



IN THEIR OWN VOICES

María - María del Carmen - Flor - Luna - Meñeca - Ana - Beatriz Y. Inés -
Susana Beatriz - Angie - Renata S - Helen - Irene - Mabel - Beatriz - Silvia -
Gabriela - Mary - Patricia - Nancy - Marta Esther

Sara Ardila-Gómez

IN THEIR OWN VOICES

Life stories of women who had prolonged psychiatric
hospitalizations and now live in the community

Sara Ardila-Gómez

-2025-

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In their own voices / Sara Ardila Gómez. - 1a ed. - Ciudad Autónoma de Buenos Aires: Sara Elena Ardila Gómez, 2025.

Libro digital, PDF

Archivo Digital: descarga

ISBN 978-631-01-2899-3

1. Atención a la Salud Mental . 2. Psiquiatría Comunitaria. 3. Relatos Personales. I.
Título.

CDD 150

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Acknowledgments: The English version of the book was reviewed by Martín Agrest, Madeline Chang, Sarah Ichinose, Elijah Lim Leh Rameker, Irene Woo and Kylan Yang.

Funding: The research leading to this book was supported by National Council for Scientific and Technical Research Council of Argentina (CONICET) through a postdoctoral fellowship. Publication-related costs were funded by the University of Buenos Aires through UBACyT projects based at the School Psychology (20020130100543BA and 20020220400014BA).

Any opinions, comments or conclusions expressed in this volume are solely those of the author and do not necessarily reflect the views of the aforementioned institutions, which bear no responsibility in this regard.

This book is dedicated to my past, present and future students.

*The hope that you might glimpse, through different perspectives, what
community life can be after long-term psychiatric hospitalization has been
the light guiding this work.*

*“What speaks to the soul, escapes our measurements.”
Alexander von Humboldt*

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OPENING HOLES IN OUR MENTAL WALLS

7

Margarita and Eugenia are two friends who have lived together for 12 years in Lomas de Zamora, in the southern outskirts of greater Buenos Aires, Argentina. Their days are spent doing housework, shopping, watching afternoon soap operas on tv, and going to the occasional medical check-up. Margarita enjoys attending mass because she is a believer, while Eugenia likes to knit. Margarita has a daughter with whom she occasionally calls and visits for the holidays, spending time with her, her son-in-law, and her grandchildren. Eugenia's only family consists of three cousins, but she doesn't have much contact with them. Their lives unfold like those of many other middle-aged women—neither extraordinary nor exceptional. Yet, being able to live such a simple, ordinary life is something that has long been denied to people like Margarita and Eugenia.

This denial happened—and continues to happen—because of the belief that those suffering from mental disorders should be confined to psychiatric institutions for extended periods, if not for life. The justifications for the confinement of people with mental disorders include claims that the “incurable” need to be shielded from their suffering, that they are unable to care for themselves without institutionalization, and that they pose potential dangers to society. These ideas, embedded in legal norms, scientific theories, and everyday beliefs, have led to the institutionalization of people like Margarita and Eugenia in psychiatric hospitals for more than a century.

During their confinement, these individuals often lose their family, friends, work, and other forms of connection to community. The reasons for this disintegration vary but are often linked to episodes of illness that alienates both the patient and those outside the hospital. Additionally, psychiatric hospitals are not always easily accessible, making it hard for families to visit. The distress of seeing a loved one institutionalized, combined with the overwhelming burden of caring for someone labeled as “mentally ill,” often leads to patients remaining hospitalized long after they have recovered from the acute episode that initially led to their internment. Months turn into years, and years into decades. For some, the hospital becomes their permanent home.

According to sociologist Erving Goffman (1961), prolonged institutionalization strips individuals of their rights. They lose the ability to make decisions ranging from the most basic—such as when to get up in the morning—to more complex ones, such as maintaining personal privacy, owning possessions, caring for their children, being informed of a parent's death, saying a final goodbye, managing their finances, getting married, or voting.

The longer someone stays in the hospital, the more unfamiliar and alien the outside world becomes. Leaving the institution can feel like visiting a foreign country—the bus fare system has changed, the familiar café is gone, young people dress differently.

Newly discharged have lost touch with everyday life, the shared experiences that make us feel part of a place or community (Schutz, 1974). Unlike a foreigner, who recognizes the strangeness of a new place, for someone who has been hospitalized for a long time, the familiar has become strange. Over time, long-term institutionalization leaves deep marks on their personalities, blurring the line between what is caused by their original condition and what is a result of their life in the hospital. As a result, traits that are actually a consequence of confinement are often mistakenly attributed to their mental illness.

But this book isn't about psychiatric hospitals. I see these institutions as black holes that consume energy—taking away time, resources, work, and people's lives. This is why I argue that traditional psychiatric hospitals should no longer exist, though I acknowledge that, under specific circumstances and with clear limits, hospitalization can be a valid and necessary therapeutic tool. This book is about what can escape that black hole. It is about those like Margarita and Eugenia, who made it out of the hospital thanks to their own resilience and the support of others, challenging the fate of lifelong institutionalization.

PRIVILEGING ONE'S VOICE

This book tells the stories of 21 women, like Margarita and Eugenia, who, after enduring one or more extended psychiatric hospitalizations, now live within their communities. For several decades, many people living in psychiatric hospitals have transitioned into the community as part of what is known as “psychiatric reform.” However, detailed accounts of what happened to those who were “deinstitutionalized”—those who moved from the psychiatric hospital back into the community—are relatively scarce. The few studies that exist (Estroff, 1981; Barham and Hayward, 1995) were conducted mainly in contexts other than Argentina and, more broadly, outside of Latin America. Not only do these studies come from different communities and societies, but the processes and struggles that enabled the transformation of psychiatric care—an ongoing transformation in many parts of the world, including Argentina—were also different. More importantly, these studies often rely on the “expert knowledge” of researchers or professionals, where the voices of those who lived through the experience, while fundamental, are relegated to the background¹.

¹ Another type of medium, such as film, brings us closer to the lived experiences of the protagonists themselves. A notable example is the Norwegian film *Elling*, which depicts the lives of two men who, after leaving a psychiatric hospital, move in together with the support of the country's social welfare system. In Argentina there are also documentaries on transitions to community living, such as *Dejar Romero* (2004).

This book, on the other hand, aims to give center stage to the voices of the people to whom these stories belong. It does not analyze or interpret their words but allows the Margaritas and Eugenias to speak for themselves. While listening to what they have to say may seem simple, it requires a great effort to set aside the interpretive frameworks that mental health professionals and academics often use when listening to and observing those diagnosed with some form of psychopathology (Andersen, 1994).

It is important to explain why I chose to privilege the narrators' voices, allowing for a first-person account. This decision was not accidental; it arises from both a theoretical and, more importantly, an ethical standpoint. My work lies in research, and what I study is the transformation of psychiatric care. Through this work, I have become increasingly drawn to the perspectives of those who use mental health services—the very people psychiatric reform is meant to serve. I want to understand how they experience the care they receive, what helps them, what does not, and how they relate to those responsible for their care. These questions are being asked with increasing frequency by a growing community of people—users, health workers, and academics alike—and are considered crucial to improving health systems and services by refocusing them on their core purpose: the people they serve. However, in mental health care, this development has been slower because the opinions of people with psychiatric diagnoses are often dismissed or viewed as questionable. A quick look at the press or television reveals how someone's opinion or behavior is often disqualified by labeling them “mentally ill” (Ardila, 2011).

More than 10 years ago, driven by these questions, I approached a program dedicated to helping people transition from psychiatric hospitalization to life in the community. This program, the Assisted Rehabilitation and Externalization Program (PREA), is linked to the “José A. Esteves” Women's Psychiatric Hospital, a public hospital in the southern region of Greater Buenos Aires. For over twenty years, PREA has helped more than 100 women reintegrate into the community. The program supports individuals in relearning essential skills for independent living, assists in finding sources of income, and provides continued support after discharge. This includes outpatient psychiatric or psychological treatment, home visits, and help with everyday tasks, all with the goal of expanding each person's autonomy. As of October 2018, the program was supporting 71 women: 62 in group homes and 9 living with a partner, family, or alone.

From my initial encounter with PREA, I wanted to know how the program's users felt about it and how they experienced the support provided. I understood that gaining profound insights, as in any relationship, would take time. I conducted questionnaires, focus groups, and observations. Then, after several years, one of the women in the program approached me and offered to do an interview. Looking back on that moment, I realize it's what every researcher dreams of—when the people in the context being

studied seek out the researcher. She was someone I never would have expected to take an interest in what I was doing. At that point, I felt it was time to invite the women in the program to share how it had affected their lives—to recount what life was like before and after leaving the psychiatric hospital. This would allow me to “assess” the program’s impact, as the evaluation of mental health services is one of my areas of research.

I shared this experience with Dr. María Rosa Riva Roure, a psychiatrist working at PREA. At the time, she was involved in some of my research activities, and I learned that she, too, had wanted to document the lives of the women in the program. She had already written a few stories but had been unable to continue due to her many commitments. Excited by the idea, she began helping me in various ways—sharing the stories she had written, helping me identify potential narrators, acting as a bridge to women I hadn’t yet met, and reviewing the stories I wrote. When the book was nearing completion, she and Carmen Cáceres helped with the final review and organization of the material. Other program staff also supported me—granting permission to carry out the work, introducing me to participants, facilitating my visits to the program’s facilities, explaining how to reach some of the women’s homes, and even accompanying me to interviews when support was needed. None of this, nor much of my previous work, would have been possible without the help of the people at PREA.

Another important influence on this work came from Dorys Rodríguez, a woman who left the hospital with PREA’s help and whom I met during my research in 2012. While still hospitalized, Dorys interviewed her fellow patients and published a book of “life testimonies” (Rodríguez, 2008). When we met, she told me she was writing a second book about the lives of her peers after they left the hospital. Dorys was doing what I had dreamed of doing. I hoped we might collaborate one day, but sadly, she passed away before she could publish her second book.

Néstor Costa, a writer who worked with PREA and had supported Dorys and others in their literary projects, took charge of her legacy and saw the second book through to publication. However, Néstor passed away soon after. Although the book was printed, it was never widely distributed. Thanks to a colleague of his, I was able to obtain a copy. Reading it convinced me that creating yet another book was worthwhile—no single book can replace another. Each tells its own stories and offers new perspectives.

Stories like Dorys’s—first-person narratives on mental illness, treatment, and recovery—have existed for over a century. However, they have not received the same acceptance or recognition as the accounts provided by “experts” on these subjects. Even today, mental health professionals are almost exclusively trained through narratives and explanations about patients, often ignoring or sidelining those made by

the patients themselves—unless these stories align with or support what professionals are saying, serving as illustrations or clinical examples.

It may be time to give greater recognition to these first-person narratives if we truly wish to shift from categories like “sick” or “crazy” to those of “suffering” or “mental distress” as more than just a change in terminology. Some steps are being taken in Argentina in this regard. For example, a group of people who identify as survivors of the asylum system recently published a book in which they tell their life stories and share their views on health, confinement, and inclusion, all framed by the National Mental Health Law (Bogojevich et al., 2015). There is also a collection of stories about women who passed through a halfway house (Casa de Medio Camino Córdoba, 2012). Surely, many more such stories exist, and it is the task of researchers to help bring them to light and give them greater visibility. The challenge, of course, is to support without replacing their voices, or using others’ voices to say what we want to be said.

It’s evident that the stories presented here, while deeply personal, are inevitably shaped by my own involvement in their production. There are undoubtedly others who know these women far better than I do, and perhaps those individuals might have drawn even richer narratives from the interviews. Yet, I believe that my position as a “reliable” but not overly familiar figure, someone outside the program’s staff, gave the women a certain freedom. As one of them once introduced me, I was simply “someone who writes about our lives.” My role was not that of an archaeologist searching for an objective “truth” but rather an archaeologist of experience, capturing the essence of how these women chose to narrate their lives. After all, as Gabriel García Márquez once wrote, “Life is not what one lived, but what one remembers and how one remembers it in order to tell it.”

This role as a “life writer” required me to follow what these women wanted to tell, rather than what I hoped they would say. Interestingly, although the program appeared in their narratives, they did not talk about it as much as I had anticipated. At one point, this led me to question whether the project was even aligned with my research objectives. After all, these stories were mostly written during research I conducted under a postdoctoral fellowship with the National Scientific and Technical Research Council (CONICET), and I needed to link them to my study of the program. If the women were not talking about the program—which was central to my research—it seemed to pose a “problem.”

However, in a conversation with Professor Alicia Stolkiner, my postdoctoral advisor, she encouraged me to continue and helped me understand something crucial: the fact that the women made few references to the program was actually a positive sign. It indicated that the program had not become the center of their lives. In a program where

users depend on it for fundamental needs—housing, financial subsidies—it would be natural to expect that this dependence would feature prominently in their stories. Yet, what I observed was that while the program was mentioned, their lives didn't revolve around it. This could be viewed as one of the program's greatest successes: it created the conditions for people to live their lives as fully as possible without the program overshadowing them. The program was a constant presence, but not the protagonist. This realization allowed me to move forward.

As a result, the stories in this book may diverge from what readers expect. They are not centered on “illness” or treatment, nor, as I initially intended, on the relationship between the program and the possibilities of community living after long-term psychiatric hospitalization. This sets the book apart from other first-person accounts, which often focus on illness, distancing from it, criticizing it, or overcoming it. Yes, these are stories of women who lived for years in a psychiatric hospital before returning to the community, but their stories are not necessarily about that. Instead, they took the paths each storyteller wanted to follow.

I'm unsure what impact recounting their lives and seeing these stories in print had on the women themselves. I like to believe that, as for most people, telling their stories was a way of making sense of their experiences (Bourdieu, 1997). Some women reminded me that I owed them a copy of their story when they saw me, which suggests they were interested in having it. I know from program workers that one of the women occasionally sat down to reread her story. Another told me that having her story was very useful—she made copies and always carried one in her wallet to show people when she needed to introduce herself. I hope that, for these women, their stories served as a mirror, helping them see themselves through their own eyes.

THE WORK PROCESS

For creating the stories, I followed a specific methodology. I reached out to each individual and explained that I was compiling a book about women who had left psychiatric hospitals, with a focus on their current lives and how the program had supported them in transitioning to life outside the institution. Some people declined to participate. Some mentioned that recalling their past was too painful, others shared that they intended to write their own stories or books, and some simply chose not to take part. For those who agreed, we arranged a time and place to meet. Although there were sometimes last-minute changes or cancellations, we were eventually able to hold each meeting.

The locations were varied, depending on their preferences: some met in their homes, others in a café, or at the “Librementé” Community Center where certain program activities are held. While most of the women preferred individual interviews, a few were narrated jointly: one between two friends who had lived together for many years, and another between a woman and her husband.

At the first meeting, I explained the purpose of the interview once more, and let them know they could choose to be identified by their real name or a pseudonym. Their choices varied. I also clarified that I would record our conversation and later transcribe it for us to review together. They all allowed me to record, but in some cases, I opted to write notes instead, as the recording quality made it challenging to understand their words. In one case, despite my notes, I was unable to reconstruct the story accurately. After each meeting, I transcribed the recording, and during our next session, we read through the transcript together and continued from there. I also asked additional questions to explore and expand on what they had shared previously. Sometimes, they preferred to remove certain details from their stories, choosing to keep those moments “between us.”

Once I had gathered enough material, I shaped the stories, trying to intervene as little as possible, though it’s important to note that what is presented here reflects how these individuals chose to share their experiences with me, knowing others would read them. In other words, they decided what to reveal, what to withhold, and how to tell their stories. Their storytelling style was preserved as they told it, which at times may feel challenging to read, as it reflects spoken language more than written, in order to prioritize their authentic voices.

I removed my questions and comments from the text; these were often personal reflections prompted by their stories—such as “My grandmother also played the piano” or “I also know the pain of losing someone and being unable to be there”—or casual questions they asked about my life, like “Why don’t you paint your nails?” or “Do you have a boyfriend?” I gave each participant a copy of the final version, and after some time, I met with them again to ask if they wanted to add anything to their story; in some cases, this resulted in a two-part narrative.

For the organization of the text, I consulted academic sources, literature, and journalism. Academic references included works in social phenomenology, such as Alfred Schutz’s studies (1973, 1974) on everyday life and common-sense knowledge, Peter Berger and Thomas Luckmann’s (1968) exploration of the social construction of reality, and Erving Goffman’s (1961) analysis of the moral career of the mental patient. Arthur Kleinman’s ideas (1988) on the contrast between patients’ narratives and those of “healers” about illness also offered valuable insights. Broadly, I referenced the narrative

approach, with Jerome Bruner's distinction between narrative and logical-scientific thinking (Bruner, 1986) as a key concept. Finally, I was guided by Benedetto Saraceno's (1995) perspectives on the "real lives" of health and mental health services, and Gastão Wagner de Sousa Campos's (2009) work on health management, particularly around extending autonomy as the goal of health work.

The nature of this project also led me to seek literary influences, especially narratives about women. I felt that I wasn't just documenting stories of individuals who had moved from hospital to community life, but specifically women who had made that transition. Stories by Angeles Mastretta (1992) were particularly influential in capturing the complexity of a phenomenon without reducing it to stereotypes. I was also deeply affected by Svetlana Alexievich's (2015) book on the women of the Red Army during World War II, for its capacity to portray the female experience in a world often seen as exclusively male. I hope readers can trace the gendered nuances in these stories and see how their lives were shaped by being women.

THE BOOK'S ORGANIZATION

The stories are grouped into five sections, each representing a predominant theme: friendship, work, love and heartbreak, motherhood, and curiosity, or epistemophilia. Although these dimensions overlap in each story, I focused on the most prominent theme in each. A description of PREA precedes the stories, and the book concludes with a reflection from program workers on the impact of reading the stories of those they support in community life.

