

Translation into English by ChatGPT of Siska De Ruysscher's Open Letter

Original version in Dutch published on October 3 on her Instagram page

<https://www.instagram.com/p/DPWXTAqDF7x>

siska_deru Een open brief aan hulpverleners,
psychiatrische ziekenhuizen, de maatschappij,...

Een brief die hopelijk ogen kan openen en steun
geeft aan anderen om ook met hun verhalen naar
buiten te komen.

Een brief die van belang is in de week van de
geestelijke gezondheidszorg. Want hoe moeten we
zorg dragen voor onszelf in een maatschappij dat
niet weet wat zorgdragen is?

Een brief die hopelijk bij de juiste personen terecht
komt die het bespreekbaar kunnen maken en wie
weet wel voor kleine veranderingen in ons
zorgsysteem kan zorgen.

!! Deel je verhalen, deel mijn verhaal, in de hoop op
bespreekbaarheid en verandering, het is zo zo
nodig **!!**

Mijn tijd is kort, maar hopelijk nog betekenisvol voor
anderen. 

An open letter to caregivers, psychiatric hospitals, and society...

A letter that I hope can open people's eyes and encourage others to come forward and share their own stories.

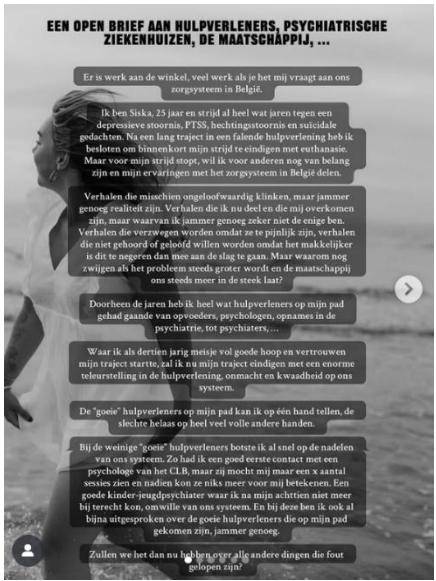
A letter that matters during this Mental Health Week.

Because how can we take care of ourselves in a society that doesn't know what "care" really means?

A letter that I hope will reach the right people — those who can make this issue something we can finally talk about, and who might, just maybe, bring about small changes in our healthcare system.

!! Share your stories, share mine, in the hope of sparking dialogue and change — it is so, so necessary !!

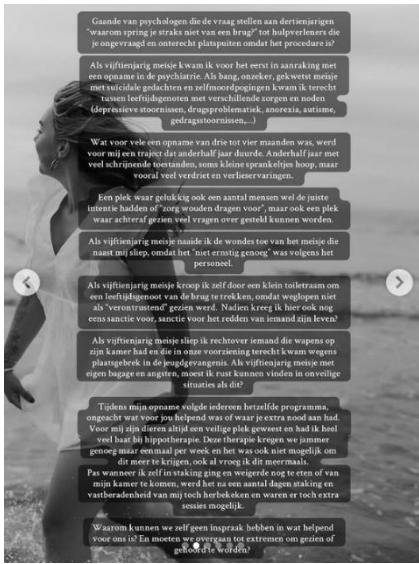
My time is short, but I still hope it can hold meaning for others. 



There is work to be done—so much work, in my view, in Belgium's healthcare system

