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D RUGS NO EASY ANSWER FOR WOMEN ON THE EDGE OF TIME

L.A. Reed

When I was in my 20s, sometime around 1977, I ran across the recently published novel by Marge Piercy, *Woman on the Edge of Time*. In it, Piercy warned that the mental health care system could and was being used as a tool of racism, sexism, and a crack down on political dissidence. Basically, anyone who got overly upset about their oppression could be type-caste as crazy, resulting in institutionalization and being drugged into numbness and passivity.

About the same time in Cincinnati, Ohio, where I used to live, the feminist “Crazy Ladies Bookstore”^{*} opened. As a young woman coming out as a feminist, dealing with lesbian politics and women’s issues in general, the

notion that I was “crazy” because I was different and actually powerful really hit home.

In my family I had been labeled as crazy. Was this because I wanted equality with the men growing up? Or because I wanted to receive the same chemistry set as my brother? Or have support being a sports star? The feminist interpretation of what “crazy” could mean was difficult, but also affirming.

The 1970s was, overall, a time of affirmation in my life. I learned for the first time I might not be alone in my perceptions of what was important and who I was. I had refused to be controlled by family as a girl and then a woman, did not want them telling me what I “should” be when I grew up. Did not want to

be handed over to a man like someone buys a piece of land. Did not want children and family (read “husband”) to be the sole reason for my being alive. And I did not want to stay my father’s “little girl.” The idea of that still gives me the shivers. Years later, I know I had been physically, psychologically and sexually abused. Today I understand the emotional trauma and history I have is, indeed, more than anything else, about my power as a woman.

So, Marge Piercy’s book was scary. And too true. Though I have met some very decent, politically progressive people in the mental health system, and many have been very helpful, I believe the system is still being used in the wrong way by many practitioners. Particularly, the prescribing of more and more drugs.

The selling of drugs has become commonplace, a way out of almost every “ill” possible, from depression to “anxiety” (a subtle word for “fear”) to ADD (Attention Deficit “Disorder”—read, “I want to go outside and play” or “I’m hyped up on too much sugar”).

There is no substitute for dealing with the feelings of oppression: Grief, anger, rage, fear are the real feelings that result from oppression. Dealing with how we’ve been hurt—the emotional trauma that is still in us—is an important part of our recovery. But that recovery has to involve our power to make our lives better.

The result of being powerful is to act, to take back our lives whether it is leaving an abusive spouse, making it safer to be lesbian or gay, ending racism, working for peace, learning how to rest more or play, or changing the laws that feed money into corporate profit. Whatever empowers us: taking walks in the park and deciding that gardening is something good for our health and good for the environment. Or singing. Or doing art. Taking action changes our lives. And the lives of many other people. And the world.

The feelings that come as a result of us

being hurt do too often, however, interfere with our thinking, our ability to believe we are powerful and feel good about ourselves. Sometimes in our rage and fear, we hurt others. We feel real depression (sadness and grief). And then we are encouraged to take more drugs.

The proliferation of drugs on the market and the selling of them in ads, on TV, are astronomical. The makers and sellers and prescribers of mental health drugs are making billions of dollars off of how frantic and scared people are. And angry. And suppressed in our emotions. And it is being done very, very seductively with these beautiful ads. The use of prescribed drugs is so commonplace, it’s almost as if mental illness is being subtly normalized. And yet, it’s still not. It’s still not okay to say, in a tone of righteous indignation, I’m working on an assembly line for 10-12 hours each day and my mind is growing numb and people are being injured. It’s not okay to be angry in the way that makes us decide to not give up. It’s not okay to cry, for heavens sake, because someone beat me up; or, there is a war going on.

Taking medical drugs as a way of life makes our problems individual, when what we need is other people, people to support each other getting more powerful and changing our lives and society. Not being alone.

I believe all this, and yet several years ago, after a lifetime of disability and chronic pain, I decided to go on some medical drugs. I had become poor and suicidal. I was filled with shame about whether things could ever get better, whether I could get the health and physical care I needed. Just doing political work also didn’t help; sometimes I avoided dealing with my emotions by doing political work. I used to overwork doing that, instead of balancing it with play and fun. As if that itself was a form of drugs.

I eventually went on a soft anti-depressant/sleep medication while knowing that I might get hooked on it. I used it to temporarily break sleeplessness patterns caused by my abuse history and fear related to survival issues. I needed to break the cycle of sleep deprivation, which causes more physically induced fear and more physical problems. And the medicine did help.

As someone in touch with the workings of my body, however, I was also aware that these drugs were affecting my internal organs, from my liver to my brain and intestines. They were causing physical blockages and harming me in other ways. The drugs, for me were not a long-term solution.

But I am low-income, on social security disability and welfare and the drugs are paid for by Medicaid. At the same time, many of the things which I needed more of, or that would help me long-term if I persisted—alternative medicine, nutritional supplements and better, healthier food—I had to pay for out-of-pocket. Food stamps and other government assistance isn't enough. Even most over-the-counter supplements are no longer being used as a deduction when determining how much I pay for things like Section 8 subsidized housing. I pay more, stay poorer and have less money for things I need to get better. And the poorer one is the easier it is to give up, and the less power and actual physical energy one has to make change.

I did persist, though. I started networking and getting help from any and every agency and organization working on health and disability issues. I worked with advocates, people knowledgeable about the issues I was dealing with. Community organizations helped me get on food stamps. A Jewish social service organization helped me apply for Social Security. A disability advocacy group helped me apply for Section 8 using different rules because I am

disabled. This same group made phone calls for me when I couldn't use the phone, put things in envelopes and put stamps on the envelopes when I was in too much physical pain to do these little things. Someone told me I did qualify for disability transportation, and how to get it. This is real help. I found people I could call on for small counseling sessions, who could listen to me think, and with whom I could have feelings when I was scared. I found a therapist who was political enough to help me up stairs to get to sessions (I use a cane), carry my coat, and listen to me struggle with my power. I got lots of help. Things are slowly, slowly changing in my life and my health is improving and I'm feeling more powerful as a disabled person, a poor person and a woman. And yes, I have had to keep doing the emotional work about all of this. And I've drastically reduced my medications.

We users of the medical system can't let ourselves become so dependent on the pharmaceutical companies for our drugs—whether it is mental health drugs, or pain medication—that we become less active in searching for alternatives that are not addictive, are less harmful, less expensive, and don't have the same kind of bad side effects. Homeopathic and herbal remedies, acupuncture, vitamins, good food. Healthy water. Counseling. Change.

I know I can do this. I can't do this alone. Perhaps that is the caveat I offer here, the warning: We need each other. We need help, not in the form of medicine that slows down our brains more, though sometimes it may be a way to stay alive while we heal and take power in other ways. I do not criticize anyone who has made that choice. But what we really need is the kind of sustaining help that makes us not want to give up, gives us a chance to release the emotional hurts we have, and heals our bodies and minds and spirits. Brings us together. And changes our lives.

NOTE

Art on page 46: “Unbraided” sculpture by Lili Artel.

*In early 2005 Mary Pierce Brosmer was elected Director of the Greater Cincinnati Women’s

Resource Center by its board of trustees, for the purpose of developing and maintaining the Historic Crazy Ladies Bookstore as a home for Women Writing for (a) Change and the Feminist Leadership Academy.