First Person Account: I and I, Dancing Fool, Challenge You the World to a Duel

by Ian Chovil

The article that follows is part of the Schizophrenia Bulletin's ongoing First Person Account series. We hope that mental health professionals—the Bulletin's primary audience—will take this opportunity to learn about the issues and difficulties confronted by consumers of mental health care. In addition, we hope that these accounts will give patients and families a better sense of not being alone in confronting the problems that can be anticipated by persons with serious emotional difficulties. We welcome other contributions from patients, ex-patients, or family members. Our major editorial requirement is that such contributions be clearly written and organized, and that a novel or unique aspect of schizophrenia be described, with special emphasis on points that will be important for professionals. Clinicians who see articulate patients with experiences they believe should be shared might encourage these patients to submit their articles to Schizophrenia Bulletin, First Person Accounts, EEI Communications, 66 Canal Center Plaza, Suite 200, Alexandria, VA 22314.—The Editors.

Insidious is an appropriate word to describe the onset of schizophrenia I experienced. I gradually lost all my human relationships, first my girlfriend, then my immediate family, then friends and coworkers. I experienced a lot of emotional turmoil and social anxiety. Somehow I graduated from Trent University in Peterborough, Ontario, Canada, but the last year I was smoking marijuana almost every day. I was creative but found it increasingly difficult to actually read anything. My career aspirations were to become a Rastafarian sociobiologist. I had become incapable of long-term romantic relationships after the demise of my first one. At graduate school in Halifax I was hospitalized for a couple of weeks, a nervous breakdown I thought. Even though I was prescribed chlorpromazine and then trifluoperazine, no one mentioned schizophrenia to me or my father, a family physician. I tried to complete my year, but some courses went unfinished and I was kicked out of graduate school.

Within 2 years I was one of the homeless in Calgary, sleeping in a city park or the single men's hostel, hungry because I didn’t get to eat very often. A World War II hero wanted to hurt me because I had discovered the war was caused by the influenza epidemic of 1918. Tibetan Buddhists read my mind everywhere I went because I had caused the Mount Saint Helens eruption for them earlier that year with my natural tantric abilities. For 10 years I lived more or less like that, in abject poverty, without any friends, quite delusional. At first I was going to be a Buddhist saint, then I was a pawn in a secret war between the sexuals and the antisexuals that would determine the fate of humanity, then I realized I was in contact with aliens from the future. There was going to be a nuclear holocaust that would break up the continental plates, and the oceans would evaporate from the lava. The aliens had come to collect me and one woman. All life here was about to be destroyed. My future wife and I were going to become aliens and have eternal life.

My actual situation by then was a sharp contrast. I was living in a downtown Toronto rooming house with only cockroaches for friends, changing lightbulbs as they burned out in a large department store. It was a full-time job I could do, but I hated it intensely. I worried about my enemies who were trying to turn me into a homosexual, and I was in constant telepathic conversation with my future wife, listening to rock and roll songs for messages from the aliens in my spare time. I ran into trouble with the law one night after becoming furious at the aliens for not transferring my mind to another body. The judge sentenced me to 3 years of probation with the condition I see a psychiatrist for that time.

Most psychiatrists admit that they are human these days. As such, they wouldn’t have understood what had been revealed to me by the aliens, so I was “uncooperative,” keeping my appointments only to stay out of jail. After paying restitution for the windows I had broken, I
started to buy beer, ostensibly because hops were a treatment for celibacy. I would get off work, go to the liquor store, go home and drink until I passed out, get up the next day, and get to work on time. My behavior became so bizarre, though, that I was fired from my job. My income decreased in steps to unemployment insurance and then welfare as I started to eat at soup kitchens and brew my own beer in plastic pails in my room. Being transformed from a human into an alien was an inherently painful process of turning on every neuron in pain as a human in order to maximize pleasure as an alien. I once asked them why they didn’t make a machine for transforming humans into aliens, and they laughed, “Machines?—Ian, we don’t have any machines.”

I started experiencing blackouts, waking up in strange places, and the psychiatrists started to suggest admission to a hospital for alcoholism. I was missing rent payments, obeying command hallucinations to buy beer, and I was afraid I would soon be sleeping on a hot air vent, homeless again. The aliens had no “money” as we know it. For them it was poetic justice that their son, the future of all mankind, would call home a hot air vent. I agreed to be admitted to the Homewood Health Centre, an act of rebellion against the aliens. I was very frightened about how my mind was separating into me, the left hemisphere, the right hemisphere, very demanding, and the dinosaur or core brain, which was very powerful and angry with me. It had been 10 years since I caused the Mount Saint Helens eruption.

As I sobered up I realized I was in a genuine resort. Carpets, cable TV, three meals a day served by waitresses, people to talk with, a comfortable bed, and a view of 50 acres of partly forested grounds. I was discharged “involuntarily” to my usual accommodation, a small basement room, admittedly without the cockroaches, but I was a typical abandoned ex-patient. Some days I had to go buy a chocolate bar just to have a conversation with another human. “That will be $1.19 please. Thank you very much.” The delusions had faded a lot, and I was for the first time quite alone and very miserable.