One unique element in the book's creation is the presence of dolls embossed on the cover and featured at the beginning of certain stories. This concept was designed by Fabiana Fiscina, a program worker and artist. Inspired by the book's title, Fabiana created silhouettes of cloth dolls and organized a workshop for the women who shared their stories. The idea was to build a representation, from each silhouette, of what each woman had regained through living in the community once more. Each doll thus serves as an additional presentation and expression of each woman featured in the book.

BUILDING MENTAL HEALTH

Argentina still has a long way to go for more people to live like Margarita and Eugenia. For this to happen, we all need to believe that community life for those experiencing “mental disorders” is not only possible but essential—for “them” and for “us”. Social inclusion strengthens society. Pluralistic societies that embrace differences enrich and empower both communities and individuals. Exclusion, on the other hand, impoverishes everyone. It dehumanizes both the excluded and those who exclude. As some social psychologists, like Martín-Baró (2000), have pointed out, humanizing social bonds is a key aspect of a group or society’s mental health. In that sense, I hope this book contributes to that vision.

Witnessing and helping to share life stories has been one of the most rewarding tasks of my career. It has helped me understand that the dividing line between “them” and “us”—in this and other realms of existence—is not as clear-cut as we might believe. It has also given me a new perspective on the suffering associated with “mental disorders,” often exacerbated by societal attitudes. And it has allowed me to see the best in people: hope, friendship, gratitude.

When the community life of people like Margarita and Eugenia becomes the rule in Argentina rather than the exception, a book like this may no longer feel necessary. Today, however, I believe it is. This book, along with many others of its kind, serves an essential purpose, helping, in the words of writer Elif Shafak, to “open holes in our mental walls.”

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ACCOMPANYING COMMUNITY LIFE

XX

The Assisted Discharged and Rehabilitation Program (PREA, Programa de Rehabilitación y Externación Asistida), under the Ministry of Health of the Province of Buenos Aires, has been operating since 1999. Its main objective is to promote sustainable discharge and social inclusion for individuals who, despite being medically cleared, remain hospitalized in psychiatric facilities due to a lack of financial resources or family support (Cáceres, Druetta, Hartfiel, Riva 2009). Sustainable discharge refers to the ability of individuals to live permanently in the community, with hospitalizations limited to short periods during crisis situations that cannot be managed on an outpatient basis.

It is important to note that the PREA was originally guided by the 1990 Caracas Declaration, in which Latin American and Caribbean countries committed to transforming psychiatric care in the region. Over time, the legal framework supporting the PREA's work has expanded: in 2006, the United Nations adopted the Convention on the Rights of Persons with Disabilities, and in 2010, Argentina passed the National Mental Health Law 26,657, with the Province of Buenos Aires following suit in 2013 through Law 14,580.

The PREA was designed to be implemented in all psychiatric hospitals in the Province of Buenos Aires. Here, we specifically describe its development at the “José A. Esteves” Hospital, a women’s psychiatric hospital located in Temperley, in the southern part of Greater Buenos Aires. The stories presented in this book, as mentioned, are from people who were discharged from this hospital through the PREA.

The PREA team consists of twenty-nine staff members², including nurses, social workers, psychiatrists, administrative and cleaning staff, sociologists, community companions, psychologists, social psychologists, teachers, and occupational therapists³. Hospital staff, such as those involved in house maintenance, also provide support. The program is organized into four main areas: in-hospital (preparation for outpatient treatment), out-of-hospital (community accompaniment), the “Libremente” Community Center, and the training area. These areas are interconnected, not only in terms of shared personnel—many staff members work across multiple areas—but also through the activities in which program users participate.

² The data presented are from 2019, when the book was originally published. Updated figures are provided in the Epilogue.

³ This figure does not account for the residents who rotate through the program, nor does it consider the fact that work hours vary significantly among team members, with some being funded by different sources.

In the in-hospital area, professionals work with hospitalized women to prepare them for discharge. The primary requirement for entering the program is the desire to leave the hospital, a wish that is often unclear at first, as it may be mixed with fear, uncertainty, or hopes of leaving by other means, such as living with a relative. In-hospital activities focus on relearning skills necessary for living in the community that may have been forgotten or underused during hospitalization, such as taking the bus, going to the bank, shopping, or cooking. The program also includes visits to shared living houses to help patients become familiar with community life, and occasionally, visits to the “Libremente” Community Center, which is open to inpatients preparing for discharge and allows them to take part in various activities. During this preparation process, the program also assists users in obtaining or recovering financial resources—such as pensions, retirement benefits, or personal assets—to ensure they can live with dignity in the community.

In the out-of-hospital area, the team is responsible for supporting each person once they are discharged from the hospital. Initially, this includes providing them with a home to share with other program participants. The program also facilitates coexistence among the residents, helping them organize tasks such as cleaning the house and resolve conflicts that may arise from communal living, for example, disagreements over the television volume late at night. These issues are usually addressed in what is called the “Co-living Assembly.”

It should be noted that when a user moves into a shared house, a discharge agreement is signed between them and the program, setting out the responsibilities of both parties.

The program also offers community support for various activities, tailored to the needs of each person. The aim is to encourage individuals to carry out these activities independently while fostering peer support. However, the program team is always available to provide assistance if needed. Examples of such activities include handling banking matters or attending medical check-ups. Additionally, the program promotes social inclusion by encouraging participation in work, educational, and cultural activities. The overarching goal is to broaden the users’ autonomy, enabling them to take charge of their own lives to the best of their abilities. Psychiatric and psychological care is also provided, both individually and in group settings.

The Libremente Community Center was conceived as a space for health promotion, offering a wide range of cultural and educational activities open to the entire community, including program users. As a result, the center’s workshops are attended by those in the in-hospital area, outpatients of the program, and other community members interested in the activities offered. The physical location of the community center serves as a hub for both typical out-of-hospital activities—such as medication

appointments or Co-living Assemblies—and cultural or educational workshops, such as yoga or arts and crafts. This shared space fosters interaction and exchange between program users and non-users alike.

The Training Area aims to support the other areas by identifying and reflecting on any challenges that arise, with the goal of transforming the work accordingly. Over the 20 years of the program, work practices have evolved in response to the issues and demands that emerged. For instance, the aging of many program participants has required greater support in navigating health services, while difficulties in securing rental housing at certain times have prompted changes in housing-related strategies. Furthermore, fluctuations in job placement programs due to the country's economic conditions have led to a strengthening of certain aspects of the program to ensure users' access to financial resources.

Finally, it is important to recognize that the PREA, like any health program, not only impacts the lives of its users but also affects the lives of its workers. It has provided workers with the opportunity to develop and learn new ways of working, often far removed from the typical hospital environment.

In this way, the PREA has served as a strategy to facilitate the reintegration of individuals long hospitalized in psychiatric institutions into the community. At the same time, it has contributed to transforming mental health care practices and influencing the training of new workers within the framework of community mental health.

DO YOU KNOW WHAT IT'S LIKE TO HAVE A CHILD?

21

MARÍA

-47 years old-

Interviewed in March 2015



My name is Maria. I grew up in the countryside in Entre Ríos, and I've been living in Temperley for twenty-eight years. I was hospitalized at Esteves Hospital, and I've been discharged for eleven years now. They gave me a lot of medication, and I'm really happy to be outside because I feel much better. I go for early morning walks with a housemate and I'm so happy now because I can vote. I've always wanted to vote, and now, in October, I'm going to. Voting is a source of pride for Argentines. To vote, you have to be well, you have to be clear-minded, and you need to be among people. I want to vote always--until the day I die. I feel like a normal person now: I vote, I go for walks, I go to the bank to collect my money.

I'm very happy with my housemates. There are five of us: Sonia, Natalia, Beatriz, Mariela, and I'm María. We get along very well. Mariela and I have been living together for eleven years. Beatriz has been with us for three years, Natalia for four, and Sonia, whom we call "La Nona"⁴, for nine years. I've always been in this house, and I've never been moved. Everyone in the neighborhood knows and loves me because I'm very sociable and affectionate.

⁴ Nickname for grandmother.

Where I was born in Entre Ríos, there were shacks. We were very poor, but we managed. I was an only child. I never met my father or my mother, because my grandmother said they died. My grandmother raised me, but I never called her “grandma”; I called her “mom.” I worked and gave her all the money, but she’d always say, “Keep a few pesos for yourself so you can go dancing.” She passed away while I was in Esteves. I found out because the psychologist called Entre Ríos to ask about her, and they told her, “No, that woman died two years ago.”

I took it well because she was so good to me. My childhood was sad, but I made the best of it. I had a really wonderful grandmother.

I went to school but only until fourth grade because my grandmother told me, “You either work or you study.” I chose to work so I could earn money. I started working when I was eleven, as babysitter, cleaning houses, and things like that. Later, when I was hospitalized, I finished elementary school. I had a doctor’s permission, and that’s where I met Beatricita, who lived near the hospital. Beatricita is now my housemate, but we met in school. We’ve been friends since our schoolgirl days. The school where I finished elementary school was a block and a half from Esteves. Now, I’m about to start high school—I just hope my brain can handle it. I once started studying to become a nurse at Gandulfo Hospital but dropped out.

I’ve had several jobs. The first ones were in Entre Ríos, looking after an elderly lady and taking care of three kids. They were good. Then I worked for another lady, then at another house. I was very young back then, just a teenager. Later, I worked in Buenos Aires, looking after a baby boy from when he was three months old until he turned one. Then I went back to Entre Ríos, took a little break, and later found another job through the newspaper. That’s how I got a job in San Nicolás city.

In my town, there was a newspaper where they posted job ads. I saw one saying here was a job on a street in my town, and that lady took me to San Nicolás. She was a very kind person. She had three children, aged five, six, and ten. I would bathe the youngest girl and get her dressed. I love children and have always worked with them. The woman I worked for was very good to me. Honestly, I can’t complain about any of my employers, past or present. My employer in San Nicolás liked how I cleaned everything. And the little girl used to say, “You didn’t put bleach in the bathtub.” She loved the smell of bleach! If I didn’t use it, she’d say, “You didn’t clean the bathroom,” and I’d tell her, “Sweetie, I’m saving that for last.”

I was earning good money, I was able to buy things, and now I’m here in Buenos Aires

working by the hour in family homes. I clean three houses. I do a good job—no one has complained about how I clean yet. I found my jobs through word of mouth. The first job I got was with the woman who lived across the street from us. One day, as I was entering her house, I asked her, “Ma’am, do you need someone to clean your house?” She said, “I’ll think about it,” and the next day she asked, “Would you be willing to work in my house?” I told her, “Sure, if you need me.” I even told her, “I’m from Esteves Hospital.” She said, “It doesn’t matter.” She took me on for two days at first, then one day, then two days again, and eventually, she kept me on for good. I clean everything—the bathroom, kitchen, bedrooms, the patio, and the sidewalk. My other jobs came through referrals, like from the daughter of another lady I worked for.

I also have a boyfriend. On August 6th, we will have been together for 11 years. I might go to his house to spend this weekend with him and his mom. He comes to my house, I go to his house, and I chat with his mother—she’s a sweetheart. I met him when I was working in the Esteves garden because back then Esteves had a garden, and we used to get paid 150 pesos for working there. That was a decent amount of money at the time, but now it’s nothing. He worked there too, and we became friends in just three months. We’d chat, drink mate together⁵, and then one day in 2004, I went to his house, and he asked if I wanted to be his girlfriend. I said yes, and that’s how we started.

I had other boyfriends before. I also have a daughter who has been adopted. She’s with a good family, and I can talk to her adoptive mother. I’d like to meet her one day, but I’m really afraid to. I don’t know why. Yesterday, I told the doctor that I was scared to meet her, and she told me not to be, that it would be a good thing. My daughter is twenty-six years old now, and I’m forty-six. She was born while I was hospitalized at Esteves, which is why she was given up for adoption.

In San Nicolás, I had a boyfriend, but I got into trouble and ended up being brought to Esteves. I was hanging out with people I shouldn’t have been—they were doing drugs—and the police found me and brought me to the hospital. But I wasn’t handcuffed or anything like that. I was very young, and I was one month pregnant when I was admitted to Esteves.

What happened was that the mother of my boyfriend threatened me at a dance recital by Marcelo Agüero and Darío. We were all there—my friends and my boyfriend with whom I was already having issues. His mother grabbed me and said, “I’ll see you outside.” I replied, “Oh, okay.” After the dance, I left with my friends, and she yelled at

⁵ *Drinking mate is a key part of social life in Argentina. Sharing it fosters connection, conversation and sense of community.*

me. When I was a kid, I had a bit of a temper too. We turned a corner, and the woman came at me. I was tipsy; I like beer, although I don't drink anymore. The doctor advised me to stick to non-alcoholic beer, but I prefer not to drink anything at all because I enjoy the alcoholic kind. So there we were, both of us a little drunk. At that time, I wasn't fat, but I wasn't skinny either—just normal. In the heat of the moment, I grabbed her and threw her to the ground. People shouted, “María, María, leave that lady alone! You're going to kill her; you'll end up in jail!” Around twenty police officers showed up, but even they couldn't pull me away from her. Can you imagine the scene? It was complete chaos. Afterward, they took me to the police station. The treatment treated me well—they were kind, and I actually knew some of them. Then I was transferred to the general hospital, where I stayed for another three days. I was put in a room alone with a police guard—I couldn't go anywhere. Then the doctor came in and said, “María, we're taking you to a place where you'll be calm. You'll have everything: television, hot water for a shower—it's like a rehabilitation center.” I believed them; I had confidence in them. They took me to Esteves Hospital.

When I arrived, they put me on medication. I had never taken pills before in my life. They gave me pills of all colors—light blue, yellow, white, gray—just a rainbow of medications. I had to take ten in the morning, eight in the afternoon, and twelve at night. A pile of pills! Now that I'm out, Dr. María Rosa [*]⁶ reduced my medication. I take two full pills in the morning, one at night, and a quarter of one at night. I went from taking all those pills to just a couple.

When I first arrived at the hospital, they gave me very little medication—two in the morning, one in the afternoon, and three at night. I was admitted for three days and then moved to room five. When I was admitted, there was a lady I'll never forget who told me, “I'm going to come back and take you out of the hospital.” But they moved me to room five, and maybe she came back looking for me but couldn't find me.

I had very good nurses and doctors; they were all really kind. Honestly, I met many wonderful people. I stayed in the hospital for eighteen years, from age nineteen to thirty-five, when I finally got out thanks to PREA. I spent all those years in the hospital because I don't have family.

Once, in the hospital, a caba⁷ bought a big television for all the girls, not just for me. I had never known a television before. She told me, “We bought you a television, but you'll have to figure it out.” I replied, “But I don't understand how to use these

⁶ It is indicated with [*] when the interviewee refers to people who worked or work in the PREA.

⁷ Caba is the term used to appoint the head nurse of an inpatient ward.

devices!” At the hospital, I learned about television, showers, and everything. I didn’t feel the urge to escape or climb over the walls. But in room five, they gave me a lot of medication, and I was drooling all over. There was a nurse who, every day, would give me an injection with a syringe of white liquid, and I’d fall asleep.

However, while there were good people, there were also some who weren’t so great. Some really took care of me during the years I was there, but others mistreated me. They would cover me with a towel or sheet, dunk my head in a bucket of water, and wouldn’t let me up until I asked for forgiveness. It was terrible. That place isn’t for just anyone.

In the hospital, when I was pregnant, they took away all my medications except for one for high blood pressure. My daughter was born at Evita Hospital in Lanús. I had a difficult time; there was a lot of bleeding and other complications. She was with me for three days at Evita before they put her in an incubator because she was very small. Then they transferred me to Esteves Hospital, where I stayed because I had no family. If I had had family, my daughter would have lived with them and not in the hospital. But I’m happy because my daughter is hardworking and studious, which is the most important thing in life.

When they took my daughter from me at Evita Hospital, I was devastated. I was about to breastfeed her when they told me, “Oh no, the baby is in the incubator.” So, I went to see her, and they made me wear a cap to enter the nursery. When I got there, they told me, “You’ll be discharged tomorrow.” I thought, “Tomorrow, I’ll see her again.” But then they told me, “The baby is gone.” I created a scene; I was so distraught that I nearly harmed a nurse. “My daughter, where is my daughter?” I cried, tears streaming down my face. Do you know how heartbreaking it is to be told you have to leave your child behind? It’s incredibly sad. A kind nurse from Esteves came over and said, “Calm down, calm down,” and took me to Esteves. I asked, “What about my daughter?” She reassured me, “Don’t worry.” I was still crying. A child is a child; do you know what it means to have a child?

For all those years, I didn’t know anything about my baby until Analía[*] found her two years ago. I let her take the lead in reaching out because I want to meet her. I know her from photos, and she looks just like me—my clone. I’ve spoken with the woman who raised her, and she tells me my daughter is very pretty, hardworking, has many friends, gets along well with everyone, and studies a lot. She studied to be a teacher. A typical day in my life is pretty normal, just like it used to be. I get up, bathe, change, brush my teeth, wash my clothes, work, and go to Libre to get medication or talk to the doctor. Sometimes, I visit the psychologist. I also need to see the gynecologist and get a mammogram—all those things that women do.

I spent about two or three months at PREA, with them urging me to leave. Dr. Sttopini told me, “Before I retire, I want María out of here; I don’t want her inside.” They told her, “María doesn’t want to go to PREA” because I have a very strong character. I said, “I don’t want to go; I don’t know anyone, and with my character...” I was quite brave. “What will I do at PREA?” I wondered. “Who’s going to put up with me?” The nurses even bet 20 pesos to see if I would last three days outside. Three nurses voted against, and I’ve been out for eleven years. They all lost their money.