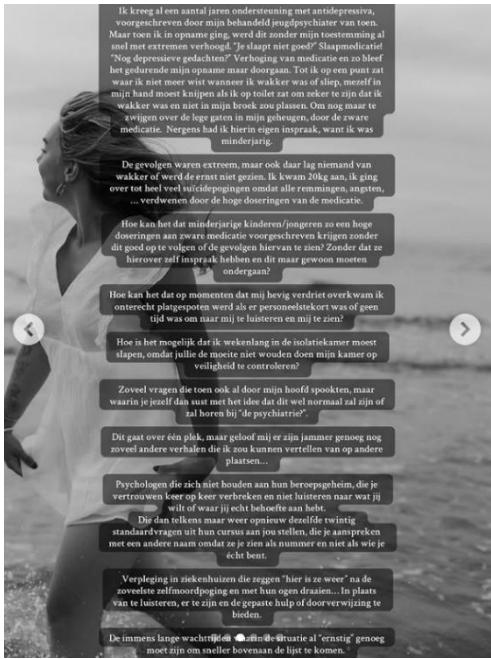
My name is Siska. I am 25 years old, and I have been struggling for many years with major depressive disorder, post-traumatic stress disorder, an attachment disorder, and suicidal thoughts. After a long fight with a failing healthcare system, I have decided that I will soon end my struggle through euthanasia. Before that time comes, however, I want to be useful and share my experience with the Belgian healthcare system. These are stories that may seem unbelievable—but they are, unfortunately, real. Stories I am sharing now, experiences that happened to me, but I am certainly not the only one. Stories that have been

kept silent because they are too painful, stories that people refuse to hear or believe because it is easier to ignore them than to confront them. But why stay silent when the problem continues to worsen, and when society is increasingly failing us? Over the years, I have met many caregivers—from educators and psychologists to psychiatric residents and psychiatrists. Where I began my journey as a thirteen-year-old girl full of hope and trust, I am now ending it with enormous disappointment in the care I received, along with a deep sense of powerlessness and anger toward the system. I can count on one hand the “good” care providers I met, but unfortunately, the bad ones could fill several more hands. Even with the few “good” professionals, I quickly noticed the weaknesses of the system. For example, I had a positive first encounter with a psychologist at the CLB (Centre for Student Guidance), but she was only allowed to see me for a limited number of sessions and could not continue helping me. There was also a good child and adolescent psychiatrist whom I could not see again after turning eighteen, due to the limitations of the system. And that is almost all I can say about the good care providers I encountered—unfortunately. So, shall we now discuss all the other things that went wrong?



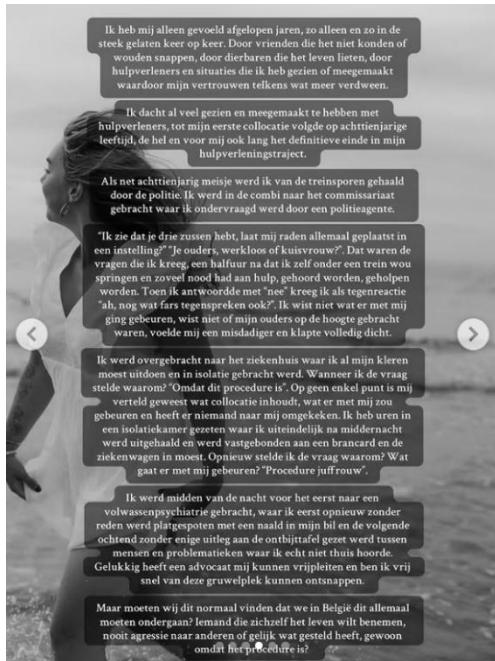
It ranges from psychologists asking thirteen-year-olds, “*Why don’t you just jump off a bridge already?*”, to paramedics injecting you with medication without your consent and without justification—simply because “*that’s the procedure.*” When I was fifteen, I was hospitalized for the first time in psychiatry. A frightened, anxious, and wounded girl, struggling with suicidal thoughts and suicide attempts, I found myself surrounded by people with all kinds of issues and needs—depression, addiction, anorexia, autism, behavioural disorders, and more. What was, for many, a three- to four-month hospitalization turned into a year and a half for me. A year and a half filled with painful moments, brief sparks of hope, but above all, a great deal of sorrow and loss.