I took the antipsychotic medication and over the next few years started to develop insight. They were in some ways the hardest years. I was depressed, lethargic, very lonely, with no purpose or direction. I was now 35, with no friends, no career skills, and no resume to speak of, and I had been celibate for over 10 years.

Eventually I made a few friends at a day program and started trying some volunteer work and then a very part-time job delivering flyers. I switched jobs to deliver the daily newspaper, which was more lucrative, although that is a relative term. We all struggled with living on a very limited income, rolling our own cigarettes, walking a lot. It took several years to realize I wasn’t going to pick up the pieces and go back to graduate school. I did know what it’s like to have schizophrenia, though, and was willing to give presentations whenever asked. I wanted to prevent what happened to me from happening to others and started going into the high schools with a friend who has bipolar disorder. The project gathered momentum and I proposed to the Homewood that they hire me to do community education part-time. They gave me an office, a telephone, and an employee badge, but my pay was an honorarium each month based on my hours.

I’m in my fourth year there now and I’m basically an opportunist, taking advantage of any opportunity for community education. I make about 50 presentations a year on the experience of schizophrenia, about half to students of some sort. Pharmaceutical companies have funded many of the projects I have undertaken. I owe most of my education about schizophrenia to them as well, through their invitations to dinner presentations and sponsorship to attend conferences like Schizophrenia 1996 in Vancouver and Schizophrenia 1998 in Toronto. I switched to olanzapine when it was approved and am becoming more active on it, although at first I wondered if it really was an improvement or not. Many of the family members I know, who see me once a month or so, have commented on the continuing improvements they see in me on olanzapine.

I got on the Internet and put up a simple site on the experience of schizophrenia (www.chovil.com). It has had over 100,000 visitors in 3 years and is one of the most successful projects I have undertaken. The Homewood insisted it be a hobby separate from my position. Recently I was honored with the Courage to Come Back Award from the Clarke Institute Foundation and the Flag of Hope Award from the Schizophrenia Society of Canada. I also received a Certificate of Merit from the federal Ministry of Health for a series I produced for community television.

My life has been improving a little each year, and noticeably on olanzapine, but I am still quite unsure of myself. I still have what I call “the poverties,” like poverty of thought, emotion, friends, and hard cash. My social life seems to be the slowest to improve. I have three or four recreational friends, only one without a mental illness, only one that I see fairly often. I lived for awhile with Rosemary, whom I still see often, in a two-bedroom apartment until the government changed its regulations on cohabitation and we had to separate or lose almost $400 a month in income. Now I’m in a very nice subsidized apartment, fairly happy on my own for the first time thanks to olanzapine and my position at the Homewood, which brings me into contact with a lot of people.

I’ve been witnessing the deterioration of the mental health system in Ontario, where “mental health reform” was supposed to improve the quality of life for the seriously ill. Many of them are homeless on the streets or in jail instead, and we now have outreach workers devoted to engaging
these people who were never treated adequately in the first place. The government is closing psychiatric hospital beds and opening forensic beds in almost the same press release, unaware of any relationship between the actions. I'm becoming a more and more vocal advocate for "adequate treatment," treatment that includes followup, housing, and opportunities in the community. It seems to me that good treatment strategies now exist for schizophrenia but the government has no provincial plan to minimize the destructiveness of schizophrenia. It may be possible to prevent the destructiveness of schizophrenia by treating people before the first psychotic episode. I strongly believe that no one should ever have to have more than one psychotic episode—their first.

Lately I have started to read again. *Conquering Schizophrenia* by Peter Wyden convinced me that people with serious mental illness have and continue to be victims of abuse, but not just at the hands of psychiatrists. They suffer a lot more abuse from governments and society in general. My friends get upset if you start talking about schizophrenia on a city bus or in a coffee shop. They don't want anyone to overhear the conversation and associate them with the disease. As if the actual experience of schizophrenia isn't bad enough, they also feel ashamed about having it.

I wrote a poem as an undergraduate that was published in the student newspaper. The first line was "I and I, dancing fool, challenge you the world to a duel." I intend to challenge the world to the best of my ability, until people like me have the quality of life possible with the most effective treatment strategies available. My mantra has become "early diagnosis and first-line treatment with atypicals, family education and relapse prevention, adequate housing and case management, opportunities for meaningful activity and employment." Sometimes I wish I had become an alien.

The Author

Ian Chovil has been living with schizophrenia since age 17. He graduated from Trent University in 1978 with an Hon. B.S. in Biology and Anthropology. He was awarded a Certificate of Merit by Health Canada in 1997, a Courage to Come Back Award by the Clarke Institute of Psychiatry Foundation in 1998, and the Flag of Hope Award by the Schizophrenia Society of Canada in 1998. His Web site, www.chovil.com, averages over 100 visitors a day. He hopes the next generation can be spared the experiences he has endured.