Adrianne Stacey’s Shield Alert Status

Summary

1/29/2021

Adrianne Stacey first contacted MindFreedom International in December 20, 2021 seeking advocacy and protection after being discharged from Cowichan District Hospital, in Duncan, British Columbia, located on Vancouver Island.

At that time, MFI did not issue a Shield alert because Adrianne had been discharged and was no longer being subjected to psychiatric treatment by force. Adrianne learned about the Shield program on December 21 and enrolled on December 22. MFI staff then contacted the MFI affiliate in Nelson British Columbia in the hope of finding peer support. The liaison of MF Nelson British Columbia, Bryhre Cormack, has been working with MFI staff since early mid-January to connect her to peers on the island, and we sent several letters to area agencies.

Before those efforts could bear fruit, Adrianne was re-hospitalized.

Adrianne was allowed intermittent use of her cell phone. With help from Bryhre, MFI was able to put together this brief summary of the circumstances leading up to Adrianne’s current Shield Alert Status.

Adrianne received a diagnosis of Bipolar nearly twenty years ago during a difficult divorce, after which she received psychiatric drug treatment. It is not known at this writing if she was subjected to any court ordered treatment during that period. In 2020 and 2021, Adrianne experienced four, separate, involuntary hospitalizations, in the process of seeking treatment for iatrogenic harm.

Earlier, when she started to experience significant, debilitating side effects, her psychiatrist of 17 years helped her to wean off several, harmful psychiatric drugs but by this time, her health had deteriorated to the point where she could no longer stay employed.

Currently, Adrianne needs a mobility device to get around her house and due to declining muscle strength, she can no longer lift anything over two pounds. At this point, she needs a live-in assistant and is willing to provide room and board, as well as a modest living stipend in return. She steadfastly advocated for her right to obtain appropriate medical treatment for her documented physical disabilities, as well as her right to reject more harmful, psychiatric treatment, despite facing profound medical discrimination.

Her physical disabilities were dismissed by the attending psychiatrist as secondary or ‘delusionary’.

By persistently advocating for her right to receive appropriate medical treatment and reject unwanted psychiatric ‘treatment,’ she was rewarded with yet more psychiatric labels, including one that is particularly damaging for psychiatric survivors: narcissistic personality disorder.
For years, Adrianne had used her considerable research skills—she has two advanced degrees—to learn more about how her past psychiatric treatment contributed to her declining, physical health. She worked diligently for nearly two years to safely titrate off all of her psychiatric drugs. Her healing and recovery from iatrogenic, drug-induced harm was made more complicated by the emergence of a debilitating auto-immune disease, for which she received medical treatment that was inadequate and inconsistent.

The preferred treatment for this condition is a powerful steroid called prednisone, which can lower swelling and inflammation; however, steroidal drugs have well documented side effects. Prednisone in particular, is also known to be a difficult drug to withdraw from. When Adrianne had to stop taking prednisone, her doctor took her this drug very rapidly without giving her adrenal glands time to adjust, causing physical shock. A naturopath later stated that this constituted medical malpractice.

After her most recent discharge from the psychiatric hospital in January 2021, Adrianne returned to an empty house exhausted, with little social support and few, local allies. Family members who were once supportive, refused to help. Former colleagues could not be reached. Her adult children called the police on multiple occasions, asking them to conduct unwanted ‘welfare’ checks, which had the effect of making Adrianne feel ‘watched.’ She was terrified to live in her own home. When trying to re-establish communication with her adult son, he became violent.

In January, Adrianne sought emergency medical treatment for symptoms that were later determined to be related to poor kidney functions. After being evaluated and treated in the emergency department, she was sent back to the psychiatric unit of Cowichan District Hospital where she is being forcibly drugged at this writing.

At a recent hearing on January 22, Adrianne was not allowed to present evidence in relation to her physical disabilities as well as evidence of past, iatrogenic harm, including audio tapes and written documentation from international medical experts with whom Adrianne had personally consulted.

Instead, Adrianne viewpoints were considered to be signs of anosognosia and she was involuntarily committed under Canada’s ‘Mental Health Care Act’. The main testimony against Adrianne came from Dr. Ahmd Gheis, a man who has only known Adrianne for a short period of time.

Adrienne states that information used to commit her under the ‘Mental Health Act’ was fabricated, misleading, or taken out of context. She is not a danger to herself or others. She is being denied the right to return to her home. She is being denied non-drug, non-force alternatives.

The data shows that individuals with long term exposure to psychiatry are dying, on average, 25 years earlier than non-psychiatrized individuals. Listening to Adrianne’s story is a reminder that it is easy to be paralyzed by the enormity of this problem, as well as by the enormity of the needed solutions. Often, when viewing grim mental health statistics, we forget that there are real people like Adrianne, trying to survive at all costs.
Medical discrimination against people with psychiatric histories is well documented. This can make seeking appropriate medical treatment very dangerous and complicated for psychiatric survivors, especially as they age or become disabled.

Survivors like Adrianne expose inconvenient truths about the profession of psychiatry which is why survivors like Adrianne are often shamed, isolated, and silenced, a common tactic by abusers.

What is happening to Adrianne can happen to any of us. Please help protest the treatment of Adrianne Stacey under Canada’s Mental Health Care Act. Please help us expose psychiatric abuse and help Adrianne obtain the care and support she needs to heal and remain free from forced psychiatry.