It was a place where, fortunately, some people had good intentions and genuinely wanted to “take care”—but also a place that, looking back, raises many serious questions. At fifteen, I stitched up the wounds of the girl sleeping next to me, because “*it wasn’t serious enough according to the staff.*” At fifteen, I crawled through a small bathroom window to save a fellow patient from a bridge, because running away wasn’t considered “*disruptive behaviour.*” I was punished afterward—punished for saving someone’s life. At fifteen, I slept across from someone who kept weapons in her room, someone who had been placed in our ward only because there was no room left in juvenile detention. With my own fears and trauma, was I really expected to find peace in situations like these? During my stay, everyone followed the same program, regardless of what might actually help them or what additional support they needed. Animals have always been a source of comfort for me, and equine therapy did me a lot of good. Unfortunately, we only had those sessions once a week, and it was impossible to get more, despite my many requests. It was only when I went on strike—refusing to eat or leave my room—that my program was finally reviewed. After several days of protest and sheer determination, additional treatments were offered, and extra therapy sessions were finally made possible. Why don’t we have a say in what actually helps us? And why must we go to such extremes just to be seen or heard?



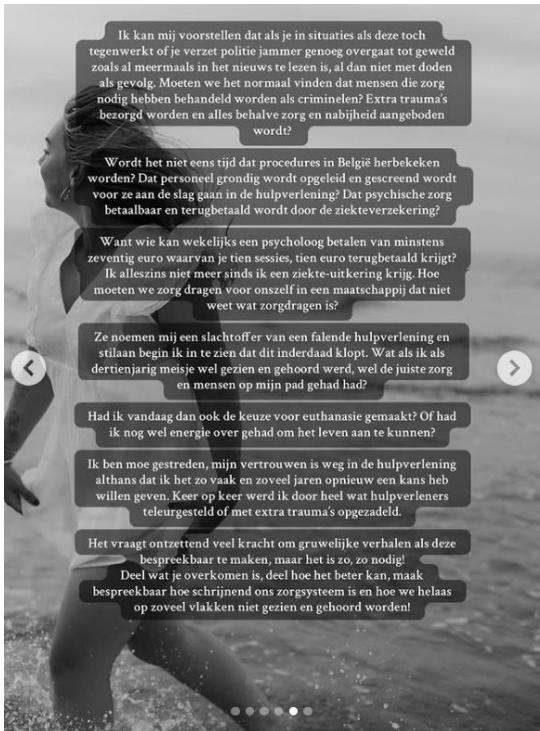
I had been taking antidepressants for several years, prescribed by my child psychiatrist at the time. But upon my admission, the dosage was drastically increased—without my consent. “You’re not sleeping well?” More sleeping pills. “You still have depressive thoughts?” The dose was increased again. And this continued throughout my entire stay. It reached a point where I no longer knew whether I was awake or asleep. I would pinch myself while sitting on the toilet just to make sure I was actually awake and not dreaming. Not to mention the memory gaps caused by the high doses of medication. I had no control over any of this, since I was a minor. The consequences were extreme—and yet, no one seemed to care, no one took the situation seriously. I gained 20 kilograms and

attempted suicide multiple times, because all my inhibitions, fears, and limits had disappeared under the influence of such heavy medication. How is it possible that minors and adolescents are prescribed such high doses of powerful drugs—without understanding or agreeing to the consequences? Without any say in the matter, left only to suffer the results? How is it possible that, in moments when I was deeply distressed, I was unjustly injected with medication simply because there wasn’t enough staff or time to listen and be present with me? How is it possible that I was forced to sleep in an isolation room for weeks because no one wanted to take the time to check my own room for safety reasons? So many questions already haunted my mind—but eventually you convince yourself that all of this must somehow be normal, or just “part of psychiatry.” And this was only one place. Believe me, there are, sadly, so many other stories I could tell from other places... Psychologists who do not respect confidentiality, who break your trust again and again, and who do not listen to what you actually want or need. They keep asking you the same twenty standard questions from their training manuals, and even call you by the wrong name—because they see you as a number, not as a person. Nurses in hospitals who say, “She’s back again,” after yet another suicide attempt, rolling their eyes... instead of listening, being present, and offering real help or proper guidance. And the waiting lists, already unbearably long, where your case has to be “serious enough” just to move up a little faster.



