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### The Hospital Always Wins: Review 2

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#### **Abstract**

This documentary raises crucial questions about our definitions of mental health and healing as well as the meaning of forgiveness. It also illustrates how an individual's ability to extract themselves from the grip of institutional power is highly dependent on luck and money and privilege. Perhaps most importantly, this piece gives voice, in a complex, respectful manner, to Ibrahim and other schizophrenics whose struggles remain buried and ignored. One element that is missing from this story is an account of how race complicates this unequal power dynamic. Ibrahim is black... "Hospital's" impact might have been even wider had it briefly considered how the assumption of black male criminality might have played a role in Ibrahim's long confinement.

Michelle Boyd's work explores how ethnographic research methods, creative nonfiction writing and audio documentary can be combined to deepen public understanding, empathy, and critical consciousness about racial injustice. Michelle teaches in the African American Studies Department at the University of Illinois, Chicago. She reviews *The Hospital Always Wins*, produced by Laura Starecheski for State of the Re:Union (US 2013). Duration: 53'05". *The Hospital Always Wins* was named among the best audio narratives of 2013 by Harvard University's Nieman Storyboard.

#### Keywords

radio documentary, Issa Ibrahim, schizophrenia, Creedmoor, Living Museum, Starecheski, race

#### **Recommended Citation**

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# The Hospital Always Wins

Produced, written and narrated by Laura Starecheski, for *State of the Re:Union* (US, 2013). Edited by Deborah George and Taki Telonidis. Sound Design by Brendan Baker. 53.05 mins.



Creedmoor Psychiatric Center, New York

## **Reviewer: Michelle Boyd**

Every day, at seven o'clock in the evening, thousands of tiny coups take place all across the United States. At that time, and then again 12 hours later, the nurses in hospitals and rehabilitation centres and long-term care facilities change shift; and the people who hold your life in their hands turn its care over to somebody new.

These coups tend to go unnoticed by the lucky people who have never stayed overnight in a hospital. But those who have know that medical institutions are island authorities all their own – with doctors for heads of state, and nurses as a soft-soled police force interpreting and enforcing the law. It's not that they're inherently untrustworthy. When my mother-in-law lay dying of organ failure, it was a nurse whose name we never knew who cradled my husband and me through the realisation of exactly what was happening. It was the ER doctor who saw the crumpled confusion in faces, and deliberately explained

that we weren't at fault. Two strangers, people we wouldn't recognise on the street, helped us bear an unbearable anguish. But even compassionate, careful medical professionals have a kind of power over patients' experience that is frightening to think of: your pain level, your hunger, your bladder relief, your nakedness – all are subject, in no small way, to their rule.

It's this lopsided power dynamic that independent producer Laura Starecheski reckons with in her documentary *The Hospital Always Wins*. The hour-long piece, which aired in 2013 on *The State of the Re:Union*, takes listeners inside the Creedmoor Psychiatric Center in Queens, New York. There we meet Issa Ibrahim, a vibrant, charming artist who has been in Creedmoor for more than 10 years when Starecheski meets him in 2004. She had originally planned to do a story on the link between creativity and madness. (Starecheski 2014) But when she meets Ibrahim, she is captivated by the discontinuity between how healthy he seems and how long he's been stuck in the hospital. So begins her exploration of one man's attempt to save himself from both his illness and his healers.

As a character, Ibrahim pulls us into the institution at the same time that he takes us back out again. When we first encounter him, he is funny, eloquent, and irreverent; and at the same time, he is willing to take responsibility for his actions. Starecheski herself admits that it is precisely his seeming 'normality' that prompts her to seek him out in subsequent visits to Creedmoor. By connecting the listener to someone who does not fulfil our assumptions about mental illness, Starecheski is able to centre the documentary, not just on mental health itself, but on the ways that health is impacted by the psychiatric institution's dominance over the individual.

Starecheski sets a leisurely pace painting Ibrahim's portrait, one that mirrors her own extended history with the piece. She met Ibrahim in 2004, but the story languished until 2009, when he finally agreed to tell her how he had come to Creedmoor. (Starecheski 2014) Once we are taken in by his lighthearted introduction, Starecheski complicates her portrayal of Ibrahim, illustrating how, as she says, 'he's his own worst enemy'. We learn that his behavior at Creedmoor is often defiant and that he deliberately uses his art to point out and undermine the staff's power over patients. At one point, he writes a song about the hospital's director that sexualises her, records it in his room, then sends her a copy through the hospital's internal mail system. When we eventually hear Ibrahim's description of his psychotic breakdown, it

is dramatic and affecting. But it is the slow story of his improved health and his thwarted attempts to leave Creedmoor that form the heart of the piece.

