think this is the first time I have heard a doctor use the word promise. From my experience they use open phrases, being careful not to promise a result. His use of it this time takes me by surprise.

*If he calls them first, it would give them time to get the restraints ready. To prepare the sedatives ready to tie you to a bed and turn you into a vegetable. You are making the biggest mistake of your life.*

“Let me give them a call,” the doctor pleads. It’s also the first time I’ve heard impatience in him. He’s taking charge of the conversation and has started to direct the situation.

“Ok,” is all I can manage.

“I’ll give you a call back after I’ve spoken to them. Ok? Hang in there.”

I end the call without saying goodbye. It doesn’t really feel like a goodbye moment. Rather just a break in the conversation. A brief respite for me. And for him.

*Did you notice how he started to get a little impatient towards the end there?*

You know I did. I think he wanted an answer. Sometimes when I can’t articulate a feeling I just don’t speak and people don’t always know how to handle that.

*He seems like the kind of person that rarely gets frustrated with people. You managed to bring that out in him. Is there anyone that can handle being around you for longer than a few minutes at a time?*

No. It’s ok.

*Fuck off. It isn’t ok. It’s far from ok to be that kind of person. Stop saying that.*

I’m going to get help today. I’m going to silence you. I’m going to beat you.

*You’re going to walk into that hospital and never get out. You are going to spend the rest of your life as a patient in a psychiatric unit. They are going to see just how fucked up you are, lock you up, and throw away the key. Then it will just be me and you. You can’t win. You can’t beat me. You are me. I am you. Without me, you are nothing. A nobody. There is nothing left. Everything you were, and everything you have been in the past, is gone. I am all you can be.*

I can get things back. I can be better than this.

*Ha. This is not make believe. This is not a soap opera. We are not writing a fictional story here. People like you don’t go through some redemption arc and come out a better person*



*in the end. You don't get a happily ever after. You fail. And you die. You die a sad, lonely, helpless, pathetic waste of life. You die, and everything carries on the same without you. Nobody cries. Nobody comes to your funeral. You become nothing more than an anonymous statistic. Another pathetic man in his 30s that selfishly ended his own life. That is your destiny.*

Stop. Just stop!

I can't stop. I can't stop crying. I'm sitting on a chair in my bedroom, crying to myself.

*Pathetic. A fat lump of pathetic shit. Crying isn't going to help anything. You know what you need to do. You need to end it. Turn around, pick up the box, and end it.*

Maybe it is the only way out. Maybe it is all I can do to end this. To find peace. Peace through death.

*Death will give you peace. But you're weak.*

I sit for a moment longer in silence. The world around me is a blur. My eyes are open but I'm not seeing anything. All sounds are muffled. There is no clarity.

The phone rings again. It's the doctor.

"Ok, I've spoken to the team at the hospital. If you make your way there now, they will see you. You may have a little wait when you get there but you will be seen today."

"Ok," is all I can manage yet again. It's quickly becoming my catchphrase.

"They are very nice at the hospital. They know you are coming. They will treat you well," the doctor says. Probably in an attempt to reassure me enough to get me there. "Do you need help to get to the hospital?" he asks.

"No."

"How are you going to get there?"

"I'll walk down to it. Should only take me half an hour or so. Do I have to go now?"

"Any time today. They are expecting you."

"What... what if I go and they turn me away?" I ask. "How do I deal with another rejection?"

"They won't turn you away. That's not what they do. They are going to help you."

The doctor gives me a name of the Mental Health nurse on duty and tells me to explain that I have an arranged appointment to see the RAID team. I thank the doctor for his help and end the call.

7:40pm

The walk to the hospital was difficult. It took a lot more will to keep walking in the right direction than I had anticipated. All the while battling the thoughts of turning around, going home and ending it permanently.

I am stood in front of the red Accident and Emergency sign blinding me, making it difficult to see anything else on the small, dimly lit, street within the grounds of the hospital. Go in. I need to go in.