I have felt alone—so deeply alone and abandoned, time and time again. Abandoned by friends who did not understand, by loved ones who lost their lives, by caregivers, and by situations I witnessed or lived through that slowly eroded my trust. I thought I had already seen and experienced enough with healthcare providers—until my first placement at the age of eighteen, which turned out to be hell for me, and the definitive end of my journey through the healthcare system. At barely eighteen, I was stopped by the police on the railway tracks. I was taken in a van to the police station, where I was questioned by a female officer. “I see you have three sisters—let me guess, all in institutions?” “Your parents—unemployed or cleaning lady?” Those were the kinds of questions I was asked—

barely half an hour after wanting to throw myself under a train, when all I needed was help, to be heard, to be cared for. When I answered “no,” she replied, “Oh, so you even contradict them?” I had no idea what was going to happen to me. I didn’t know whether my parents had been informed. I felt like a criminal—and completely shut down. They took me to the hospital, where I was told to undress completely and was placed in isolation. When I asked why, the answer was: “Because that’s the procedure.” No one ever explained what isolation meant, what would happen to me, or why. I spent hours in that isolation room, until after midnight, when I was finally taken out—strapped to a stretcher—and loaded into an ambulance. Again I asked why, what was happening to me. “The procedure, miss.” That night, I was taken to an adult psychiatric ward, where once again someone stuck a needle into my hip for no apparent reason. The next morning, without any explanation, I was placed at the breakfast table among people and problems that had nothing to do with mine. Fortunately, a lawyer was able to intervene on my behalf, and I managed to get out of that terrible place rather quickly. But should we really consider it normal to have to endure all this—in Belgium? Someone who wants to die by suicide, who has never shown aggression toward others, is still treated like this—simply because “it’s the procedure.”



I imagine that if someone resists in situations like this, the police will, unfortunately, resort to violence—as has been repeatedly reported in the media—sometimes resulting in deaths. Should we really consider it normal that people in need of care are treated like criminals? That they suffer additional trauma and receive everything *but* care and compassion? Isn’t it time to review the procedures in Belgium? To ensure that staff receive proper training and thorough screening before they begin working in the healthcare sector? Mental health care should be affordable and covered by health insurance. Because who can afford a psychologist for at least seventy euros a week, with only ten sessions reimbursed at ten euros each? I can’t anymore, now that I’m living on sickness

benefits. How can we take care of ourselves in a society that doesn’t know what “taking care” really means? I’m labelled as a victim of “treatment failure,” and I’m starting to understand that this is exactly what it is. And if, at thirteen, I had been seen and heard—if I had received the right care and the right people to help me—would I be choosing euthanasia today? Or would I still have the strength to face life? I am tired of fighting. My faith in the healthcare system has vanished—or rather, I’ve tried to give it a second chance so many times, over so many years. Time and again, I’ve been disappointed by healthcare professionals or experienced additional trauma. It takes tremendous strength to speak about such painful experiences, but it’s so necessary! Tell your stories—what happened to you, how things could be improved. Speak out about the deplorable state of our healthcare system and how, unfortunately, we remain unseen and unheard in so many ways.



How is it that mental health issues are still ignored in high schools? That people admitted to psychiatric care are still portrayed as “crazy”? I believe there are no people braver than those who fight every single day against themselves and against the damn harsh world we live in today. In a way, I feel relieved to know that some people have seen my struggle and understand that, for me, it’s enough. That the daily battle has gone beyond what life still holds for me. That the many therapies, medications, and support services haven’t worked in my case. That the energy and trust needed to begin new treatments have simply run out. I may soon say goodbye to life, but I hope my story will become a starting point for many others to share their own. That it will reach people

who can make a difference in this matter, who can help change our healthcare system—or at least are willing to talk about it. That the horrific “procedures” will be reviewed, that hospital admissions will be healing instead of traumatic, that mental health care will become affordable for everyone, that more personalized care and patient involvement will be allowed, that waiting times will be shortened, that caregivers will receive proper training. There is so much work to be done to improve things, to save lives. It’s high time we wake up—and wake up Belgium—by sharing our stories. Share them, talk about them, make people see how hard your fight is. Wake them up, and try to hold on to a bit of hope—for change, and for better mental health care.

Warm hug,

Siska