I didn’t always have this strong character; I used to be very respectful and calm. But at Esteves, I got transformed. You have to change; if you don’t, no one will help you. I became the right hand of the nurses, the attendants, and the doctors, and I always had to be there. Once, a doctor told me, “The nurses who call for help are supposed to handle things themselves; you don’t have to help them.” I defended the nurses when one of the patients became obsessed and started staring at them. One time, there was a young nurse—just in her twenties—who was alone, and a girl was being aggressive toward her. I ran out, grabbed a stick, and broke it over the girl’s head because she was fighting the nurse. The girl fell, and both of us were scared.

Once, Ms. Esmeralda said in a meeting that I was a monster. I told her, “Yes, I was a monster because the nurses called me, but Dr. María Rosa didn’t want me to do those things.” She said, “How can they have María as a bouncer?” I was the bouncer of Ward Five, and I never changed wards; I was there for 18 years. The hospital transforms you; you have to defend yourself, and it takes courage.

I changed my character again because of the doctor. The main thing was that she reduced my medication. I met Dr. María Rosa in Ward Five with Dr. Sttopini. He told me, “María, you have to go to PREA because you don’t need to be in here anymore.” I replied, “No, doctor.” Then she said, “You are going to come out, María; here’s my colleague, María Rosa.” I told her, “I’m leaving because I need to bathe.” She insisted, “No, no, take a shower later; you don’t smell, you’ve never had a smell.” She introduced me to Dr. María Rosa, who told me, “You are going to go to PREA.” I replied, “No doctor, what will I do? I have a very bad temper.” She said, “Tomorrow, I want to see you there at nine in the morning. I want you well-dressed and groomed to go to PREA.” The attendants gave me clean clothes and shoes. I stayed there for three years. In 2004, we were discharged. Dr. María Rosa and Dr. Sttopini signed my release. We went home for the first time—first for three days, then for 15 days, then for 20 days, and finally for a month. After a month, they threw all our clothes out so we could go home.

At that time, I laughed with my companions who were living with me. I would stare at them and laugh—laugh hysterically. I laughed at anything. I looked at my hands and laughed, looked at my toes and laughed. They were scared because I was laughing, so

we went to see Dr. María Rosa. She told them, “Laugh too; María is happy because she’s outside. She’s very happy, and that’s why she laughs. Laugh with María.” They said, “She laughs a lot.” And she replied, “Well, just go with the flow.” The doctor saved my life; I was discharged because of her. I laughed at my hands and feet, and I laughed alone. I don’t know why I laughed. And then I started to get better.

Recently, they removed my diagnosis of insanity. A few days ago, I went with Marcela[*] and another girl with glasses (I don’t remember her name) to San Nicolás to the courthouse. Judge Jorge was there, along with other sirs whose names I don’t recall. I remember Judge Jorge because he was in charge. I had been labeled as insane since ’98. We took pictures with him, and when we came out, the three of us -Marcela, the other girls and I- cried, “They removed your insanity!” The Judge said I was fine: I take very little medication, manage my money, do my own laundry, and work in three houses, as stated in the document signed by the judge. We chatted with them, and then we went to see the Virgin. Since I left there, I hadn’t been to San Nicolás for 29 years. By getting rid of my diagnosis, I can get married and buy a house. Judge Jorge spoke to me and said, “Now you can get married peacefully and live your normal life like you did before.” He congratulated me for finding my daughter and for the anticipation of meeting her.

“You’ll meet your daughter” he told me... We’ll meet again.

MARÍA DEL CARMEN

-62 years old-

Interviewed in October 2016



After I left Esteves Hospital, I lived in a small house, and from there, I moved in with my family. I have three children: the eldest, who's thirty-eight, lives with me and works at the "Vital" supermarket nearby; my 36-year-old son lives in Sáenz Peña; and my youngest, who is full of life and works at the shop "Todo Moda", lives three blocks away and is thirty-two.

I was born in Lanús Este at Fiorito Hospital. My father passed away in 1993. He worked on the railroad, switching tracks. He worked at the checkpoint in Remedios de Escalada station, while my mother was a housewife and looked after us. But as a child, my mom hit me a lot—very, very hard. She used to grab me by my head, pulling my long, blonde hair by the braids, and drag me around. That's why I don't have any love for her. She's eighty-four now.

I have a sister who's sixty-one. I had another sister who once threw herself in front of a train, but she didn't die. In 2002, a nephew of mine was killed. They mistook him for a thief and shot him three times in the back. My sister couldn't cope. She had children, grandchildren, but she couldn't accept losing her son. She threw herself in front of a

train at Banfield station, but somehow it slowed down, and she survived. She suffered terribly, in agony for three months, and then passed away. On her last day, my son and I went to visit her. She was in the ICU, and they wouldn't let me see her at first. When I finally got in, her arm was in a cast, her eyes were closed, and she had a faint smile, as if saying goodbye. I squeezed her hand, she squeezed mine tightly, and the next day, she died. My other sister called to tell me she was gone. I started crying hysterically, hitting my head against the counter. My exhusband just stood there, dry-eyed. I couldn't believe she had died. I was heartbroken.

When I was little, we lived in Lanús Este where my mother's house still is. After my father died, she got together with another man and now lives with him there. I hadn't seen her in a long time, but recently, I saw her at a church in Lanús—she's an evangelical. She introduced me to the man, saying, "This is going to be my husband," though they never got married; they just live together. "Okay," I told her. But my heart is with my father. I was very close to him. He was a good man; he never laid a hand on me. I loved him a lot.

In 1993, when he died, I fell apart. He'd had a heart attack from years of smoking. My mom said he had told her he wasn't feeling well, that he felt pain in his chest. Maybe he could have been saved if she'd taken him to the hospital, but she didn't. He asked her to make him a coffee, and then he collapsed, kneeling, calling out to the Virgin Mary and asking to see me, saying, "Virgin, please let me see my daughter, Vivi" (that's what they call me). My mother brought him coffee, he lay down on her bed, and passed away right there. They were separated by then; he'd only visit once in a while. They had split up when I was 13, and I was so young I didn't understand. I used to wonder, "Why does everyone else have a father at home, and I don't?" My mom would explain, "Your father and I are separated." He'd come once a week and then leave again.

My mom believed a lot in witches. She'd say someone had cast a spell on my father. She'd take his clothes—his underwear, socks, shirts, pajamas—and bring them to the witches. My dad would give her money for food, but sometimes we wouldn't eat; we'd go hungry because she spent it on the witches. I never believed in any of it. I'd tell her, "Why are you doing this, Mom? Dad gives you money for food." She even sent me to ask for money from the bakeries and shops, and I'd have to do it because I saw my sister was hungry. Hunger was a common sight in my house. When I was starving, I'd drink mate with stale bread. Once, my mom sent me to the neighbor's to get some bread. When I went, a police dog bit me in the chest. She didn't even care that I'd been bitten.

Today, you'd get a shot after a dog bite, but back then, she wasn't concerned at all. I finished primary school at age thirteen. I started a bit late because my birthday is June 27. After that, I went straight to work. My first job was at a flower shop near home, selling flowers in Chacarita with a lady. One day, a bee stung me, leaving my hand swollen, and I had to go to the doctor to get the stinger out. Later, I worked at Águila Saint, the chocolate factory in Constitución neighborhood on Herrera Street. I made cassata with vanilla, liqueur, and other flavors, and then we made chocolates. That's where I met my husband.

One day, I was out in Liniers area on my way to my aunt's house and waiting at the bus stop. A man, who would later become my husband, came up to me and asked, "Do you know which bus goes to Devoto?" I didn't know, but I took off my sunglasses and said, "I think it's over there." He then said, "Can I tell you something?" I said, "What?" And he said, "You have beautiful eyes." I thanked him, got on the bus -- and he got on too. I thought to myself, "Wasn't he going to Devoto?"

On the bus, when I went to get my ticket, he stopped me and said, "I'll pay." I tried to refuse, but the driver chimed in, "Let the gentleman pay." So he did. I sat in a two-seater, and he sat beside me, talking non-stop. Then he said, "Instead of going to your aunt's, why don't we go to the racetrack?" "Alright," I said. We got off, and he took my hand to cross the street, saying, "Hold my hand -- this street is dangerous." We took a taxi to the racetrack -- quite a bold move, looking back. He asked me which horse number I liked, and I chose seven.

I met him on December 10, 1974, and we married a year later, on December 20, 1975. We were together for a year, and we got along well; he treated me kindly. He worked at Chrysler Factory in San Justo. We married in church on December 20 and in a civil ceremony on the 18th -- a Thursday -- with the church wedding on Saturday. I wore white, and a cousin of his lent me the dress. My shoes were tight, but I still danced the tarantella, and I had a great time.

After we got married, he didn't want me to work anymore. He told me, "I'll take care of the clothes and everything; you don't need to work." Four months after our wedding, I got pregnant but sadly lost the baby, a boy. I was in the kitchen when I heard a "pop" sound, and the placenta had come out with the baby fully formed. I put it in a jar filled with alcohol and took it to the Syrian Lebanese Hospital. They wanted to do a scrape procedure, but I refused because I had lost everything naturally. I didn't want any intervention, and by not doing anything, I was able to conceive again soon after.

My first daughter was born on April 15, 1978. My son was born on March 21, 1980, and my youngest daughter on March 22, 1984. The obstetrician asked me, "When do you want her to be born, the 21st or the 22nd?" I chose the 22nd because, if she were born on the 21st, I'd have two kids with the same birthday, and that would have been chaotic for celebrations!

I was devoted to taking care of my children, but then I got sick and ended up at the Esteves Hospital for fifteen years. I got sick before my dad died. When I had my son, I was already partly depressed. After my youngest daughter was born, I felt even worse. I was admitted for three months to the Alvear hospital, where they don't keep you longer than that. The psychiatrist treated me very well there. After that, I went to private doctors and paid for consultations myself. Then I saw another doctor who, instead of understanding, just mocked me: "Oh, you're depressed? You're faking it." We were on the 15th floor, and he even said, "Go on, get out on the ledge if you want to jump. Let's see if you're serious." I swear, that's what he told me. I looked down, then stepped back and thought, "No, I can't do that." And I didn't jump.

I felt anguish all the time. I cried all day and lay in bed for hours. I didn't want to see anyone except my dad. When my mom came, I'd fight with her. I'd fight with my husband. Then I ended up in a coma after taking two Valiums with a glass of whiskey and that's when I was admitted to Esteves. I'd tried to kill myself. I'd put on cartoons for my kids, telling them, "Watch these; mommy has a headache." I'd call my husband constantly. He worked in Tres Cruces as head of IT. I told him, "Come home, I'm going to kill myself." I even told my oldest daughter to call him: "Tell daddy mommy's going to kill herself." She was young, but she called and said, "Daddy, come -- mommy says she's going to kill herself." It was a terrible time.

I was first taken to the Agote clinic where I lay in a deep coma for three days. The police were involved because I tried to kill myself. Five doctors came to my house and found me nearly gone; they said there was no hope. They wrapped me in a blanket and took me on a stretcher in an ambulance. When I finally opened my eyes, the first person I saw was my father-in-law, who just said, "Well, finally". My husband had sent him. Before that, I'd taken rat poison with water. I told my husband and he took me to Zubizarreta Hospital, where they made me vomit to clean up my stomach. I stayed there a day, and after the Agote clinic, I was taken to Esteves.

The depression and anguish overwhelmed me. I'd look at myself in the mirror, grab my neck, and think, "I'm a terrible mother. How could I take rat poison and pills?" I started hearing voices telling me, "Kill yourself, you're a bad mother". Sometimes I'd stand by the edge of a train platform and think about jumping. Once, I wanted to throw myself under a train, I handed my ex-husband the baby, saying, "Take him." As

the train approached, I moved forward, but some police officers pulled me back: “What are you doing, ma’am?” They saved my life. Another time, I tried to hang myself with a thin stocking. Then, when my kids were out, I opened the oven, turned on the gas, and put my head inside.

When the police intervened at the Agote Clinic, my ex-husband took me to Esteves. He said, “Come on, you’re sick; you need to be hospitalized,” and he drove me in our red Chrysler. I ended up spending fifteen years at Esteves. My husband didn’t visit; my children didn’t visit—no one came.

One Mother’s Day, I clung to the bars at Esteves, crying all day, wishing I could see my family. María Rosa[*] would say, “Don’t cry, don’t cry, María del Carmen. Your family will come.” I was in a terrible state. Then, one day, my sister came with her husband and a little boy to visit me. Another Mother’s Day, my husband and my kids came, bringing a ricotta cake, a thermos, and some mate. We went to the Temperley Square to share mate and cake, and we had a lovely time. They had permission from Dr. María Rosa, who was treating me then. They visited now and then, but because my kids were young and my husband was caring for them, they couldn’t come often. I’d cry all day and tell María Rosa, “I want to see my children,” and she would say, “I understand you. I have children too, and I know how much you love them. You’ll see them.”

At the hospital, I was in the Bosch ward. Life there was sad: you’d eat, go to bed, eat again, go to bed again. When night came, it was especially lonely for me. I remember even bathing in cold water during winter. I’d wait until the nurses left around 1:30 or 2:00 p.m. and bathe alone. My hair was long, down to my waist. One night, a nurse caught me and asked, “Why are you bathing in cold water in winter?” The women would line up together to bathe and close the bathroom, but I wouldn’t join them. I didn’t like being seen naked, so I’d bathe alone, even if it meant bathing in cold water. There was one nurse who was awful; she’d make you bathe quickly, scrubbing your head roughly, saying, “That’s it, you’re done,” and would shut off the water before you could even soap your body.

I made many friends in the hospital, so many friends. Sometimes, I’d ask visitors for cigarettes. “Sir, could you give me a cigarette?” Some would, others wouldn’t. But I never asked for money—only cigarettes. Smoking was my vice. Occasionally, I’d ask a nurse for a small coin to make a call home, but my calls would always get cut off. I don’t know who was disconnecting them, but I was left isolated. Fifteen years at Esteves.

I left through the PREA program because one day María Rosa asked me, “Do you want to do PREA, María del Carmen?” I remember the doctor telling me, “Your husband will never take you out. You won’t be here forever because you’re still young. You’ll

have to leave one day—do PREA.” At first, I didn’t want to, but María Rosa convinced me.

I did PREA, but the first year I wasn’t approved. The second year, I was successful and started going to the community houses. I also had a permit from the doctor to go out in the surrounding area. I was part of the Barrios Bonaerenses plan⁸, which allowed me to take the bus number 549 with my pass. I’d go to the bank alone in Temperley to collect the money. Once, I hid the money in my closet, but someone broke in and stole my clothes, shoes, everything. Luckily, they didn’t find the money that time, but another time, my money was stolen.

When I left the hospital, I moved to a small house on Bermúdez Street. There were five of us living there for a year—me, Mirtha (who’s now hospitalized), María, and an older woman whose whereabouts I don’t know. When our lease ended, I didn’t know where to go, so I called my daughter and said, “I’m coming to live with you because I have nowhere else to go.” They had offered me another house, but I didn’t feel safe staying there. My daughter was so happy and said, “Yes, come, Mommy. We want you here. I miss you so much.” When I was hospitalized, she cried a lot, holding onto my sweaters, smelling my things, hugging them, and crying, “Why are they taking Mommy away?”.

When I moved in with my family, they welcomed me warmly. That was in 2001. I currently live with my daughter and her father, though he and I have been separated for thirty-two years, since she was born. We share the same house, but we’re separated in practice, just not on paper. We split up because he’s difficult, with a strong personality. One day, I told him, “I don’t want to be with you anymore.” We went to a lawyer to separate, but the lawyer wanted us to sell the house and split the proceeds. We decided not to and just stayed separated in our own ways. My husband is sixty-seven, and I’m sixty-two.

Lately, when I was unwell and needed a feeding tube, he started harassing me. He’d say, “I hope you die.” I was in a bad state, and he’d call me horrible names, “fat pig, useless.” I reported him to line 144⁹, and they told him, “If you keep bothering her, you’ll go to jail.” He stopped for a while, but recently, he’s started again, insulting me, saying, “Go back to Esteves, fat pig,” calling me a whore, and saying all sorts of things. I must keep

⁸ This is a plan of the Province of Buenos Aires promulgated in 2000, and dependent at that time on the Ministry of Labor, aimed at the promotion, generation and incentive of work. Its beneficiaries were people with no income. It included the generation of work projects, for the execution of which a stipend was received.

⁹ Line 144 provides specialized support by phone and whatsapp chat for people experiencing gender-based violence, as well as for anyone seeking advice on the matter. The service is confidential, free of charge and available nationwide.

quiet, go to my room, and let him rant. Now I've reported him to the police. That's why I've decided to get divorced. It hurts me so much. I went a week without eating. He'd cook ravioli, baked milanesa, meat with potatoes—I could smell the food, feel the hunger, but I stayed in my room, listening to my stomach growling. You can't imagine what I've been through. This isn't a life.

I still come here to PREA because Dr. Demetrio treats me very well. I could go to the Tornú Hospital at Buenos Aires city, which would be convenient for my tests since they have specialists there. But when it comes to psychiatry, I prefer to come here to Temperley because they really know what they're doing. At Tornú Hospital, they offered me a psychiatrist, but I refused. I told them I didn't want one. Here, they give me my medication: I take Valcote and risperidone, one in the morning and one at night. It works wonders—I feel great. I sleep well through the night, keep my house clean, and manage everything. I come here once a month.

A while ago, I was in Mar del Plata with my daughter, and I fell in the street because I was on the wrong medication. My daughter said, "Mom, it's the medication that's making you sick." She's very sharp, like a psychiatrist herself, and told me, "Don't take that one—it's what's making you feel bad." Now, my meds are adjusted, and I'm back to sleeping and feeling much better. I'll always keep coming here.