*You walk in there, you are never coming out again.*

I think I will. I think I'm going to get out and live a healthier life.

*Actually, you may get out. Probably when they simply turn you away.*

What if they do turn me away? Do I really want this? I could just go home, get in bed and try to survive the night. I turn around and take two steps in the direction of home. I stop, close my eyes and steady my body. I must look like a right weirdo to anyone who can see me. This is the most difficult decision I have ever made. It would be much easier if I had someone with me right now. Someone to take my hand, and walk into the clinic with me. Someone to take me to get help. Someone to tell me I am doing the right thing and to ensure I am treated well. But I don't have anyone. I don't have family or friends. If I am going to do this, I have to do it alone. I have to fight this alone. One man, in a fight with himself.

*People can't fight this alone. You would have to be a miracle man to fight this alone. You are not a miracle man. You are not even a proper man. You're a nobody. A nothing. The hospital is busy. The nurses are already overworked and stressed, and now you want to walk in there and take up their valuable time like you are some sort of worthy individual.*

A tinge of guilt in my stomach.

*You should feel guilty. You've already wasted so many people's time today. Every person you have had contact with has had their day ruined because of you. You can stop that. You can stop by going home and ending this.*

I take a few deep and deliberate breaths, turn quickly on my heel and walk into the hospital.

I follow the doctor's orders and explain the RAID team is expecting me. The receptionist takes some details from me and asks me to take a seat. She can see that I am struggling. She can see that I am fighting back the tears. She can see that I can't give eye contact or engage with my surroundings. She stands up.

"Are you going to be ok?" she asks with a slight nod, leaning in a little.

No. I'm not going to be ok. I'm about to either be locked up, or rejected. What a fucking stupid question. If I was going to be ok, I wouldn't need to be here. I wouldn't have just told you that I was having a psychological breakdown. I wouldn't be standing in this reception area desperately fighting the urge to break down and give up.

*She can see you're weak. Everyone can see how pathetic you are.*

I nod, turn my head away from her and find an empty seat to take.

After about twenty five minutes of sitting and waiting, my name is called to see the triage nurse. She takes some vitals, blood pressure, heart rate, temperature. Then she asks me what the problem is.

"My doctor has asked for me to come in. He said he spoke to someone from the RAID team and they had agreed to see me as an urgent case."

The nurse nods as though she has heard this a thousand times before.

"They are quite busy today," she says. "You may have to wait a little longer. But we'll get you in and seen tonight."

Tonight. She is planning for this to take some time. I go back into the waiting area and manage to get a seat in the corner of the room. Another fifty minutes passes and a nurse finally calls my name. A different nurse than the one I saw earlier. She leads the way through the white, empty, maze like corridors to a small room. There is little furniture in the room. Two two-seater sofas, one across from the other and nothing else. The sofas are screwed to the floor. The walls are painted with a mural of rolling hills and countryside. Along all the walls, about half way up, there is a red strip of plastic. A panic strip. It can be pressed at any time and an alarm will sound. This is the room they put the violent nut jobs in. A room with nothing that can be used as a weapon, and an alarm that can be activated from anywhere within it.

A woman enters the room. She is older, slim, with long greying hair that would have been black at some point in the past. A pair of spectacles rest on the top of her head. She's wearing hemp clothing. She reminds me of an old school hippy. No doubt I would get on with her quite well if we were meeting in different conditions. She carries a notepad, a pen and a few pieces of loose paper with something printed on them. She appears to be a little stressed and to be rushing. After we take our seats, me on one sofa and her on the other (the one closest to the door), she introduces herself, confirming she is the person who took the call from the doctor. She identifies herself as a mental health clinician and explains that she wants to go through everything so she can complete an assessment. This will help her determine how we proceed. It's all a procedure for her. A number of boxes to tick and standard questions to ask.

