How does it feel to have a young person in your care experience psychosis for the first time?

An impressionistic answer to this question played out over sixty minutes in a studio theatre in Easterhouse, Glasgow: distress, frustration, repetition, annoyance, uncertainty and loss of hope along with the human absurdity of suffering that was, sometimes, despite the grim subject, funny.

Three stories of young people's mental health disintegrating were told by their parents sitting in a self-help-style circle of chairs: the difficulty of persuading a bright bolshie teenage girl to see a health professional; the sadness of watching a dope-smoking son become paranoid and disordered. The near impossibility for parents to grasp the dimensions of their child's unreasonable, destructive behaviour that graduates slowly, sometimes over years, from average adolescent difficulties to serious mental illness.

Over fifty interviews were undertaken with service users, their carers (mostly parents) as well
as care providers as part of the NIHR-funded ENRICH programme [Ethnicity, Detention and Early Intervention: Reducing Inequalities and Improving Outcomes for Black and Ethnic Minority patients]. These interviews have been analysed and written up as standard research papers.

Playwright Mike Kenny, poet Julie Boden and theatre director Claudette Bryanston used the same interview material to create the theatre performance ‘Cracked’, in collaboration with professional actors and young people from schools and community groups.

Some of the interview material has been included verbatim: the difficulty of describing how ordinary family tensions become something unmanageable is clear as one character’s speeches repeatedly end with ‘you know what I mean?’ The question, which punctuates the piece, sounds like a plea for help as the character no longer knows what he means and has little expectation that the listener might.

The entrapment of mental illness is illustrated with coloured pools of light and stacks of plastic chairs encircling the actors. The disintegration of daily life plays out with chairs being scattered across the stage. Young people are incorporated into the show as a chorus creating the movement and impression of ongoing daily life, whether chaotic or oppressive, around the story-telling carers played by professional actors.

Psychosis is a contested diagnosis and it is especially difficult to diagnose in young people. Offering supportive services early on in the process of a developing illness is the best chance of preventing the worst outcomes of such distress. Minority ethnic groups have disproportionately low chances of good, supportive services early on; furthermore they have excessive chances of entering services through the criminal justice system rather than health service referral and of ending up in detention rather than community care. This play does not tell us why the excess exists. Rather it highlights the universal aspects.

The distress and uncertainty of caring for a family member with serious mental distress is held common, with ancestry from the Caribbean or the Indian sub-continent making little difference. Whether a family tries out religious or spiritual support via the mosque, church or temple, their isolation and confusion is similar. The research papers from these interviews show that collaborative working between voluntary and community health services to make services spiritually and culturally appropriate is lacking. This will not come as a surprise to anyone who has tried to support a person with severe mental distress.

The hope is that by communicating experiences in play-form, the complexities of serious mental illness in young people will be understood by a wider range of people. Together with reform to enhance early intervention services, a better understanding of the experience of psychosis among a wider section of the public might support help-seeking by parents and other carers.

This play was part of the Autumn Tour by the Santé Theatre Company. Cracked was funded by the Wellcome Trust, produced by Santé Theatre Warwick, Social Sciences in Health Warwick Medical School. The play was based upon findings from the Department of Health (NIHR) funded ENRICH programme of research conducted by Professor Swaran Singh at Warwick Medical School.

YOUR COMMENTS

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