FLOR

-60 years old-

Interviewed in March 2015



I had a very happy childhood, even though my parents separated when I was nine. I went to live with my maternal grandparents, and they welcomed me so warmly that I hardly felt the separation. My brother, who was five years older, stayed with my mother, and they built a new life together. We also had an apartment in Mar del Plata, so when school ended, my grandparents and I would spend three months there on vacation. My brother stayed with my mom and did other things. I lived with my grandparents until I got married because I loved it there—they always accepted me as I was.

My mother was a music teacher, and my father was a merchant. At home, we had a piano my grandfather had bought for my mother. First he got her a Spanish piano, and later, when it wore out, he replaced it with a German one. On good days, when my mother was in a better mood, she would play for us. My grandfather would make hot chocolate, and I remember her playing *Alfonsina y el Mar*, filling the house with beautiful music. She played folk, tango, classical—everything.

My grandfather was Spanish and my grandmother Argentinian. He came to Argentina at sixteen, after his father, who had already settled here, sent for him. His father could

only afford to bring him, so he made the long journey from Europe alone. Once here, he found work teaching pelota al cesto, which was popular at the time, and he earned a good living because everyone wanted to learn. Later, he worked at the Ministry of Finance, starting as a cadet and gradually moving up, gaining the trust of his colleagues.

With his earnings, he bought my mother's piano and a house in Ituzaingó, in the western suburbs, which is still in our family. I grew up in that house—a large chalet with four bedrooms, a garage, a grill, a backyard, and a front yard. Now, my four grandchildren live there. My son, who is divorced, looks after it—handling the taxes, mowing the lawn, and keeping it in good shape. He has two children with his current partner and two from a previous relationship. The house is perfect for the kids, with plenty of space for them to run and ride their bikes.

My grandparents' story began at a dance. My grandfather had noticed my grandmother around the neighborhood and saw her again at a dance. To get her attention, he walked in whistling and asked her to dance. That's how they met. They had only one child—my mom. I'm not sure how my parents met, but I think it might have been while biking. Since my grandparents were fairly well-off, my mother could enjoy simple pleasures, like having a bicycle, which she rode everywhere.

When my parents separated, my brother spent half his time at my mother's house and half at my father's. She worked as a music teacher to support herself. My grandparents supported me. I finished high school and had a good time, though I lost contact with a close friend who moved to the south. After school, I got married.

I was seventeen when I met my husband, who was five years older. My brother had just started military service but got sick, so we were allowed to visit him at the hospital in the 25 de Mayo military barracks. My husband was the nurse caring for him. He liked me right away and told my brother, "How can I get in touch with your sister? I like her." My brother said, "Come home one day and face the situation." So he came over, looked me straight in the eye, and said, "I like you." And that was it—we ended up getting married. It was love at first sight. We were married for ten years.

We had three children, though one died a day after being born because his lungs hadn't developed properly. I stayed at home, and my husband worked as a professor of biological and social sciences. During his military service, he had been assigned to the infirmary because of his skills, and afterward, he trained as a secondary-school teacher.

At first, we lived with my in-laws near Munro, but soon we rented our own place because we felt uncomfortable living with his parents. But the marriage didn't last.

I discovered he was cheating—letters, late nights, even disappearing for a week. At the same time, I was depressed after our baby's death and became distant. I isolated myself, stopped being present for him. It all came crashing down, and eventually, we separated.

One night, in the middle of a terrible fight, I said to a mutual friend: "Can I stay at your place, with the kids and the dog?" He said, "Come." So we moved in with him, just a couple of blocks away. The kids were very young. People told me I'd made a mistake, that I should have stayed in the house and changed the locks. But it wasn't my house—it was my mother-in-law's.

At my friend's house, things were chaotic but supportive. He had two daughters, and with my kids and the dog, we looked like the Addams Family. I stayed there until the kids were about five or six. Later, I decided to move back in with my mother, who was then living in my grandparents' house. My brother was also there after his marriage failed. It became a shelter of sorts—anyone in trouble ended up there.

My brother had a difficult life. When he got sick, he became aggressive. At one point, he kicked my grandparents out of the house, and as a result, he was hospitalized in a psychiatric hospital, where he eventually died of a heart attack.

I tried to manage life with my children, but it was complicated. My son was rebellious and often clashed with my friend, so eventually, I arranged for him to live with his father. Later, I also let my daughter go live with him so the siblings could stay together. It was all done by mutual agreement, without conflict.

When I was back with my mother, I worked wherever I could—at a produce store, cleaning houses, selling Avon. My mom didn't want me to give her money; she preferred to have me at home. After my grandparents died, we sold the Mar del Plata apartment and lived off that money for a while, without financial worries.

My mom died of heart disease when I was forty. I'm fifty-nine now. By then, my children were grown and divided their time between me and their father. They both eventually graduated from high school.

I was hospitalized after my mother told a doctor that I had been taking too much aspirin. It wasn't an addiction, but I relied on it for energy. The doctor recommended admission to Esteves Hospital. My brother was also hospitalized around that time. Life in Esteves was very hard—people were beaten, there was shouting at night. Public hospitals were rough compared to private clinics.

Later, on my doctor's recommendation, I moved into a PREA home. At first, I was terrified of being sent back to the hospital, but in the group home, things were calmer. I lived with other women, attended workshops, and slowly adjusted.

In the first PREA house, there were five of us, and it was lovely. Over time, two women had to return to the hospital, and I too had a relapse at one point, but PREA supported me throughout. Eventually, I moved into another house, where I still live today. Now there are three of us. We each manage our own food and share meals sometimes. I enjoy watching TV—especially soap operas and romantic comedies—and spending quiet evenings at home.

After leaving the hospital, I started working again as a cleaner, first through the Barrios Bonaerenses program and later on my own. For about eight or nine years now, I've worked Monday to Friday, six hours a day. A typical day is simple: I come home after work, relax, have mate or a drink, and watch TV.

For me, PREA was a solution. Everyone's experience is different, but it worked for me. Being hospitalized was awful—I wouldn't wish it on anyone. Now, I take part in demonstrations for better mental health services. I've learned that in some provinces, patients don't even get enough to eat. We have to fight to improve conditions.

My relationship with my children, which used to be strained, is much better now. My daughter and son often come to visit me with my grandchildren. I give them gifts, and we spend time together. I've told them, "I live here because I was sick, but now I'm better. Grandma loves you very much and wants to see you often." That made them happy.

Being able to share my story reassures me that I'm doing well.

LUNA

-27 years old-

Interviewed between December 2015 and June 2016

I was born almost twenty-five years ago in Villarica, Paraguay. I don't have a family—my parents died, and my brothers don't even want to see me. The only family I have is my daughter.

I stayed in Paraguay until I was seventeen, spending my days washing onions. My dad grew melons and watermelons, and that's how we got by. When he passed away, everything changed, and I ended up on the streets. My mother had already died, and I don't remember much about her. We were twelve siblings—four girls and eight boys—and I was the second girl. I went to school until sixth grade, but I didn't like it. You'd go to the bathroom, and someone would come in and touch you.

I came to Buenos Aires because a man, the uncle of a neighbor, asked if I wanted to come. I said yes, but he tricked me. He told me, "Come, and you'll have a good job." I didn't want to, but he told me that, since I was pregnant, I had to work. So, that's what happened. I was seventeen and pregnant. This didn't happen because I wanted it to. Someone found me on the street, took me to the forest, stripped me, and left me there. I never saw his face, so I don't know who he was. When I found out I was pregnant, I thought, "Alright, that's it." I'd been told I was having a baby, but when I saw it was a girl, I felt numb. I had hoped for a boy, thinking he might help me. It was hard with my daughter, knowing she wasn't born out of love, but out of violence, and that's a painful truth.

So, they brought me here under false pretenses. They told me to come to Buenos Aires for work, but it was for something else. I thought I'd find a real job. I arrived thinking they'd treat me well, that they'd take care of me. But you can't imagine what I'm about to tell you: in that house there were girls as young as fourteen or fifteen, working as prostitutes. I couldn't believe it. We all had to sleep on the floor in one room, but I slept in the bed because I was pregnant. I had to do the cleaning, and they treated me like a dog. I left when I was about to have the baby—that's how I escaped. They put me in a taxi and sent me alone to Oñativia Hospital to have the baby. I told the driver what was happening, and he made a report, but no one was ever arrested.

My little daughter was born there. She was a baby, and I couldn't do anything for her. She was with me for the first two years, but then they took her away. After I had her, she was

in the hospital, and an assistant came to tell me that someone wanted to see me. I said it was fine. When they arrived, it was a woman who wanted to take me to a home for single mothers. While I was there, I started treatment at the Gandulfo Hospital because I was in a bad way—I was experiencing something like schizophrenia. I saw things, such as devils and monsters, and my mind would tell me, “Come on, kill your daughter.” There was a time when I almost did; I nearly threw her on the floor. But another woman slapped me, and they sent me to Gandulfo Hospital for five months before transferring me to Esteves. They took my baby from me, and now she is with an adoptive family.

Esteves was horrible. I had never been to a place like that before. Whenever I pass by Esteves, it feels like I see death. You wouldn’t believe how infected I was with lice. They rob you there. I had a lot of underwear, and they stole all of it. I had nice clothes, and they stole it too. I spoke to the caba, but she didn’t say anything. That was Esteves. I was there for about two years until a woman named Silvia took me out. She cared for me a lot. I met her in the hospital because she was visiting a friend. We drank mate and chatted; she was older than me. I think she wanted to take me because she thought I could be her daughter, so she brought me to live at her house. Her intention was for me to work for her in a tortilla shop she had at a train station. I didn’t want to, but eventually, I agreed. Her son mistreated me too—he beat me, threw me against the wall, and strangled me. She wouldn’t let me have any privacy in the bathroom; she would watch me in the yard. Then one day, she told me to “get out” and kicked me out of the house.

I was on the street for a week, sleeping at the Temperley train station in the freezing cold. I was dirty, with matted hair, and I ate scraps from the garbage. This wasn’t the first time I had lived on the street; I had already experienced it in Paraguay. At the station, I was raped and lost my baby. I didn’t want to live. But I met Oscar [*], whom I had known from Esteves; he was making puppets there. I told him that I had been raped, and he encouraged me to file a complaint. He took me to the hospital, talked to one of his friends, and asked if I could stay there for a night so I wouldn’t have to sleep on the street. They let me stay.

Then dawn broke, and the friend called a social worker to come and help me. Oscar took me to a home for single mothers, but there was no space, so he brought me to Libremente community center and spoke with María Rosa. She talked to me and said, “From now on, you’re going to stay in the PREA.” So I stayed in the PREA. Some people say they feel sorry for me, but I don’t understand why, as I’m not disabled or anything. I went to a PREA house with four other women, and it was nice. They welcomed me with a plate of food, told me to take a bath, and provided shampoo, hair conditioner, and clean clothes. You wouldn’t believe the warm welcome I received. They asked me, “Are you going to be the new one?” I also started working with Celeste [*], at the garage sail. I helped the women fold clothes and put them in the drawers—that’s what I did.

Then I was hospitalized again because I had a breakdown and took all my medication at once. It happened after a fight with my ex-partner. I met him at Esteves; he was a security guard. He told me, "When I can, I'll call you." I called him, and we talked. He asked, "Are you out yet?" I said, "Yes." When I got out, I found him again. We dated for two years until I went to his house and found him with someone else. I was devastated; it felt like everything collapsed. I couldn't hear anything, I just felt numb. It was like a train had run over me. He didn't say a word, and I ended up back at Esteves.

I started to get better when I met my current partner. His mother was hospitalized, and that's how I met him. We've been living together for a year and a half now, along with his family. We only have one room, and there are five of us.

This is my life now. I come to Librement Community Center on Mondays to help out for a while. On Tuesdays, I'm at home, drinking mate and washing clothes. When I'm home, I sometimes watch a program on the Volver television channel called "twenty-two, el loco." I love that show; it's about cops catching criminals, and it makes me laugh so much. On Wednesdays, I sometimes visit a friend I met in Librement during a photography workshop. On Thursdays, I work with Fabi [*], helping with the children in a plastics workshop. I love it. After the workshop, I clean the table and organize everything. I enjoy working and being with children. On Fridays, I have a meeting with María Rosa. If I misbehave, she or Graciela [*], will call me out. María Rosa understands me in a way others don't; they couldn't handle what I've been through. She inspires in me feelings I've never felt before—she is like a mother, even more than that. On weekends, I go to another friend's house from PREA.

I'm doing well. Things are not bad. I have problems, yes, but every household has issues, right?

[Six months later]

I'm no longer with Ariel. His sister mistreated me a lot, so I left the house. He doesn't want anything to do with me anymore; he already has a new girlfriend. I went to Constitución to look for a place but couldn't find anything. I went to a shelter, but there were more women trying to get in. The person who runs it told me, "Just go in anyway," and I ended up having to sleep on the floor. It was horrible—there were fleas and lice. Then I asked for help, and Carmencita took me in. I had to go back to living in a house again, but now I'm calm, thank God. Carmencita is really good; she bought me boots, sandals—she got me everything I needed. We have our arguments and fights, like in any household. She buys the food, but sometimes it doesn't seem fair. I made a joke

last night, but I can't share it because people will read the book and think I'm crazy. I've been hospitalized many times for acting out.

Now I'm studying hairdressing and working. My job is to clean and open the door; it's a position at Promover¹⁰. I got the job thanks to Nadia [*] and Mercedes [*]—they fought hard to help me get it. I have a debit card now, but I don't know how to use it at the ATM. It's the first time I've had a card.

My daughter is eight years old. I sometimes start crying because I don't have her with me. There are times when I'm not feeling well, and I think about going back to the streets. I know that sounds strange, but it's my idea. I know they help me here, and it would hurt them if I went back out there.

Sometimes I feel like life isn't fair.

¹⁰ The Promover Program, under the Ministry of Labor, Employment and Social Security of Argentina, in its line of community-interest associative activities, enables people with disabilities to participate in socially useful initiatives. These activities, carried out in a supervised manner, help participants strengthen their potential, acquire skills, and develop work-related habits.

MEÑECA

-58 years old-

Interviewed in March 2016



Meñeca—that's what my uncle used to call me, and that's how I'd like you to call me too. I was born in La Matanza, in San Justo, at the América Clinic, which no longer exists. I was born on February 4, 1958, so I'm 58 years old. My last name is Ukrainian because my grandmother came here from Russia.

I had a beautiful childhood, and I remember it vividly. I got along very well with my mother and my uncle. My father died of a heart attack when I was two, so my uncle became like a father to me—maybe that's why I love him so much. We were very close; we used to walk arm in arm down the street.

My family owned a leather goods shop. For a while, we made our own products, but when the factory closed, we started buying from suppliers and selling directly to the public. I worked there too. The business had been started by my parents, and when my father died, my uncle stepped in to help my mother run it.

I completed both primary and secondary school. I also studied to become a tour guide, and the only thing I still need to finish my degree is my teaching internship. I chose to study tourism after a half-hearted conversation with my uncle. I had wanted to study medicine, just as he had done for two years before his father's death forced him to care for his mother. He convinced me not to pursue medicine, and his opinion carried a lot of weight.

So I became a tour guide and traveled a lot during my studies—to Córdoba, Mar del Plata, and other places. We learned how to guide groups, how to memorize and present information, and where to find it. I also helped out in the family shop—attending to customers, collecting payments when my uncle wasn't there, and cleaning the merchandise. I took on more responsibility after my mother died of cancer—it all happened in just six months—because I wanted to take her place in the business.

After qualifying as a tour guide, I began teaching. I left that job when I got together with my husband. We never married in church because he was separated from his first wife, so it wasn't possible. He didn't allow me to continue or finish my degree. I have a daughter with disabilities—she has seizures, behavioral issues, and sometimes isolates herself. She's hyperactive. She started school in a regular classroom, but because of her restlessness and the problems she had, she was transferred to a special school.

I met my husband in 1983, around the time my mother passed away. A neighbor introduced us—he was a friend of her brother. We met at a café-concert in San Justo. He caught my attention; he wasn't unattractive, and at first, I was drawn to him because he seemed like a good father—though he wasn't as good with my daughter. We moved in together in my place, and for a while, my uncle didn't know. It was a bit of a secret. When he found out, he was furious.

My uncle had been married to a woman named Mariela, but they separated, and later he got together with one of my mother's friends. He found it hard to tell me about her—she was the one who eventually told me. That's how we were. He wrote me a touching letter, as if he were speaking to a little girl.

My uncle warned me that my husband would leave me with nothing—and he wasn't far off. After five years of living together, I became pregnant. In the early years, we got along well. He was a foreman, and his ex-wife lived about 15 blocks away. Later, I made the mistake of asking my uncle for my mother's inheritance to start some businesses, but they all failed. With that money, I opened a leather goods shop, but it didn't work out. At the time, my husband was working in Congreso neighborhood and would get home late, leaving me to run the business on my own, which was very hard. He had promised to help but never did.

Then my uncle and I opened a greengrocer's together, but that failed too—my husband was too quiet and unmotivated, and I couldn't manage everything by myself. My daughter was born in 1989—she's now 26. I was happy when I got pregnant, but my husband's older daughter felt jealous, because she and I had been close. I didn't handle the situation well, and she felt left out.

At the greengrocer's, I ran the shop while my husband stayed home with our daughter. I would have preferred it the other way around—him working and me caring for our baby, who was very young and missed me. But the business failed because he wouldn't get up early to buy the produce. After that, he became a taxi driver, but he was never really a provider. He didn't like working and preferred staying home. My uncle helped us pay rent—that's how we got by.

I tried to bond with my daughter, but it didn't happen the way I hoped. I wanted my husband to care for her while I found a job, but he refused. We opened a convenience store—another failure. I had savings to cover some apartment expenses, but he wouldn't let me pay the debts, and he didn't pay the utilities either. My uncle grew tired of helping and distanced himself. I didn't love my husband anymore. Eventually, I left him—he was very jealous, and I couldn't take it any longer. A year or two later, I was hospitalized. I took care of my daughter, but he didn't even provide food.