We spend the next hour or so talking through my medical history. I try to recall as much as I can, but I have seen a lot of different people over the last ten years. I've been on a lot of different medications. I simply can't remember them all and at what dosages. The clinician is direct in her questions. There is very little emotion, sympathy or empathy shown from her side. At times, she looks bored.

"What kind of things do you do for hobbies?" she asks.

I shake my head slightly.

"I'm not really active in any hobbies at the moment," I explain. "I used to do lots. I was active in community groups, the local police advisory board, council meetings, meditation classes, badminton, astronomy, and writing clubs and the such. Every night of the week I had something on. But over time, maybe twelve months or so, I dropped out from everything. One by one, until I wasn't doing anything. Now I just... sit at home and read a lot."

"Why don't you try and get back into some community groups?" she suggests.

"I don't want to. The reason I pulled out of those groups was because I felt I was starting to annoy the people there. I felt like they didn't enjoy being in my presence and so I felt guilty about ruining their social activities."

"But that is what this illness does to people. It lies, and it makes people think everyone is against them until they start to isolate themselves. It sounds like that is what has happened with you."

“To some degree, yes. But this is not an illness of lies. Those negative thoughts are not lies. They are honest. Brutal honesty. It’s what makes the whole situation so difficult to manage. It takes the small failures that we all feel and experience through the day and expands them to become... less small. It oozes out of you, like a black fog, and stains those around you.”

“I’m sure nobody feels that way when they are around you,” she says. “And I’m sure you have nothing to worry about when it comes to fitting in. You can do it.”

“Well you don’t know that. You haven’t been there when they stop talking to me, or stop eye contact, or start to avoid me,” I answer in defence.

I often find it bizarre when people take this tact. It happens a lot. I’ve never quite understood how telling someone they are objectively wrong in a subjective situation helps. Discrediting someone’s beliefs by telling them they are wrong, or that they shouldn’t have felt that way is not helpful. Telling them their experiences and feelings are not real and just a result of their illness isn’t helpful. Telling people their anxieties are not necessary is not helpful. We don’t help people by just disagreeing and saying the opposite. We help by listening to what that person is saying. Whether the clinician agrees with me or not is irrelevant. The important things here are the feelings I am experiencing and by simply arguing the details or intent of others with me shows me that she has not listened. Just because she doesn’t see things the way I do, does not mean my reality is any less real or important. I’m not interested in playing those games. I’m not here to have an intellectual pissing contest with someone. And so I stop replying. If she isn’t going to listen, I’m not going to put the energy into trying to explain. No doubt this will be viewed as me refusing to engage.

After several minutes of scribbling down notes, the clinician takes a breath and looks up from her notebook. There is a silence hanging in the room. I leave it there. Silence doesn’t bother me. I’m happy to sit in a room in complete silence for however long it takes for someone to have something meaningful to say. Over the years, as my friends and family deserted me, I learnt to accept silence. I am one with silence. I don’t like the idea of speaking for the sake of speaking. The clinician appears to be processing her own thoughts. No doubt she is considering how to move forward.

“Do you think it would help to get a different job?” the clinician inquires.

“I don’t think so. I’m not sure I could. I don’t think anyone would employ me based on my high sickness record. Plus, the workplace and job role is not the issue. My lack of interest in life itself is the issue. I can be depressed in that job, or depressed in another.”

“That sounds like another barrier you are putting up. Sometimes we have to take the plunge and do the difficult things we don’t want to do in life,” she lectures.

“I know how to do difficult things. Do you think it was easy for me to walk here today? Do you think it has been easy for me to fight for some help over the last ten years? Do you think I found it easy the last time I put a rope around my neck and jumped?”

“I’m not saying that,” she says, engaging her own defences.

“I think you are saying that. It may not be what you intended to say, but it is what you said. You have implied that when a situation is difficult I simply choose to not engage with it. I think you don’t understand how difficult it is to get out of bed each morning and try to live something that nearly resembles a normal life. I’m not isolating myself, I’m protecting myself from harmful situations, based on my experiences. You don’t get to tell me what my experiences have been.”

