From the beginning, the staff at the big city hospital, the Fraser Unit, treat me like a naughty child. Much later, I will learn they are practising behaviour modification. It feels like cruelty. I am chastised for lying on my bed, for being homesick, for being sad. They tell me to watch television to divert myself from the head pain and the agitation that comes with flashbacks. The nurse brings me stacks of magazines, suggesting that I rip them up to vent my anger. After five times saying no thank you, I throw them across the room. When I can't concentrate on the cognitive therapy workbook they bring me, they say my attitude is pathetic; I am not trying hard enough. I am told over and over that I am not here to deal with my "issues." One day when I thank a nurse for taking the time to sit and talk with me, she pulls away, angry; according to the staff, my happy gratitude means that I am trying to win her over to my side. I don't like the way I behave in response to the way they treat me. I fantasize about running away, hiding on the streets from the police they would send after me. I want to go home.

I was at Hills when I tried to kill myself. I had asked not to be left alone, but they did leave me alone. I paced, hit the bed, called out. The many-coloured pills were in my pocket. After, the world swam in dizzying circles. A loud rush entered my head, and I fell. I woke in the intensive care unit. Trevor was punctured, wounded in a way I had never seen before; my mother was sickened. I can't hurt them again, or my children. I am not allowed to die. In utter despair, I weep.

For the first month at the Fraser Unit, I am given ECT every second weekday. I have eleven sessions. My mind gets so thick that I can't remember the staff who cared for me the day before or what we talked about.

It is my birthday. Trevor visits, a ten-hour drive from Napier, bringing me an amethyst necklace and earrings. On his next visit, weeks later, I show him the necklace, curious about where such a beautiful thing could have come from. "Don't you remember?" he asks, then reaches for me. He reads me a love poem he has written. We are perched on the edge of my single bed, the curtains pulled on an overcast fall day. I am in my pyjamas; the staff has locked up my clothing to punish me for staying too long off the ward, even though I didn't know there was a time limit. In my hand is a cluster of notes I've written for Trevor to take back to our children. They are full of an optimism I don't feel, a love I am desperate to communicate.

For a while they called me manic depressive. I liked that label. It took the responsibility away from me. Since then, I have been diagnosed with a major depressive disorder, symptoms of personality disorder, and an adjustment disorder. Apparently that

means I am sad and manipulative and dependent and avoidant and not good at coping with having bad things happen to me. I am all those things. I crave acceptance and love from the hospital staff; that would unleash my pain, allow me to get past the suffering. But it seems they are afraid they will be succumbing to manipulation if they offer me support.

The hospital does a psychological assessment to ascertain whether I am suffering from post-traumatic stress disorder. There are six criteria for PTSD, the interviewer tells me. Following a traumatic event in which the person fears death or injury, he or she experiences persistent feelings of horror or helplessness. Nightmares, intrusive thoughts, a reduced interest in others, agitation, irritability and outburts of rage are common. The interviewer reads the criteria to me from the DSM-IV, the fat blue book psychiatrists use for diagnosis. I sit unmoving, feeling as though she and I are talking about someone else.

The report comes back from Psychology at the end of the week, indicating that I meet the diagnostic criteria for PTSD. A staff person files it away in my chart.

The faces, pure and sweet, float through the air towards me. As they get closer, they twist and contort in agony. They are hideous: cut, bloody, in pieces. Even with my eye open, they keep coming at me. I bang my head on the wall. I need help, but I am afraid to tell the staff. They will be angry, tell me to deal with it myself.

My roommate, Barb, is a soft, grey-haired woman, a psychiatric nurse when she is well. Her arms go around me, and she hugs me tight.

"Hey," she says. "What's going on? Trish. Hey." I sob uncontrollably. "I'm going to get a nurse."

When she comes back, she sits beside me, her arm around my shoulder. She tries to calm me. Bloody faces, dark red and black, rise in front of me over and over again.

"The nurses said to leave you alone," Barb says angrily. "I can't do that. You need someone with you." She leans over, tries to pull me upright. "Sit up. Let me hold you. Open your eyes."

"Oh God. Make them go away!"

"Open your eyes."

She leaves the room again, and when she returns she is furious. "I'm being moved. We're not roommates anymore. I'm not supposed to help you. You're supposed to tough it out alone. Damn, I hate this place."

Two nurses enter. Their backs to me, they instruct Barb to bundle up her belongings. Then she is gone.