Finding work while raising my daughter was nearly impossible, so my uncle started giving me a weekly allowance. He helped me once again. I asked him for forgiveness, because he had made me choose between him and my husband, and I had chosen my husband.

I was hospitalized after the building association where I lived filed a complaint because I hadn't paid maintenance fees. I owed a lot. A social worker came to see me—I had removed the doors from the rooms because my daughter kept pinching her fingers in them, but she didn't believe me. She disapproved of the way I was living.

I was summoned to court, and when I was leaving the courtroom, the police took me away without explanation. I spoke with either a judge or a psychiatrist—I can't remember which—and he said, "You have nowhere to live," since my apartment was about to be foreclosed. But because it was still in my mother's name, they couldn't take it. They brought me to the hospital in a police car, without clothes or anything. I was scared they would steal my ID, so I refused to hand it over.

When the psychiatrist examined me, he read the report they had received, which stated that I needed to live in the hospital. He later told me that I didn't have to stay there permanently, but that I wasn't ready to leave yet. They offered me a place in the

PREA program, but I refused—I couldn't imagine living with others who had the same problems. It took me thirteen years to finally accept. I just didn't feel ready before.

My daughter was taken from me by my ex-husband. He was supposed to bring her to visit, but one day he just drove away with her and never brought her back. I went to file a report, but they wouldn't take it. My uncle had warned me, and he was right—but I was devastated; I never thought he'd do something like that. He said he'd already lost one daughter and wouldn't lose another.

A year after my hospitalization, my uncle started visiting me again. He brought clothes and shoes and came every week until he became ill. He developed prostate problems and stopped traveling. Now he's in a nursing home, and my aunt won't let me see him. I used to call the shop every week to ask about him. When we were alone, he was affectionate, but distant around my aunt. I wish I could care for him myself instead of him being in a home.

My experience in the hospital was overall positive. I connected more with the nurses than with the other patients, who often treated me like I was one of the staff. I dealt with my anguish over my daughter and my uncle by helping out—sorting laundry, organizing clothes, and assisting in the dining hall at mealtimes. There were about 90 patients in my ward, though not all of them ate; some wandered around asking for money. By the evening, everyone returned because the doors closed at six. I eventually grew tired from the workload, but back then I was known for being strict—something that's changed. I had to be firm to manage the more demanding patients.

I was lucky to stay in the same ward for my entire hospitalization. Some patients with pensions or companions brought their own furniture, like I did. I don't remember everyone, but I told my women's group recently—the one coordinated by Graciela[*]—that when I left, it felt like turning a new page. I didn't look back.

I was hospitalized for thirteen years and discharged a year ago. After so long, it finally felt like time to rejoin the world. I couldn't do outpatient care unless I joined PREA. By then, my ties with my family and daughter had faded. When I finally decided to join, I told the doctor I was ready. Everything moved quickly after that.

At PREA, I started interacting with others going through similar experiences. For a long time I denied my illness and didn't really know my diagnosis, but medication has helped me a lot. I take half a 10 mg Valium tablet, risperidone, and biperiden for tremors.

I spent a year attending PREA workshops, and eventually I was allowed to go out on my own. I started computer classes at Libremente. After my discharge, I moved into a shared house—I wasn't sure how the others would receive me, but it went better than I expected. There are five of us, and we've formed a nice group. We go out to eat together like a family.

The house is small—a living room, two bedrooms, and a bathroom. I share a room with Laura, who's a wonderful companion and goes everywhere with me. She left the hospital three years ago. She recently had arm surgery after a fall, so I help her bathe and with other things. Another roommate worries me—she doesn't take care of herself, and I'm afraid of ending up like her. I go to Libremente weekly, and that helps. Work also helps me feel stable.

Now I work at Promover as a secretary at Desayunate¹¹ and at the front desk on Tuesday afternoons. Promover is part of a national program, but I'm not sure what its future will be. It helps former patients find work. My income comes from my job and a pension I received in 2009, when ANSES¹² officials visited the hospital.

We attended an Art and Health Congress in Mar del Plata in September—quite an adventure. Seeing the sea again after so many years was wonderful. I met many people and shared my story.

At the congress, we talked about PREA and Promover. There were many attendees, even some from Paraguay. The performances were beautiful, though I disagreed with those who said you should stop medication after discharge—that's not true. If you stop, you risk decompensation.

I also attend workshops at Libremente—"Encounter with the Voice" and "Healthy Cooking." I'm still in "Healthy Cooking" and recently started "Family Assistant and Children's Recreation." It's like training to be a kindergarten assistant—we organize children's parties and talk about family and children's rights, such as the rights of girls who must work in the fields instead of going to school.

That course resonates with me because I once studied teaching. I couldn't finish back then because I had no one to care for my daughter. Now I can earn two certificates in one year, and that excites me. Still, I worry that at my age I might not find work. I

¹¹ Weekly workshop that takes place at the Community Center Libremente, in which current issues proposed by the participants are discussed over breakfast.

¹² National Social Security Administration

can't give up my pension, so I can't take a formal job. This course brings me back to my youth—to a time when I was happy—and it reconnects me with emotions I lost during my marriage.

PREA is helping me look for my daughter. I saw her picture on Facebook—she looks so much like me. It was emotional. I don't know if she wants to see me. Meeting her will be difficult—we'll have to get to know each other again. I have a lot of anger toward her father, but saying those things wouldn't help her. I felt close when I saw her picture, but now I feel far away again. It hurts.

The court hasn't been able to locate her; all the information I have comes from PREA. The social worker, Analía Monchetti[*], is helping me with that and with my apartment situation. But the court says nothing can be done about the apartment. I need to pay the debt, but I can't right now. I also want to receive a share of the business income I'm entitled to—that could help.

They wanted me to go to San Justo for a day visit, but there was no transportation. I've heard that the city has changed—that they even built a pedestrian walkway where our shop used to be. I'd like to see it, but I'm afraid of the emotional impact; I might get overwhelmed and relapse.

Analía wants to take me to meet my daughter, but I'm afraid to face my ex-husband. He might react badly. Still, I want to see my daughter, my uncle, and my friends. I know I have to work on it—so many years have passed, but there's still a chance. My daughter is in treatment, and I'm in therapy too. Our psychologists are planning to speak so they can help us reconnect. The social worker from Libremente even contacted my former sister-in-law to confirm that my daughter is in treatment.

I really need this reunion—it would be like a balm for my soul.

In conclusion, I believe that living with people who have mental health challenges can be perfectly manageable—as long as they are understood and included. Life with someone who has a mental illness isn't difficult when they are stable, medicated, and in treatment. It simply becomes part of who they are.

I WANT TO LIVE THAT MADNESS

50

ANA
-53 years old-

Interviewed between June 2015 and July 2016

I come from a middle-class family. We had a good life, and I went to private schools. We always had a maid. My parents were both professionals who worked full-time. My adolescence was uneventful—no drugs, no wild parties—just studying. I attended church and worked with a group supporting people with disabilities alongside my boyfriend at the time. His brothers were involved in political movements, one in the ERP and another in Montoneros¹³. My boyfriend and I wrote letters to each other and did voluntary work together. Every Thursday, we attended a community meeting led by Father Pablo Tissera, a well-known and progressive priest in San Luis Province and Buenos Aires. He was deeply connected to us and profoundly shaped my life. For a long time, I was a Christian and a devout Catholic, especially devoted to St. Francis of Assisi.

That all changed after adolescence. My parents and my therapist pressured me to break up with my boyfriend, and I stopped going to church. When I was 16, my parents separated. My sister, who was 10 at the time, and I stayed together. Although she was six years younger, she had always been the stronger voice in our family. My parents' separation in 1976 was triggered by the chaos of the dictatorship. After 18 years of marriage, my father left. The separation marked the beginning of a difficult and profoundly sad period in our lives. We missed my father terribly. He was a beacon of joy, humor, and positivity, lifting the entire family with his energy. Though we still saw him, it wasn't the same—he remarried and had two more children.

This period also marked the start of my mother's struggles with alcoholism, which lasted her entire life. My father also struggled with alcohol but eventually overcame it. Between the ages of 16 and 26, I dealt with my mother's alcoholism on my own. Her decline was gradual; it wasn't obvious at first. But one day, I realized I dreaded going home, terrified of finding her drunk. I fell into a deep depression and flirted with suicidal thoughts for a long time. A co-worker introduced me to Al-Anon, a recovery program for families and friends of alcoholics. It was the first place where I truly felt part of a group—where I could say “we.”

¹³ ERP or People's Revolutionary Army and Montoneros were guerrilla groups that operated during the 1970s in Argentina.

Al-Anon meetings saved me. There were no professional resources to help families cope with alcoholism, and my mother refused to acknowledge her addiction. She was deeply ashamed and kept it hidden. My message to other adult children of alcoholics is not to expose or reproach their parents' alcoholism. Instead, attend Al-Anon meetings in secret if necessary. Alcoholics see only the bottle—it becomes their best friend, their partner, their life. Suggesting help indirectly, such as leaving flyers around or involving a friend, is often more effective than confronting them directly, which can provoke violence, as it did in my case.

The most challenging period of my life came when my 19-year-old sister had a car accident. At the time, I had moved out of the house to escape my mother's drinking and was living in a boarding house. But after the accident, I returned home, and things deteriorated further. My sister resented me, blaming me for our parents' separation, as did my mother. In our family, someone always had to be blamed, and I became the scapegoat. My sister's aggression escalated, and during one argument, she attacked me with a chair. Yet, I was the one accused of violence. Feeling betrayed, I left again, staying with friends until I could rent a small room in a poor, rundown neighborhood.

I had a relationship with a sculptor during this time. He was talented but jealous and lived a bohemian life. When he started seeing another woman, I left, even though I loved him deeply. Later, I became involved with someone far more dangerous—a former ESMA¹⁴ torturer. I didn't know this at first, but when I realized, I wanted to leave. However, I was trapped by fear. He controlled me completely. Living with him was a nightmare: he raped me daily, kept me locked inside, and broke me mentally. I fell into a deep depression, taking medical leave from work because I was too ill to function. I was 36.

I worked for 17 years as a workshop teacher at the National School of Dramatic Art, managing to keep my job despite being on medical leave for three of those years. My depression deepened during Menem's second term as president, triggered by events like the bombing of the Israeli embassy and my abusive relationship. I eventually escaped that relationship, but it left me shattered.

When I realized what kind of person he was, I was already trapped in the relationship. He didn't want to let me go, and I couldn't leave because I was terrified he would kill me. Fear kept me imprisoned. I had to be very clever to make him leave me instead. During that time, I became incredibly neurotic because I felt I had to hide my own thoughts.

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¹⁴ Navy School of Mechanics, a clandestine detention and torture center during the last military dictatorship (1976-1983).

I've always considered myself a bit of a free spirit— “half a hippie,” as I like to say—not in the sense of smoking joints or being messy, but in embracing a mindset that was independent and very much of the time. However, he operated by a deeply macho and outdated code where the man had to be the provider and the woman stayed at home. I had no concrete proof of his beliefs, only the way he treated me and the things he said. It broke me.

Eventually, I managed to escape Darío, the torturer, and returned to my mother's house. But I was still deeply nervous and irritable. My mother and I fought constantly. She wasn't a dramatic or chaotic alcoholic—she drank moderately—but in her later years she became confused and disoriented. She accused me of being involved with drugs, practicing witchcraft, being aggressive, and even beating her. These accusations escalated, and she went to the police and the courts, eventually having me committed.

I want to point out that family testimony in cases like this is rarely questioned or verified. Even in interviews with psychiatrists, once a family member states you are a danger to yourself or others, hospitalization becomes automatic. There's no review process or proper inquiry—not even the requirement for evaluations by three psychiatrists, just one. This reflects poorly on the judicial system, the health system, and family courts.

In my case, I was unjustly hospitalized and accused of things that were later proven false. I entered as someone supposedly addicted to drugs and left labeled as a workaholic—because they had to attach me to some form of addiction. The truth is, I was always incredibly responsible when it came to work. I couldn't imagine my life without it. I had studied while working and continued to work my entire life.

The first hospitalization lasted three months in a private facility with poor infrastructure. It was an extremely traumatic experience. I developed severe reactions to the medication they gave me, but they failed to provide the necessary care or palliative treatments. By the time I was discharged, I could barely walk. My body had deteriorated, and I felt stunted—not just physically but emotionally. The facility was poorly equipped; I was confined to a small apartment with only a bed and a narrow hallway to move around. I didn't even have access to sunlight.

That hospitalization occurred after the police intervened in my life. I had been living alone at the time following a heated argument with my mother, after which she moved out of our house. During the altercation, I filed a complaint against her because she and her partner attacked me. It turned into a chaotic scene; both of us called the police. After she left to live at my grandmother's house, I remained in the family home by myself.

The police came to look for me one day and physically restrained me, treating me as though I were dangerous. They didn't believe me when I asked to use the bathroom. They acted like narcotics officers—dressed in civilian jackets and jeans rather than uniforms. The only person in uniform was a policewoman, who sat with me for four hours while we waited for a psychiatrist to arrive. I was evaluated by only one psychiatrist before being admitted to a well-known clinic in Caballito neighborhood.

That first hospitalization happened in 1998, the same year my father passed away. He had been hospitalized with pulmonary emphysema and died during my stay in the clinic. I couldn't visit him, comfort him, prepare him for death, or even be by his side during his final moments. That was devastating for me. I loved my father deeply, and I had always tried to care for him. Without me, the fragile balance in our family collapsed. My sister suffered a nervous breakdown, complete with convulsions, and my grandmother's health almost failed.

Those three months I spent apart from them felt like a catastrophe for my entire family. That was my first hospitalization, at the age of 36.

In September 2005 more or less was the second hospitalization. Someone sent me an email telling me if I collaborated with the reopening of a dormant account in a bank in Burkina Faso and pretended to be a relative of this person, I was going to collect part of the money. It was a lot of money. They sent me two emails, one from a bank employee and another from the bank manager making the same proposal. I followed the situation because I thought it was fun, and I could practice English. Later it turned out to be a scam, but I thought it will save me from everything. I went into a state of euphoria, and a week later I went out into the street and the police picked me up because the neighbors had reported that I was talking to myself, crying or laughing or screaming. That was true, but I wasn't talking to an imaginary person, I was talking on the phone. So, it wasn't a great delirium, it was a state of euphoria and fear too, because I was afraid of having so much money.

This second hospitalization lasted two years and took place at the Esteves Hospital. I also had a very difficult time there and was also assaulted by the police. The first hospitalization lasted three months, the second lasted two years, and then I ended up in a geriatric home. I left the hospital with a pension of 200 pesos, and they sent me to a nursing home where I had the possibility of leaving, but I had to return there to sleep. My mother had already died, and my sister didn't want me to come back home, so they sent me there. Dr. Calabrese had a hard time getting me out of the hospital, because they I had essentially been deposited there, and everyone seemed perfectly satisfied with that situation.

I spent two years in the nursing home. During the first year, all I did was sleeping—I would get up at three in the afternoon because of all the medication. I would go to the hospital for check-ups. Once my sleep pattern became more regular, I started attending workshops and making friends. I liked a man there and began a friendly relationship with him. He was a drawing teacher, and I went to his classes; we got along very well. As I started to feel better, things in the boarding house became more difficult. There was a climate of hostility toward me and among the staff. Some of the longtime employees left, new employees arrived, and a kind of war broke out between the old staff and the new. The atmosphere was terrible and I wanted to leave. I did it impulsively, asking my sister to let me visit the house in Villa Adelina —my grandmother's house, where my sister lived with a guy. My sister was in very bad shape at that time, very aggressive as well. I managed to get the money from my monthly pension payment. I told them I would pay weekly. I paid for one week, kept the rest of the money, and moved to another boarding house. Full board – rooms and meals—was very expensive. I could rent another for 400 pesos, whereas at the nursing home I was paying 5,300.

All my hospitalizations were ordered through the courts as part of an ongoing insanity trial. To this day, I am still legally declared insane.

The third hospitalization was initiated by my sister's boyfriend. At the time, I was desperate to escape the nursing home, where I felt trapped. When my sister came to visit, I left with her but went directly to a nearby boarding house in San Fernando instead of returning to her home. Even though I called her every day to let her know I was safe, she filed a missing person's report.

At the boarding house, my situation worsened. Unable to explain my professional background, my education, or my work history, I was judged unfairly. I suspect they thought I was a prostitute or something along those lines. After a week, they refused to accept my payment for the following week and kicked me out. With nowhere else to go, I returned to my sister's house.

I tried to make things work. I even spoke with a family therapist to mediate and help me get the keys to the house. However, my sister didn't trust me. She refused to give me a key, locked me in the house all day, avoided speaking to me, and seemed afraid that I might hurt her.

Eventually, my sister went back to court and presented lies about me. That same night, the police arrived. Two officers told me they were taking me to a neutral place for an evaluation. It was a lie. There was no evaluation—I was admitted directly to the hospital.

The experience was traumatizing. When I arrived, I had a nervous breakdown and pleaded with the staff to observe me before giving me any medication. I was terrified of being overmedicated because of what I had endured during my second hospitalization. Despite my protests, the nurses—dressed in civilian clothes—ignored me. One of them stood behind me and coldly said the word “Haloperidol.” I panicked.

In a state of fear, I ran to the door and tried to hide under a table. I screamed, “They’re going to kill me!” I truly believed that the medication could be fatal or that they would harm me in some other way. Instead of calming me down, they labeled me paranoid. They forcibly restrained me, stripped me naked, and injected me with medication.

The next day, I woke up with no memory of what had happened. They had taken all my cloths, including my underwear and shoes, and replaced them with hospital-issued garments.

This third hospitalization lasted four years—two years as a regular patient and two more as a PREA patient.