“I can sense you are starting to get irritated.”

Yes, I am getting irritated. Not because I am mentally ill, but because you are not listening to me. You are trivialising my concerns and getting very close to implying that I could think myself better if I just put a little more effort into things. I think these things. I don’t say them. I don’t want to reply to her. If I agree that I am irritated, she will record that I admitted to becoming confrontational. If I say that it isn’t the case, she will see it as another opportunity to disagree. I don’t want to argue. I can’t win. I’m not interested in trying. It bores me.

“So what do we do now?” I finally ask.

The clinician sighs.

“Well, I could admit you to the ward, but...” she seems to get distracted by her own thoughts. I give her the time she needs to process them.

“The thing is,” she restarts, sounding exasperated, “beds cost a lot of money, and they are in high demand. I’ve already had one in tonight before you and I’ve got another waiting in reception.” She looks at her watch as she says this, realising how long we have been here. She

rolls her eyes. Clearly she is running over on her government issued maximum waiting times quota.

I want to punch her in the face. I want to scream at her for making me feel like I'm nothing more than an inconvenience. I don't do any of that though. I sit in silence and simply wait for her to say something else. I want her to give the direction. I'm out of ideas, that's why I am here. I need to be told what to do next.

"You are already open to the Community Mental Health team and your CPN from that team should be seeing you more regularly," she says shaking her head. "If you go home tonight are you going to try to kill yourself?"

This question takes me by surprise. From my experience it's usually a wrap up question. I've been asked this question, or variations of it, hundreds of times. It comes at the end of a session. The answer everyone wants is a simple 'no'.

"I can't say either way. It's difficult to know what my thoughts will be later tonight. I can only say that if I had the means to, I probably wouldn't kill myself right now in this moment," I say. The clinician seems content with that.

"Have you got any plans to harm anyone else?"

"No."

"Do you think you are you likely to harm anyone else if things get worse?"

"No."

These are the wrap up questions. She's about to send me home. I'm about to be rejected.

"I want you to go home," she says. "I am going to speak to the Community Mental Health team and ask that a CPN takes on your case whilst your regular one is off work. I also think the Home Treatment team should continue to see you. I'll ask for someone to visit you at your home tomorrow. In the meantime, here is a list of contact numbers for emergency help if you need them."

She hands me a piece of paper that has numbers for suicide prevention helplines and local charities that can help in a crisis.

"If you start to feel like you will do something to harm yourself or anyone else," she continues, "then you must ring one of those numbers immediately, or come back here, or call



999. I will send a report of what we have discussed to your GP, your CPN, and the Consultant Psychiatrist. It will detail how we have agreed for you to be treated from home instead of being admitted as an in-patient. Ok?" she asks as she closes her notebook. A clear sign that she is ready to end this meeting.

It's ok.

We haven't agreed that I will be treated from home. I have been instructed that this is what is going to happen. I don't seem to have a choice in the matter. I get up, and leave the room. As I leave the hospital I notice the receptionist follows me with her gaze.

The night has taken control. It's dark and cold. The energy is different, tense and on edge. I start the walk home.

**1:25am**

I'm back on my chair in my bedroom. Exhausted and rejected. On my bed is a small black suitcase. I packed a few change of clothes before going to the hospital. If I had been admitted, I could ask someone to pick up the suitcase and bring it to me. It just made things easier to be prepared. What do I do now? I could pick up the suitcase, get the train to somewhere miles away and have a few days away from everything. But I can't escape the biggest problem. It moves with me. The job, the home, the stresses of everyday life are not the reasons I am struggling. That voice of hate is. The illness that has taken everything from me is the problem and will follow me wherever I go. I can be depressed here, or in some hotel room overlooking a lake in the north, or rolling hills in the south. Either way, I remain depressed.