It's a piece that proceeds with little ambient sound: it does not so much take us inside the hospital, as it takes us inside the emotional world of Ibrahim, his family, and the health professionals charged with his care. Considering how infrequently we hear from people with mental health diseases this choice both makes sense artistically and deepens the listener's understanding of the issue. It's the characters' vivid, moving accounts that carry this story and Starecheski handles them well, using music to mirror the characters' feeling state, yet letting their words stand alone during the most affecting descriptions, so the listener is not coaxed into a particular emotional response. The emotional world she constructs is so effective and engrossing that when Ibrahim's schizophrenic voices began whispering in my left ear bud, I turned to look over my shoulder so suddenly that I startled my dog from his seat, he and I both briefly terrified that someone had found their way into my office.

Even more impressive is how Starecheski handles the portrayal of the two sides in this power struggle. She clearly takes the stance, in her roles as narrator and character, that Ibrahim deserves his freedom. Yet she also provides such rich portraits of the hospital officials who refuse to release him, that the listener is as convinced of the staff's competence as they are of Ibrahim's right to leave the hospital. She spends significant time, for example, illustrating that the doctor arguing for Ibrahim's continued confinement is exceptionally thorough and ethical in her work. And she also admits that the competing diagnoses she reads make Starecheski doubt her own assessment of him. When the matter finally comes to court, the judge rejects the Creedmoor diagnosis and upholds Ibrahim's conditional release. I nevertheless found myself wondering *which* official interpretation was the correct one.

Besides examining Ibrahim's personal story, *Hospital* raised other equally important issues. One is the distinction between victim and perpetrator, which is deeply inscribed in our legal system. The standard practice in the US is to criminalise and punish individuals whose behavior is rooted in a form of victimisation, addiction, or mental illness. Consider, for example, our tendency to treat prostitutes as criminals, despite clear evidence that many, especially youth, are victims of sexual abuse. As we watch Ibrahim respond to his mental illness we clearly see that he needs healing much more than he needs

punishment; and that *we* as a society, are better served by his healing. We also see, as he struggles to gain his freedom, how mental health institutions whose job is to facilitate that healing, can sometimes re-victimise and confine their patients just as thoroughly as jails do. Especially when those patients lack money, family support, or connections.

One element that is missing from this story is an account of how race complicates this unequal power dynamic. Ibrahim is black (Ibrahim 2013), which the story does not mention, and it is impossible not to wonder how much his race affected the Creedmoor staff's interpretation of his behavior. Starecheski's even-handed portrayal shows that he is charming, flirtatious, and confrontational - a personality that seems not unlike what one might expect from any artist. But this is also a personality that might bias any white hospital officials who hold unconscious stereotypes about black men as aggressive and hypersexual. The brief snippets we hear of Creedmoor staff members' diagnoses (of his 'fantasies of success' and his 'desire to be extraordinary') are disturbingly reminiscent of the complaint, common among both Jim Crow and contemporary racists, that blacks do not stay in their 'place'. And Ibrahim himself attempts to counter these interpretations by cutting his dreadlocks and adopting a 'clean-cut' look (on his body, and in his art) that is most often associated with whiteness. The issue of race bubbles just beneath the surface in these moments of the piece, so it is strange and unsatisfying how thoroughly it is erased. Harvard University's Nieman Storyboard named *Hospital* as one of the Best Audio Narratives of 2013, a fact that attests to its quality and impact. (Nieman Storyboard 2014) Yet, at a time when stories of Zimmerman-like shootings of young black boys are becoming a routine part of national news, Hospital's impact might have been even wider had it briefly considered how the assumption of black male criminality might have played a role in Ibrahim's long confinement.

The Hospital Always Wins nevertheless raises crucial questions about our definitions of mental health and healing as well as the meaning of forgiveness. It also illustrates how an individual's ability to extract themselves from the grip of institutional power is highly dependent on luck and money and privilege. Perhaps most importantly, this piece gives voice, in a complex, respectful manner, to Ibrahim and other schizophrenics whose struggles remain buried and ignored.

#### **References:**

Starecheski, L 2014, podcast with Rob Rosenthal, *The Hospital Always Wins*, retrieved 21 February 2014 at <a href="http://howsound.org/2014/01/the-hospital-always-wins/">http://howsound.org/2014/01/the-hospital-always-wins/</a>.

Ibrahim, I 2014, *Issa Ibrahim, About*, retrieved 21 February 2014 from http://issaibrahim.com/blog/about/

Nieman Storyboard 2014, *Best of Narrative 2013*, retrieved 21 February 2014 from <a href="http://www.niemanstoryboard.org/2013/12/30/best-of-narrative-2013/">http://www.niemanstoryboard.org/2013/12/30/best-of-narrative-2013/</a>

## Podcast available here on State of the Re: Union website

MICHELLE BOYD is an award-winning writer, ethnographer, and independent audio producer. Her work explores how ethnographic research methods, creative nonfiction writing, and audio documentary can be combined to deepen public understanding, empathy, and critical consciousness about racial injustice. A faculty member at the University of Illinois, Chicago (UIC), Michelle teaches in the African American Studies Department and is the Associate Director for Programs at UIC's Institute for Research on Race & Public Policy.