My sister was convinced I was severely mentally ill—an idea reinforced by the doctors. Even the family therapist, who knew all three of us well, couldn’t resolve anything during my third hospitalization.

I had requested family therapy after my second hospitalization because my family was overwhelming me. I was under constant attack and had no sense of privacy or intimacy. During those sessions, it became clear that my mother had acted with ill will and sent mixed and contradictory messages. Despite this, she initiated the legal proceedings that led to my hospitalizations under judicial orders, portraying me as insane. That insanity trial remains unresolved to this day.

Even while I was still hospitalized -- and despite testimonies from professionals at Esteves Hospital who advocated for me -- my insanity declaration was renewed. As a result, I am still legally declared insane. I cannot manage my own assets, buy or sell property, or get married. My civil rights are essentially annulled, except for my right to vote. My sister was appointed as my curator, managing my legal and financial affairs.

After two years in my third hospitalization, I was somehow admitted to the PREA program. I don’t know who intervened to make that possible, but it felt like a blessing. I became involved with CREAR, an internal art therapy program at the hospital. I spent much of my time painting, which became a source of healing. The professor who ran the program provided good materials and opportunities for us to exhibit our work.

He organized exhibitions, secured venues, and gave us access to proper supplies like stretchers.

In the beginning, resources were scarce, but I persisted. CREAR gave me a sense of purpose and humanity—something sorely lacking in other parts of the hospital. It felt like an island of dignity within an otherwise oppressive environment.

The general conditions in the hospital were dehumanizing. Patients were routinely denied basic necessities, like medication for menstrual pain or access to sanitary pads. Toilet paper wasn't provided, and those without outside financial support suffered the most. If your family didn't send money, you couldn't afford cigarettes, snacks, or anything beyond the awful hospital diet.

The staff was often cold or openly hostile, and the atmosphere among patients could be just as harsh. Many were deeply unwell, and jealousy or frustration often led to mistreatment from other patients. Despite all of this, CREAR gave me moments of relief, treating me like a real person in a place where humanity often felt stripped away.

When I entered the PREA program, I started in the admission workshop, which lasted five months. There, I worked with two excellent psychologists, and the experience felt meaningful. However, when I moved on to the main PREA program, I was shocked. The psychologists there were very young and seemed to focus on activities unrelated to their professional training. The workshops were about things like makeup or cooking, which felt trivial compared with what I had been doing in CREAR. Leaving CREAR to join PREA was difficult for me, and I went through a period of grief over that loss.

I had a couple of outbursts during this time, which led them to label me as difficult to socialize with. One incident happened on painting day, when they replaced the art workshop with a craft session, recycling Tetra Brik boxes to make purses. Although the craft was nice, I was deeply disappointed to miss painting, and I blurted out, "This feels like the hippie fair—I'd rather paint." My comment upset the psychologists who were running the workshop.

The second incident happened when I sought psychological support after my sister had an abortion. The situation deeply affected me, bringing up my own traumatic abortion experience. It had been a four-month pregnancy, and I carried the pain of not knowing whether my baby had felt anything during the procedure. I had been in high school at the time and wanted to keep the baby, but the father refused. When I asked for emotional support, a psychiatry student told me I was out of place for bringing up my abortion. That response left me feeling dismissed and misunderstood.

Once I settled into PREA, I began to gain weight, recovering from a period of extreme thinness—I had dropped to 45 kilos, about 15 kilos less than my current weight. Among the PREA workshops, the film workshop was the one I enjoyed most. We went on outings to places like Libremente, and those moments of leaving the hospital gave me a sense of freedom. The cooking workshop was another favorite. We were allowed to choose what we wanted to make, cook it together, and then eat what we had prepared.

Despite the challenges, I found moments of hope within PREA, and for that I am grateful. At first, the social worker made a mistake by taking me to a court interview without my identification, but she eventually became an advocate for me. Her efforts helped change my sister's perception of me, presenting an image that encouraged trust and allowed our relationship to begin healing. By the time I was ready to leave PREA, my sister no longer objected to my release.

It took me two years to transition out of PREA. I had some support from the Human Rights Secretariat through a friend who worked there, but I never dared to file a formal complaint about the mistreatment I experienced in the hospital. I was afraid of retaliation from the nurses.

Much of the stigma against me came from a letter my sister wrote and a false diagnosis she had added to my medical history through her psychiatrist. Ironically, the psychotic episode had been hers, not mine. In 2001, during a period of personal and familial turmoil, my mother—confused by her alcoholism—pushed for my hospitalization while insisting that my sister return to work. That year was particularly chaotic. It coincided with the auction of a piece of land we didn't even know existed, which caused significant stress. The auction wasn't worthwhile, yet my sister continued to pay taxes on the land, clinging to it despite the burden.

Adding to the chaos, the LAPA¹⁵ plane crash -- which killed everyone on board-- happened around the same time. Large-scale tragedies often have profound effects on family dynamics, and this was no exception. This one intensified the tension within my family, worsening an already fragile situation.

The PREA program was a turning point for me—a true respite. For the first time, I felt hope. Before that, I was overwhelmed with anxiety at the thought of being well enough to leave the hospital but having nowhere to go and remaining financially dependent on my sister. The social worker, Analía [*], played a crucial role in my recovery. She

¹⁵ Refers to the Argentine Private Airlines and the accident that occurred on August 31, 1999, in which 65 people died.

supported me through my time in PREA and convinced my sister to help find me an apartment. Even now, Analía continues to support me, and I am deeply grateful for her dedication.

Leaving the hospital felt like being reborn. That happened just a year ago, and for the first time in my life, I feel happy. I no longer carry the constant weight of worry. In my current living situation, I share a house with three women, which gives me a sense of companionship and security. I don't have to manage utilities like gas or water—something that would have been overwhelming for me on my own. The PREA program gave me what I could not achieve by myself: the opportunity to live independently, outside the hospital, with support. Without PREA, I would have remained institutionalized, as my sister wasn't willing to help me leave.

Even now, my sister still holds certain prejudices and sees me as mentally ill for life. She tests me—she's willing to go on vacations with me and spend time together, but I can tell she still has doubts. Even so, our relationship has improved a lot. This past summer, we took two trips together. I went to Chapadmalal through a free tourism program and invited her to join me. Later, she invited me on a trip to Merlo, in San Luis, with a travel agency. These shared experiences brought us closer.

Now, my sister calls me once a week, confides in me, and shares her life. I know she used to rely on our mother for that kind of support, and now she turns to me. We love each other deeply, and I have forgiven her for the past.

PREA also helped me navigate challenges in my new living environment. At first, I had difficulties with a housemate who didn't accept me and made things hard for me, but the program provided guidance and support to improve our coexistence. PREA also secured a job for me through the Promover plan. This has been essential, because having work keeps my mind active and prevents me from feeling stagnant.

In addition to the job, I now have a therapeutic community that gives me a sense of belonging and support -- something my sister is not able to provide. While my sister often feels isolated, I feel accompanied. I have the phone numbers of the PREA staff, who are always available if I need help.

I am deeply satisfied with everything the PREA program has done for me. They even ensured that I received a pension, which has given me financial stability. Thanks to them, I feel like I have a future—a life I can finally call my own.

The Promover program provides a salary of 400 pesos, which is very little, for six hours of work split over two days. However, with travel time, those six hours turn into

eight, because it takes me two hours to commute. I don't own a cell phone, and I'm not interested in having one since I don't have many people to call. I do use email, but I only have one contact to write to. At one point, I had around sixty contacts, but I lost access to my email during my hospitalizations.

One of the things I've regained is the ability to travel by bus without getting lost. Once I manage a trip for the first time, I can remember the route to get back.

Today, I have plans. I applied to a theater school using my résumé, entirely on my own. I am a drama teacher and also a kindergarten teacher trained in the Waldorf method. My training may be varied, but it's complementary. I've rebuilt my résumé and feel like a professional in my craft again. There is a theater school nearby where I submitted my application, and I'm being considered. I'm hopeful about getting a new job, and I'm excited about obtaining the national travel pass¹⁶ to explore new places.

The Promover plan is coming to an end, but I have been offered training in library work, and they will pay me to attend. I have also requested computer training because it is something I am interested in learning. They suggested I do both, but it feels like too much. Commuting three times a week while also keeping up with cleaning my home is overwhelming. I get tired easily -- that is one of the lingering effects of being inactive during my hospitalizations. The lack of routine and rhythm means that even six hours of work leave me exhausted. I often need a long nap to recover.

I sleep a lot and spend time watching TV, especially soap operas. They entertain me; they are well-written and interesting. I do not let societal judgments about watching soap operas as an older woman bother me. It is what I enjoy.

Currently, I work on Thursdays from ten to one doing outreach, which involves putting up posters around the neighborhood. It's outdoors, but it does not interest me much. On Mondays, I co-coordinate a workshop called "Breakfast" from nine to twelve. This workshop is much more meaningful to me. I take detailed notes, keep a chronicle of what is discussed, and sometimes we host special guests who present on different topics. It is a fascinating experience, and I feel proud of my contribution. I don't make spelling mistakes, I write very well, and I feel like this is work only I can do.

Today, I have a present and a future.

¹⁶ This is the pass that allows access to public transport for free, which is obtained from the Unified Disability Certificate.

[One year later]

My perspective on PREA has shifted somewhat. At one point, our psychiatrist went on vacation, and the nurse who oversees medication didn't notice that I had missed my dose of haloperidol. That accidental lapse completely changed my outlook. It was like waking up from a fog. I started going out for walks, looking for work, buying clothes, and I even entered a relationship. I also remembered some money I had saved and asked my sister to invest it in something like a fixed deposit to protect it from devaluation.

These five things—walking, working, a relationship, new clothes, and financial planning—were clear signs to me that I felt better without haloperidol. So, I asked for it to be discontinued. Initially, when the PREA general coordinator discovered I wasn't taking the medication, she reduced the dose to two milligrams and allowed me to go on vacation with my boyfriend and some friends. But when I kept insisting that I wanted to stop the medication entirely because I felt better without it, everything fell apart.

I tore up a haloperidol prescription in front of the psychiatrist, and that was when I realized how rigid and discriminatory the system could be. It felt like there was a dogma around medication—an unshakeable belief that we, as PREA users, must take medication for life. The moment I expressed a desire to step outside their framework and move toward a more “normal” life, I was met with resistance and hostility. Suddenly, the staff's attitude toward me shifted, and I began to feel attacked from all sides.

The coordinator even came to my house to address the medication issue. Their approach felt oppressive, as if I were being forced to conform to their narrative. It's like there is a “religion” within the system where medication is the sacred doctrine, and any attempt to deviate from it is met with dismissal or punishment.

Despite this, I have continued to make progress in my life. I am taking on more responsibilities—paying bills for electricity, gas, and the telephone—and I am reimbursed for the cooperative's payments. I have also started volunteering at a Waldorf school, participating in pedagogical meetings and planning a beekeeping workshop for the children. On top of that, I'm studying theater, and we are working on a play that we will likely perform soon.

The doctor has slowly been reducing my medication. I am no longer taking sleeping pills, and I feel calmer. However, I am still on haloperidol, which continues to have adverse effects on me. It puts me in a state of alienation—a kind of hypnotic detachment

from reality. It feels like I am living in the peace of the dead, not the peace of the living.

I keep thinking back to the time I accidentally missed my dose and how alive I felt. I want that version of myself back. My request to discontinue haloperidol isn't a whim—it is based on that experience of clarity and freedom.

Sometimes, I feel like I am 34 instead of 54 because those 20 years of my life spent in and out of hospitalizations feel like they were put on pause. But now, I am beginning to reclaim my time, my responsibilities, and my identity.

Flowers for PREA, flowers for me, requiem in pace.

BEATRIZ Y.

-62 years old-

Interviewed in October 2015

I was born on the same day as Sigmund Freud. I know this because I once took philosophy courses at the University of Buenos Aires (UBA) in the Faculty of Philosophy and Letters. My story begins in 1985 when I received an honorable mention at the book fair “The Writer and Freedom of Expression.” It was for a philosophical essay, and that moment was transformative. I thought to myself, I want to be a very good writer. But I didn’t want to attend those workshops where you don’t really learn anything. Instead, I told myself, I’ll enroll in university. The level is high, and I can choose what I want.

I completed a year of the CBC (the common foundational courses) and then entered the Literature program. But once I was there, I quickly realized that I had to conform to the way the professors thought—Spanish Literature, French Literature, English Literature, American Literature. It crushed my creativity. I couldn’t even string together a sentence anymore. That’s when I decided to switch to Philosophy. At least there, they encourage you to think.

I was born and raised in Merlo, where I lived for 50 years. My heritage is mixed—Polish and Lithuanian on my father’s side, and Italian from Piedmont on my mother’s. My surname is Lithuanian. My grandmother was Polish.

I have a sister who is two years younger than I am, but during the six years I was hospitalized, she never came to see me. That destroyed our bond. Those six years were part of my second hospitalization, which lasted from March 13, 2000, to February 2, 2007. My first hospitalization was much shorter, from December 24, 1997, to March 3, 1998.

My father worked at a bicycle shop, and we were very poor. We didn’t have a proper house until I was 18 years old. Until then, we lived in a wooden house.

In 1968, when President Onganía introduced the pension law that allowed women to retire at 50, my mother received a substantial retroactive payment. That money finally allowed us to build a brick house on the land we already owned. Back then, the Argentine peso was strong.

My mother had retired from the Industry and Commerce Fund. She used to sew shirts for a living. That same year, 1968, was a difficult one for our family. My sister got sick with hepatitis and needed daily injections. Thankfully, a neighbor who worked as a nurse for the Red Cross gave her the injections for free. My sister was often ill as a child—she even showed early signs of polio. Later in life, she endured a bad marriage, staying with her husband and supporting him until his death. These days, she works as a school inspector.

Despite our struggles, I had a beautiful childhood. Of course, there were challenges. There was one girl in the neighborhood who tried to make my life miserable. At the time, I didn't understand why, but later, when I sought help from a psychologist, she pointed out that this girl had wanted to make me suffer. This girl lived in a big, beautiful house, and I lived in a small wooden shack. I was an easy target for her and her friends, who laughed at me for being poor. But even with those moments, my childhood was special. It shaped who I am today.

My parents were wonderful—very understanding. I never had any issues with them. They didn't interfere in my life or impose restrictions like, this friend is okay, that one isn't, or you can do this but not that. I went out dancing and came back at any hour, and they trusted me completely.

After high school, I started working for the Municipality of Merlo. I managed to graduate in just a year and a half, and soon after, I got a job there. Initially, I worked in the theater, and later, I became a librarian. Back then, a friend's mom jokingly called us "the municipality's mobile team" because wherever they needed extra hands, they'd send us. I worked there from 1971 to 1975.

In 1975, I moved to Caja de Ahorros,¹⁷ where I stayed until 1981. I started as an administrator and later transitioned into computing. Eventually, I quit, thinking I would find something better. That same year, I worked as a rural teacher in a small school in Merlo.

I got the job through sheer chance. I was out of work and decided to visit the Merlo inspection office, where I bumped into a neighbor who was studying physical education. When God is spinning things for you, you just know. That neighbor told me, "They're looking for teachers—why don't you sign up?" I only had a high school diploma, but I'd passed some physical education teaching practicums, which helped me qualify under the old rules.

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¹⁷ A financial entity.

For one year, I taught at School No. 27 in Campanillas, a rural area about 40 kilometers inland. The area was very humble—a “swallow neighborhood” where migrant families came to harvest vegetables, sold them wholesale, and then moved on. The school was in a wooden ranch building, and the children arrived on horseback or on foot, often crossing fields in canvas slippers. The farm owners would pick us teachers up by tractor. I taught third grade in the afternoon shift. The school was in terrible shape when I arrived. The previous director had been a guerrilla fighter and had used the school for personal purposes, neglecting the children entirely. They couldn’t even read or write—words like “hoyesdíatal” were scribbled on the blackboard, all jumbled together.

We turned things around. I’m proud to say that we rebuilt that school. Every day, I’d make the kids wash their hands before starting class. Despite their struggles, they were pure gold—eager to learn and so full of potential.

At that time, I was still living with my parents. I didn’t leave home until 1982, when I saw an ad in the newspaper that read: “Tennis teacher needed for an international hotel, Vice Admiral O’Connor 383, Bariloche.” I was a federated tennis player and thought, I want to live that madness.

I moved to Bariloche and stayed for three years. I taught tennis, worked as a tour guide, and did some teaching. It was an incredible time. I made friends who worked at Austral Airlines, and on summer nights, we would play guitar by the lake. As a tour guide, I took people to off-the-beaten-path places like the trout smokehouse and the grotto of Mary Help of Christians, perched 300 meters above the lake. We’d even climb mountains marked with paths that showed exactly where to place your feet.

When you move to a new place, you tend to gravitate toward people from your hometown—it’s a kind of protection. That’s how I met one of my first connections in Bariloche. A week after I arrived, I was having coffee at El Águila when I saw someone I recognized. It was a neighbor from Buenos Aires! I approached him, and he opened doors for me socially and professionally. Thanks to him, I found work and settled in quickly.

Bariloche was a magical chapter in my life—one where everything seemed to align perfectly.

I left Bariloche because I didn’t have a job. It was low season, and when tourism slows down, there’s not much work—people don’t go out much. I couldn’t find a job in Buenos Aires either, so I went further south. A connection from Bariloche actually helped me secure a job in Ushuaia.

In Ushuaia, I worked as a tour guide for three years. Interestingly, I reconnected with a high school classmate there. He was a park ranger on Mount Catedral, and he'd point out tourist spots I could include in my tours. I also met the nephew of a neighbor, who held a police position. He told me, "If you need anything, let me know," and I ended up riding around in the patrol car. People were always a bit startled to see me in uniformed company, but it gave me the freedom to explore.