*End it.*

I don't know how many more times I need to ask for help. How many more times I can sit in a room in tears and beg for something more than just pills and the occasional chat to 'see how things are'.

*What do you want these people to do? They can't work miracles. You are too broken. You can not be fixed. You know what to do.*

I know what to do. It's ok.

I get up and move the chair across the room. In the space behind where the chair was, is a cardboard box. Inside, it contains a helium tank. I open the top flap and take out the tank. Attached to the release valve is a blue hose that leads to a face mask. These masks are normally used by medical professionals to administer oxygen to patients. I bought and assembled this equipment a number of months ago.

It's ok.

I pick up my iPod and bluetooth earphones and head downstairs.

It's ok.

I walk into the garden and towards the garage door. I lift the garage door and head inside, closing it behind me. The garage is not used to house any vehicles. I have used it as a workshop gym combo since moving here. Full with equipment and workstations that I have not used in a

long time. The central supporting roof beam has a rope wrapped around it. I put it there earlier, before going to the hospital.

It's ok.

At the end of the rope is a loop and a hangman's knot. I learned how to make them the last time I tried to kill myself.

"It's ok."

The loop is set up so that it hangs at the same height as my neck when I stand up. The last time I hanged myself it was horrendous. Not only did it fail, but the pain was intense. I wasn't going to feel that pain again. I wasn't going to allow myself to feel that panic again. I am going to die peacefully.

"It's ok."

I have been doing some research into painless methods of suicide. The suicide bag seems to be a nice peaceful way. Using an innate, odourless, gas causes the body to lose consciousness without inducing panic. But it's not considered a highly successful method of suicide as the bag tends to rip, or the mask falls off before death happens. Then, those poor souls are left with brain damage. No doubt continuing to live with their depression, yet not being able to do anything about it.

"It's ok."

If I lived in the US, I would simply purchase a handgun from the local supermarket and put a bullet through the back of my head. But, alas, I am in the UK and I don't have that option available to me.

"It's ok."

I put the helium tank on to a chair next to the rope. I stand, with my back against the wall, and put the noose over my head and around my neck.

"It's ok."

The rope is a little looser than I had wanted, but it will suffice. Once I lose consciousness and drop, my body weight will be enough to tighten the rope and cut off the blood supply to my brain. I've secured the rope properly this time. This time it will hold. I will be dead within minutes.

“It’s ok.”

I put in the earphones, and turn them on. The tone sounds to confirm they have connected to my iPod. I set Do You Realize? by The Flaming Lips to play on loop.

“It’s ok.”

I stretch my arm out, being careful not to move my body too much. I pick up the face mask and use the attached elastic to secure it over my nose and mouth. It’s not a tight fit, but it will do.

“It’s ok.”

I fumble to find the tap on the valve of the helium tank.

“It’s ok.”

I close my eyes and listen to the song. ‘Do you realize, that everyone, you know, someday, will die?’

It’s ok.

I force out as much air as I can from my lungs.

It’s ok.

I turn the nozzle, and hear the sound of helium rushing through the tube and into the face mask.

It’s ok.

I am not committing suicide. I am not dying by suicide. I am being killed by my depression. I am going to die from depression. I am going to die because, despite begging for help over the last fifteen years, I haven’t received any.

It’s ok.

Depression does not kill people because they don’t ask for help. Depression kills people because when they do cry out, they face rejection. They get told that they are not worthy, or that their opinion is just a delusion. They get told to hang in there, and hold on to hope that things will get better. They are seen as difficult to engage with or being the cause of broken relationships. They are shamed by society. They are mocked by the healthy. But apparently, it’s ok.

It’s ok.

My chest starts to feel tight. Holding out a breath is much more difficult than holding one in.

It's ok.

'You realize the sun doesn't go down. It's just an illusion caused by the world spinning round.'

It's ok.

One breath.

It's ok.

Another breath.

It's ok.

Another.

It's ok.

No more.