In 1989, I returned to Buenos Aires and decided to pursue a university degree. A friend from Bariloche had given me this advice: "Bety, go back to Buenos Aires, get a degree, and then come back. A university education is highly respected here."

I started at the University of Buenos Aires (UBA), first enrolling in Literature. However, I quickly became disillusioned. I couldn't connect with the rigid structure of the program. It felt like I had to think exactly like each professor—the Spanish professor, the French professor, the American literature professor. It stifled my creativity.

I eventually switched to Philosophy, but before that, I had an interesting experience in German literature. The professor, who was Polish but had lived in Germany, encouraged me to study German when I told her I was already learning English and French. She said, "Why not add German?" So I did.

At the university, I ended up studying five languages: German, English, French, Portuguese, and Italian. I passed both Portuguese and Italian on my own, without attending classes. I also took courses at the Goethe-Institut on Corrientes Street, becoming a real fan of the German language.

Even though I am Catholic, I used to buy the *Argentinisches Tageblatt*, a weekly German newspaper, from a stand on Florida Street. Through it, I discovered addresses for German churches and hospitals. I'd travel from Merlo to Villa Ballester, where there's a significant German community, just to attend Mass in German. In fact, I was confirmed in a German church in my forties. But after my father passed away, I had to take care of my mother, and I lost touch with that part of my life.

My time at university was transformative. I had excellent classmates and learned so much. But my artistic vein—the spark that had once helped me write essays or interpret texts—felt completely lost. During the CBC (introductory cycle), I excelled in Philosophy and had an average of nine. But when it came to continuing my degree, I felt stuck. After so much effort, I wondered, What now? Quit my degree?

Eventually, I left Literature and fully committed to Philosophy. Around this time, I received a financial-aid scholarship during the President Alfonsín's administration.

But when Menem became president, all scholarships were cut, deemed an “expense for the nation.” That’s when my health began to decline.

At one point, I also enrolled in Psychology. People in the south used to tell me I’d make a good psychologist, saying I had a knack for listening and solving problems. I wrote a letter to the dean of the faculty, asking for permission to study two degrees simultaneously—Philosophy and Psychology. I told myself, Am I going to be a frustrated psychologist, or should I give it a try?

On March 13, 1997, I enrolled in Psychology. When I lived in the south, I earned a good income; they paid me in dollars, and I was able to save. I had a fixed-term account and lived off the interest. But on March 20, just a week later, my father passed away. I had registered for the first Psychology course, which was an annual subject, but I couldn’t attend. I couldn’t leave my mother alone—she was elderly and already had Alzheimer’s at the time. So, I lost all connection with the university. I had to give up my studies. Then, in December 1997, I ended up hospitalized.

The problem was that my sister and I didn’t get along very well. When I came back from the south, she didn’t want me to return to work there. She wanted me to do what she said. Back in 1994, when I returned from Bariloche, she already wanted me to join Esteves. One day, after an argument with my mom, my sister came over to “restore order,” as she put it. My sister always wanted to keep me under her control and didn’t want me to move forward in life. My mother even warned me, saying, “Go to the college café because your sister is going to come and mistreat you.” My sister couldn’t stand my resistance.

At one point, she told me, “Look, I’m going to start psychological treatment, and I need you to provide information about my childhood.” But when I went to meet her psychologist, the psychologist treated me poorly—I didn’t even know why. Then, on June 20, 1994, my sister came to me and said, “I have the psychologist’s diagnosis. You’re paranoid, and you need to be hospitalized.”

Thankfully, at that time, I was already undergoing psychological treatment at a church in Caballito neighborhood. When she said that, I told her, “Call my psychologist,” and my psychologist completely challenged her. My sister never let that go. She kept trying to find ways to hospitalize me, claiming things like, “She doesn’t even greet me,” as if that proved anything. The truth is, I didn’t greet her because she constantly mocked me. When I visited my nephews, she turned them against me. My brother-in-law even called me “the crazy university girl.” It was such a toxic environment that I distanced myself.

But in my sister's mind, my decision to step away meant I was mentally unstable. It doesn't make sense, but that's how she thought.

A psychologist I once saw told me something that stuck with me: "The problems began when Beatriz wanted to be Beatriz." That explained everything. My sister's plan was for me to stay home with my parents while she lived her life—getting married, having kids, and doing whatever she wanted. Meanwhile, I was supposed to be everyone's servant.

The psychologist who told me that worked at the Eva Perón Hospital in Merlo. However, because there were frequent staff strikes and I needed consistent psychological care, I eventually sought help elsewhere. One day, I went to a church and saw they offered psychological counseling. I signed up, and from June to December 1994, they provided me with the care I needed.

Eventually, my sister succeeded in having me admitted to the hospital. She cut off my electricity and gas and took my mother to live at her house. There had been an issue with my mother, and when she told my sister about it, my sister decided to take her home. At the same time, she started connecting with people who had the power to have me hospitalized.

The police came to take me, but first, they sent me to a family court in Morón. When I returned, I was forced to remain in the hospital. The day before, I had spoken with an inspector who lived near my house. By chance, I met him at the police station, and he asked me, "What are you doing here?" I told him what had happened, and he used his influence to help me, saying, "Go home." Even the forensic doctor said to me, "Your family wants you hospitalized, but I see you're doing fine. Go home—I don't want to end up in prison over this."

However, the police kept me under surveillance. I was followed and monitored until one day, a cashier at the supermarket overcharged me. When I complained, that became the excuse to hospitalize me. The cashier was working with the police, and after I confronted her, she ran out and spoke to an officer who was waiting outside. That's how they took me.

I was in the hospital for three months. During that time, I attended church, felt fine, and didn't have any problems. When I was discharged, I returned home because my mother had specifically asked for me. She ordered my sister to release me. My sister was my legal guardian at the time.

The second hospitalization happened in 2000. Between the first and second hospitalizations, I lived with my mother. The second time, I was hospitalized because I called a neighbor to ask for his daughter's phone number, which my sister had forbidden me to do. She didn't like that I called him, so she took my mother back to her house and found a way to have me admitted again.

In 2004 or 2005, my sister sold our family house. The court in Morón, where I went to collect my pension, had told her not to sell it, but she did it anyway. She admitted me to a hospital and placed my mother in a nursing home. Later, she took my mother out of the nursing home so the court wouldn't interfere with her anymore. When my mother passed away, my sister didn't tell me. I don't know what year my mother died or where she's buried.

The worst part is that my sister sold the house without telling me and kept my share of the proceeds.

In 2006, I was about to leave the hospital, and the curatorship in Morón was preparing to grant me a subsidy. One day, my brother-in-law showed up with a photocopy of my ID. My ID and university ID were still in my sister's possession. The head of the ward, who cared for me deeply, called me and said, "Your brother-in-law came this morning with some papers to claim your pension, but don't get your hopes up—you're not going to see a single peso of that money." He explained that they intended to keep the money for themselves. Then the ward head asked me, "Do you want me to have your sister removed as your guardian?" I said, "Yes," and she reported it to the doctor.

The situation was so harmful, so toxic. Eventually, the curatorship of Morón became my legal guardian instead. The court then granted me my pension, and that is what I live on now.

When I was in the hospital, I did everything: I washed the dishes, dried them, made the beds, and prepared breakfast for the cart to come around. I worked closely with the nurses, helping on various tasks. The head nurse, for reasons I still don't know, took a liking to me. Of course, there were others I couldn't get along with, and she would say, "Don't bother her."

I left the hospital because I was part of the PREA program, which involved taking a course to eventually qualify for housing. It took us three years to get out, and on February 2, 2007, we moved into a brand-new apartment in Burzaco. Four of us have always lived together, and we get along very well. We met during PREA and chose to live together. There are things in my life that I can't fully understand, but I believe it's God placing the right things in my path.

Of course, at first, there were many challenges with living together. Imagine—after six years in a hospital, your mind becomes atrophied. We made mistakes and had problems, mostly about small things. For example, one person would leave something in one spot, and another would move it, and that's how arguments would start.

When I left the hospital, I also went back to university at UBA. I started attending the language laboratory and studied English there, eventually completing the program. I had also tried to resume Philosophy, but it was very difficult for me. I couldn't concentrate or understand the material. I don't know whether it was the hospital environment or something else, but I struggled to think clearly and didn't realize things as I used to. I felt like a mediocre student, so I decided to focus on something more manageable—English.

In 2011, I received a scholarship, which helped me study English. I attended classes for three years, once a week for four hours, until I completed the program. Returning to university was traumatic in many ways because I was surrounded by 18-year-olds who had their own prejudices. Since I was older, they didn't pay much attention to me.

During the summer, I taught tutoring classes at the library. The students I helped passed their exams, and Vanina's [*] daughter even received a 10 in English. That made me feel very satisfied. I also helped summarize Anthropology material for Vanina and Lucrecia, a woman who also lived at the hospital and who now lives next door to me. I supported her with her preparation for Law school.

Currently, I'm part of the Promover program as a library assistant. I'm working on a project to create invitations for people outside PREA, inviting them to visit the library. We started the project on August 28. I work on Tuesdays and Thursdays from 9 to 12. I had previously worked at a library in Merlo, so I'm comfortable shelving books. However, I'm still learning how to classify them properly and label them with the numbers for the spine, like 82.3—I don't yet know how to do that. The Promover program lasts for two years.

To conclude, I would say I have always pursued what I wanted—not out of whim but from a genuine desire to explore new worlds. And I have always surrounded myself with good people.

INÉS

-59 years old-

Interviewed in May 2015



I was born on September 22, 1956, in Lomas de Zamora. I had a very happy childhood. I grew up there until my father died of cancer at 59. I was 24 at the time. That's when our family fell apart—it felt as if I had lost a leg. My family was made up of my father, my mother, my sister (three years older), and me. My sister is an educational psychologist and holds a degree in Education Sciences. She is separated and has three children.

In 1973, I met my first boyfriend in Bariloche, but I turned him down because I was shy—I was just over fifteen. Later, while in high school, I developed anorexia nervosa. I had always been thin. They treated me, and I recovered, but I am being treated again now because I have become very thin once more. At eighteen, I went through a period when I refused to eat. I never made myself vomit, but I weighed only 37 kilos. Now I weigh 46.5. I remember feeling detached from the world, as if I were behind glass, and my legs would shake when I walked because I was so frail. At 37 kilos, I was a walking corpse.

After my graduation trip, the endocrinologist prescribed an appetite stimulant—I ate everything in sight and gained 10 kilos in a month before stabilizing. But I've always

been thin. Now, in the PREA program, I tend to swell up. I eat well, but I never gain weight. I have been a vegetarian for about 30 years—I barely remember what meat tastes like.

I once worked in an architecture studio drawing plans and visiting construction sites. When one of the architects decided to open his own studio, he took me with him, but work dried up after a few months. Some friends were opening a restaurant in Villa Gesell, so I joined them as a waitress. A jazz band used to eat there every day, and one of the musicians, a saxophonist, told me he had gone to Spain, become a vegetarian, and now woke up full of energy at six every morning. I had never liked meat—even though my father had been a butcher—and that summer, I decided to stop eating it for good. I sometimes joke it's a poorly resolved Oedipus complex.

My father's death marked me deeply. I had always felt my mother favored my sister, and after he died, I was left feeling alone against both of them. My father was a wonderful man—everyone said so when he passed. He was generous and kind. Sunday would have been his birthday. I was very close to him; he loved me dearly.

I remember once, when I was in architecture school, I stayed up all night drawing and began to cry because nothing was working. He got up and told me, "I want a happy daughter, not an architect daughter." That was my father—warm, wise, and loving. Losing him felt like being left alone in the world.

My mother and I got along well. She never worked outside the home but was very capable—she cooked beautifully, sewed all our clothes, and took us to the girls' theater for children's plays. We also had a country house in Brandsen, where my father raised rabbits and bees, so I spent many lovely summers there.

My father had two brothers who ran a butcher shop and general store together when they were single. That's how my parents met. Later, he opened his own butcher shop in Lomas de Zamora, almost like a branch of theirs. I was lucky—my dad was home most of the day running the shop.

Eventually, he began investing with a group of Spaniards who owned car dealerships and restaurants in the Recoleta neighborhood. A year before his death, he left the butcher shop to focus entirely on these investments. Sadly, he didn't live long enough to enjoy the fruits of his work. My parents often argued about it—my mother wanted him to travel, but he was determined to keep investing. When he finally could have enjoyed his success, he passed away. Afterward, my mother traveled alone—to Europe and Miami.

Now she is 88 and lives with my sister. We barely speak. The last time we did was when I called to ask about my nephew Fernando, who had been battling cancer. My mother answered. I asked, “Mom, does Fernando still have cancer cells?” She started crying and said, “No.” I cried too. That was our only contact. It’s hard, but I know resentment leads nowhere.

I graduated as an architect in 1981, although my father never saw it. I had always said I wanted to become one. My mother used to say I barely spoke as a child but always had a pencil in hand. I studied at the University of Buenos Aires (UBA), finishing in six years—one year dedicated entirely to studying, then working while studying, which added a year. By the time I graduated, I already had work experience, which helped a great deal.

During that time, I reconnected with Héctor. It was a beautiful relationship—my first sexual experience. He was a sociologist who had spent eight years exiled in Mexico for political reasons. We had first met as teenagers in a social action group that worked in slums, organizing libraries and activities. When the group dissolved, we stayed in touch by letter. When he came back, we fell in love, but a year later, he ended the relationship.

I worked as an architect for eight years, sharing a studio in Temperley with a partner. Then I discovered yoga and fell in love with it. I trained as a yoga teacher, and one day, I called my teacher and said, “I want to be a yoga instructor.” She replied, “You’ll be a great one.” From then on, I dedicated myself fully to yoga, leaving architecture behind. I opened a yoga institute in Lomas de Zamora and taught there for ten years. I even managed to buy a house. I traveled often to Brazil to study and teach, following the method of Master DeRose, whose practice involved choreographed sequences. I became a demonstrator for these sequences in Argentina and Brazil—it was one of the happiest times of my life.

I had substitute teachers who covered for me when I traveled monthly to Brazil. I was well-loved there, often staying with friends, and I also organized yoga courses in Argentina. At one point, I produced a series of instructional videos featuring my teacher, but the project left me in debt. I mortgaged my house, but the debt grew beyond its value. To cover the difference, I mortgaged a quarter of my mother’s house. In the end, I lost both. That was a breaking point in my relationship with my mother and sister. My mother was furious and never forgave me. I didn’t see my sister for eleven years. Losing them was as painful as losing the houses.

Later, I founded “La Casa del Tantra” in Belgrano, Buenos Aires, which became very successful. People came from all over the world, and I even wrote two books. But I fell

ill and went into debt again, which led me to move to Bariloche.

There, my illness worsened. I began feeling watched and hearing voices. It might have been exhaustion, but I couldn't work anymore and sank deeper into debt. A friend, Jorge, said, "If you can't pay for your house, you'll always have a place to stay and food in Bariloche." I sold everything and moved there. Eventually, I suffered another breakdown and was hospitalized for three months in a women's ward that included mental health beds.

When it was time to leave, I had nowhere to go. I clashed with the psychiatrist, who only prescribed medication and never talked with me. After I complained to the hospital director, she became angry and suddenly discharged me, sending me to Buenos Aires with just a bus ticket—no documents, no medication.

When I arrived in Retiro bus station, no one was there. A police officer helped me find my way to my godmother's house, and from there, I called my sister. She picked me up—it was December 29, her birthday. We spent the day trying to find medication, but no hospital would give it to me. The only option was to be admitted to Esteves Hospital. It was supposed to be temporary, but I stayed three years.

Life in Esteves was very hard. I was distressed and severely underweight—only 40 kilos. The staff helped me eat and regain weight. For months, I mostly slept; I felt like that was all I could do.

Leaving Esteves was a blessing. I had nowhere to live, but thanks to the PREA program, I was discharged during Holy Week in 2010. After interviews and training, they offered me housing.

I first lived in Avellaneda for four years. When our lease ended, the group was split, and I moved to Escalada, where I am very happy now. I love the neighborhood. I have a daily routine—going to church, walking, cleaning, and having breakfast at the Community Center Libremente, where people encourage me to eat more.

In Avellaneda, I lived with three others, and we got along well, but when the owner's husband died, she didn't renew the lease. During that time, I had a boyfriend, a florist. I used to walk 80 blocks every day from Avellaneda to Wilde, and that's how we met. We dated for a year, but his children disapproved. Later, I was with a waiter who mistreated me, so I left him. Then I reunited with Félix—my great love.

With Félix, I experienced Tantra as a sacred, meditative form of intimacy—something beyond physical pleasure, a spiritual connection where love already exists. It was the

most profound experience of my life. We wrote two books on Tantra together.

Félix was twenty years younger than me, and his parents opposed our relationship, making his life miserable until he left. We didn't see each other for eight years but stayed in touch by email. When we finally met again, it was wonderful. We have now been together again for over a year and a half.

My sister is now a grandmother, so I'm a great-aunt! We see each other weekly and talk daily, though I still don't see my mother, who has refused to meet with me.

As for my health, I take only one lorazepam and one risperidone daily. I'm stable—I haven't heard voices in years. I'm still thin but healthy, and I walk a lot.

I currently work in the Promover program in a library initiative funded by the Ministry of Labor. We were trained in cataloging and inventory and receive a stipend. I'm reading a Mario Benedetti anthology right now. The contract ended recently, but they new paid training is being planned.

I also take a computer class, attend a writing workshop, and manage the house. I haven't practiced yoga since 2013, when I fractured my elbow. I had surgery at Fiorito Hospital and now have a prosthesis, but it causes pain, and they may remove it.

My daily life is simple and fulfilling. I wake up around 6:30, have mate, bathe, tidy up, chat with my roommate Graciela, then head to Librementé with my sandwich for breakfast. I work in the library until noon, then walk the 50 blocks back home to Escalada. Walking clears my mind and fills me with energy. I spend the afternoon doing chores or going for walks and attend church at 7 PM.

I'm lucky to have supportive friends and family. Jorge, my friend from Bariloche, now lives in Buenos Aires; we meet often—he's studying to be a chef. My friend Alicia, whom I met at the hospital, now works caring for others and even bought a car. My cousin helps me financially sometimes, and we meet for coffee.

Looking ahead, my plans are simple: to keep growing, continue my relationship with Félix, and stay engaged in meaningful work.

SUSANA BEATRIZ

-63 years old-

Interviewed in December 2016



I am a lawyer, having graduated on November 7, 1978, from the University of Buenos Aires (UBA) with a GPA of 8.50. I narrowly missed being named second escort by just a few points. My academic journey was marked by dedication and hard work. I earned a 10 at the university entrance course, under the guidance of the renowned Dr. Del Campo Wilson, who was known throughout Argentina for his rigor and high standards.

During my studies, I had the privilege of taking “Obligations” with Dr. Llombías as professor and Dr. Alterini as adjunct. Most of my exams were taken libre (without attending classes), and my grades were consistently high—mostly eights and tens. In “Philosophy of Law,” with Dr. Goldschmidt, I received special recognition from the department.

I decided to study law for two reasons. The first was watching Perry Mason, a popular series at the time, when I was eight years old. Mason, a criminal defense attorney, had an incredible ability to uncover the real culprit in seemingly unsolvable cases. That sparked my fascination with the legal profession. The second reason was more

practical: I struggled with mathematics in high school, and law was the only program that didn't require a math entrance exam. That realization sealed my decision.

From 1979 to 1989, I practiced law independently, with my office located at Corrientes and Pasteur, in the Once neighborhood of Buenos Aires. My areas of practice included civil, commercial, and labor law. I handled contentious divorces, evictions, probate cases, labor disputes, condominium divisions, and property claims, among other types of litigation. Most of my cases were filed in La Plata city, as many of my clients were neighbors from Villa Domínico in Avellaneda. At that time, Avellaneda cases were heard in La Plata. Later, the judicial districts were reorganized, and cases were transferred to Lomas de Zamora. However, by then, my career had already been interrupted by illness.

In 1989, I was diagnosed with schizophrenia and admitted to a private clinic in Bernal, where I remained for nearly a year—from April 14, 1989, to March 2, 1990. The clinic primarily treated bankers, as my parents were part of the banking community: my father was Chief of Staff at the Boston Bank in Avellaneda (now Standard Bank), and my mother, though a homemaker, was active in the community through his position. I was an only child.

The clinic's approach was very different from that of the Esteves Hospital. It held weekly patient assemblies every Tuesday, and on Fridays, families joined as well. My parents attended regularly—though toward the end, my mother came alone. These sessions addressed family dynamics and facilitated the transition back home. Weekend passes were granted, and the duration increased as discharge approached, allowing patients to test reintegration into daily life.

Although I was successfully discharged, my legal career suffered. My clients—neighbors who knew of my hospitalization—gradually stopped coming to me, until I was left without work. For a time, I decided to rest, but I later transitioned into marketing. I worked in various roles as a promoter and street vendor, since most available jobs were in sales. My parents encouraged me to work in an office, but I lacked computer skills, and they didn't understand the importance of learning them. Marketing became my profession for another decade, until 2006.

During this period, I received outpatient treatment—first at the Banking Polyclinic and later at a private clinic in Banfield. I also cared for my mother, who was hemiplegic, until she was admitted to a nursing home. I followed the guidance of Dr. Ruiz Alonso, who visited her regularly through the Bank's home-care program. He managed her medications, blood pressure, and overall care until she entered the nursing home. My mother passed away there on October 5, 2009. At the time, I was hospitalized at

Esteves, but I was allowed to attend her wake.

My father, on the other hand, suffered from prostate cancer, which eventually led to a stroke. He experienced six cardiac arrests in a single day and passed away at home on March 2, 1995. Losing both my parents was extremely difficult, especially since I had no other close relatives.

On January 8, 2006, I suffered a major decompensation and was admitted to Esteves Hospital. I remained there until March 30, 2010, when I was discharged by Dr. Fabián Camino, head of Ward Two. The process began as a 15-day leave, but after he submitted all the necessary paperwork, my hospitalization was officially ended. Since then, I have not been hospitalized again.

On October 28 of this year, I successfully passed an interdisciplinary evaluation with excellent results. This assessment granted me partial legal capacity under the framework of the new Mental Health Law. My case file has been updated to reflect a legal-capacity process rather than a declaration of insanity. A formal judgment will define my rights, with the possibility of gradually restoring full capacity after further evaluations over the next three years.

During my time at Esteves, I developed a close friendship with another patient who was a great source of support, especially after my mother's death. A retired nurse, Ana Pérez, even accompanied me to the wake. My friend and I connected deeply through our shared experiences. Sadly, I recently learned from a nurse that she is now severely decompensated and has a brain tumor.

Hospitalization was a deeply difficult and alienating experience. I spent four years and three months there, feeling repressed, isolated, and cut off from society. When I was discharged, my first goal was social reintegration. I began visiting restaurants to observe how people interacted—how they ate, talked, and behaved. My aim was to relearn social cues and regain the confidence and demeanor I once had as a professional, to minimize the visible signs of my illness.

There is no denying the social marginalization that follows psychiatric hospitalization. Those of us who have been institutionalized face discrimination, whether overt or subtle. For example, when someone sees the disability pass, they think, "This one is from Esteves," so the pass often becomes a mark of stigma.

Being hospitalized also meant being disconnected from the outside world. At Esteves, access to news was restricted. The television was occasionally on, but mostly for movies or soap operas. Whenever the news came on, it was quickly turned off, and we were

sent to bed. As a result, I lost touch with current events—both political and social.

All of this distanced me from social life. When I reentered society, I had to make a conscious effort to reintegrate—not only to be part of society again, but to be seen as “normal.” I consider what happened to me an illness that, according to specialists, is now stable. I take my medication consistently and have never stopped. People say I speak and act normally, and that motivates me. My goal is to become the person I was before the illness. To me, it was an accident.

It was Dr. Fabián Camino who suggested I join PREA to transition out of hospitalization. With no family left to rely on, I worked hard to achieve that goal. I put great effort into the program and eventually earned my discharge. For example, I served as group coordinator every Sunday at the request of Graciela Silberman [*]. On Fridays, a topic was assigned, and Graciela would select a coordinator to lead smaller groups of three or four people. The coordinator was responsible for supervising, reviewing, and correcting the group’s work, which was then presented and evaluated by Graciela the following week.

I contributed actively by sharing valued insights, and although I wasn’t always easygoing, I completed every task assigned. If I had to play ball, I played—even if I didn’t enjoy it. I was always engaged and responsible. I attended regularly, even when unwell. The only time I missed sessions was after an accident when I burned my chest with boiling water in the shower and had to stay home for 15 days. Those were the only absences permitted by the ward. Otherwise, no matter how sick I felt—with a cold or the flu—I always went. I worked harder for my discharge than many others.

After leaving Esteves, I lived in Avellaneda until July 18, 2014. Then I moved into another home with a woman who later decompensated. I then lived alone there until September 16, 2016, when fainting spells forced me to relocate to my current address. The best place I lived was at 1736 May 24 Street. I lived there alone and felt at peace. I ate well, as confirmed by the doctor during checkups. It is untrue to say I didn’t eat properly. Living there, I had the freedom to go out whenever I wanted—to eat out, shop, or simply spend the day outside. For me, It was the best home I ever had.

The fainting spells were never explained. Everything seemed fine, and then suddenly I would feel dizzy, faint, lose consciousness, and experience involuntary urination, as if I were about to die. Despite extensive testing, no cause was ever found.

After leaving Esteves Hospital, I worked for the magazine “Made in Librementé,” part of a vocational project. I took meeting minutes, conducted interviews, and typed up articles for publication. Marisel [*] reviewed the drafts before they were published. I

also distributed the magazine in my assigned area. I worked there beginning in 2009, while still hospitalized, until December 2011, when I resigned because the pay—200 pesos—was too low for the workload.

Now, I support myself with a non-contributory pension and an externalization subsidy. I also have a derived pension in process. Additionally, I attend a singing workshop and performed at the December 3rd celebration, where I sang “Yo Soy Aquel” by Raphael. The song, written by Manuel Alejandro, is part of Raphael’s repertory. I chose it because it is a pure love song from the 1960s—a time of genuine love—and Raphael, along with Tom Jones, was one of my idols. The coordinator, Cecilia [*], was delighted with my performance and told me so afterward. I even received a standing ovation.

My resolution for 2017 is for it to be a more prosperous year, despite the challenges posed by the current national administration. My greatest hope is to receive the derived pension. That is my wish.

GETTING A JOB AT ALL COSTS

81

ANGIE

-61 years old-

Interviewed in December 2016



To tell my story, I have to go back to my early years. I was born at the Córdoba Sanatorium in the Federal Capital, and shortly after we moved to Remedios de Escalada Oeste, my hometown. It was a working-class railroad neighborhood. My father was an exception, as he worked in public administration. He was also a poet, writer, songwriter, and a member of SADAIC¹⁸. My mother was a homemaker who had dreamed of becoming a midwife, but my grandparents fell ill, and her plans were cut short. By the time she had me, it became even more difficult for her to pursue her goals.

At home, we lived with my Aunt María, whom I called “Aunt Mía.” My father’s name was Victor, and my mother’s name was Armonía. I wasn’t fortunate enough to have siblings, but Aunt Mía’s son lived with us until I was 24 or 25 years old. He was also my godfather. When he got married, he moved about ten blocks away, so we stayed close and saw each other every weekend.

¹⁸ SADAIC Argentina Society of Authors and Composers

I also have family in Chile. During the Spanish Civil War, my Aunt Emilia's husband fought against Franco's forces and was threatened with death. He had been a baker who owned his own bakery. When he and his wife, Aquilina—a devout Catholic and skilled seamstress—came here, they rebuilt their lives. This uncle was a close friend of Pablo Neruda, whom he had met in Spain. Pablo would say my uncle wasn't "born to work," so my uncle did various jobs and often fed Pablo. One day, Pablo told him, "A ship is leaving for Chile," and that's how they emigrated and eventually settled there.

Once he was well established in Chile, my uncle maintained close ties with his comrades from Argentina, Latin America, and Spain. Some people came to Chile while others returned to Argentina. Eventually, arrangements were made for my aunt and her daughter to join him, and they settled in Chile as well. My cousin married a Chilean man from a prominent family, and they had a daughter. Five years ago, after fifty years without contact, I reconnected with her on Facebook.

Aunt Mia eventually returned to live in her grandparents' house after her husband passed away, leaving her with many debts. She had been a Peronist delegate, despite belonging to the Radical Civic Union. Her son was part of the Radical Youth, but Aunt Mia had been threatened with losing her job if she didn't switch to Peronism.

Aunt Mia was like a second mother to me. I adored her—she was just like the caretaker women in American movies who cherish the children. I had my mother's maternal presence, but I was inseparable from Aunt Mia. I would cook, crochet, and read books with her. She sparked my love for reading. We had a large home library, and the house next door, which my grandfather had bought for my Aunt Emilia, also had an extensive collection of books. That house was rented out to tenants, but for me, playing with the tenant's son was just an excuse to explore the books.

I became obsessed with those books and desperately wanted to learn how to read. At four years old, I would compare myself to six-year-olds and argue, "Look, I'm the same height! I have to go to school." My dream was to study, learn to write quickly like my aunt, and read and organize all the books in our library.

After that, I attended Primary School No. 45, a regular public school where most of the students came from humble backgrounds. I remember a beautiful trip we took — something unheard of at the time. We went to Mar del Plata for seven days as part of an award for having the best grades.

Later, I moved on to high school, but I couldn't get into the school I wanted because I lived outside the designated area. Determined, I convinced my dad to speak to the

principal and request an exam. My dad said, "You're crazy. There's no vacancy; what exam?" But I insisted: "Yes, yes! Go talk to her—I have to get into that school."

Reluctantly, my dad called the principal. It turned out she was very preoccupied with her upcoming retirement. My dad offered to help her navigate the process, but he also asked her to give me a chance to prove myself. He explained, "My daughter dreams of studying there." She responded, "You know how strict the requirements are." My dad persisted: "At least let her see the school and try." Finally, she said, "Fine -- bring her here on a specific day, and we'll talk."

I was thrilled. The school was enormous, and when we met the principal, she told me, "I'll give you an exam, but the most important thing is that you write me a letter introducing yourself, asking for the spot, and convincing me to approach the inspector to grant you admission. I'll leave you alone to write, and when you're ready, knock on my door."

I was confident in my writing skills, but I knew I had to persuade her. Before leaving, my dad gave me some parting advice: "I've said my part—now it's up to you." I wrote her a letter explaining everything, and she was impressed. I got the spot, and it was an emotional moment for me.

High school was a big transition. That's where I met Antonia, who would become a lifelong friend. We wrote together and shared our stories during recess. I also became close with my seatmate, Jean, of Irish descent, who is still a dear friend today. I pursued a physical-mathematical orientation in high school because I aspired to become an electronic engineer or nuclear physicist at the Balseiro Institute.

When I was fifteen, my aunt died of cancer. It was devastating, but she had attended my fifteenth birthday party, which was beautiful. At that time, I had switched to studying English and piano. However, after her death, I couldn't keep playing piano. She used to sit in the living room where the piano was, and her absence made it unbearable. I did continue studying English and eventually graduated as a teacher. A year before completing my studies, my mother was diagnosed with leukemia. Within a month of her diagnosis, she passed away.

Years later, my father remarried. He reconnected with a woman who had been his girlfriend when they were in their twenties. They got married, and she came to live with us. Through her nephew's wife, I met my first boyfriend. We were together for a while but eventually went our separate ways. Later, I met the president of Catholic Action at church. He was a talented writer and was studying to become an accountant. We dated for about three years.

By then, I had already started university. Before that, I worked as a teacher at ENAM, a school in Lomas de Zamora. However, because of health issues, I couldn't complete my internship, so I wasn't granted my teaching degree. When I tried to enroll again, two professors encouraged me instead to pursue university studies in educational sciences. My dad supported the idea, saying, "That's a wonderful career—your mom would have loved to see you do it too. I always wanted you to become a teacher. I'll look into the requirements for you." I completed the CBC (the basic university cycle). During that time, I was dating a soldier, which my father disapproved of. But my stepmother supported me. We shared a maternal bond, and her encouragement helped me through this period of my life.

Sad, difficult years followed, marked by my health problems and my father's declining condition. During that period, I advertised services like Chinese gymnastics in publications such as *Segunda Mano*, *Clarín*, and *Uno Mismo*. I had been trained in Chinese gymnastics, Japanese massage, waxing, aesthetics, and masophylaxis. One day, I received a letter from a place in the capital called the International Beauty Circle, expressing interest in having me join their staff. I went there only to study, but the director insisted that I teach. I still remember the joy of preparing my first class.

I attended many workshops, but I avoided relationships. I told myself, "Until I fall in love with someone who supports my career goals, I don't want to get involved with anyone."

When I was about 30 or 32, I spent two or three years searching for a stable job. I would leave home at 6 a.m. with that day's *Clarín* newspaper, just like many others in the same situation. I worked at Aeroparque from 9 a.m. to 11:30 p.m. every day, advising the public without a break. Exhausted, I would take the 160 bus back to my house in Remedios de Escalada Este, where we had moved. I lost weight from the stress. That house is now inhabited by some women from PREA.

I was deeply bitter during that time because I desperately wanted a steady job. For years, I berated myself for leaving university because of my boyfriend. Meanwhile, my father fell ill and needed prostate surgery. He encouraged me, saying, "Keep studying, keep looking for work." But his recovery was slow. After the prostate surgery, he needed gallbladder surgery, and he was hospitalized for a long time. We cared for him at home. He was allergic to dust, just as I was sensitive to temperature changes, and I administered his allergy shots.

Eventually, my father passed away. He died on the same day as my godfather, something people had always predicted would happen. My godfather had passed on July 6, 1976, and my father died on July 6, 1989, at the same time of day. It was devastating. I lost

both my emotional and financial support, leaving me with an unbearable void.

Six months later, my stepmother moved in with her family. Although we maintained a cordial relationship, it became distant, even though she lived only two blocks away. I was unemployed, relying on my last savings. She told me, "I'll give you the house and the rights to your father's SADAIC royalties, but I won't give you his pension." The royalties were minimal, and she had her own pension. I replied, "I'll manage as best I can. I don't have a job right now, but if you help me with the house, that would be a great support for me." After that, I never saw her again.

Dark times followed. I faced hostility from neighbors and extreme poverty. There were days when I had nothing to eat. I had to ask the neighbor across the street for leftover bread or a cup of coffee with milk. Sometimes I asked the butcher for a handful of ground beef to put in a loaf of bread or for a slice of blood sausage. At first, I could pay, but eventually, I couldn't afford it anymore. There were times when I went four days without a proper meal, surviving only on water and occasionally begging for food. At one point, I found a job in Lanús. I went to my cousin—my godfather's widow—and asked her to help me buy a telephone line so I could work and afford my travel expenses. That day, an argument broke out because she was very upset. Her son, my godson, attacked me. He tried to kill me, grabbing me by the neck and smashing a window with my head, nearly gouging out my eye. After that, I left and didn't return for years.

Throughout all of this, my neighbors began targeting me. Once, I forgot my purse and couldn't remember where I had left it. Inside, I had both keys to my house. It seems someone made a copy because one day I woke up to find my front doors wide open. They had started robbing me. They took many of my belongings—items from my grandmother, my mother, books, table linens, glassware.

From then on, life became very difficult. Things escalated until, one day, the police came without any explanation and said, "Come on, let's go." I didn't ask questions. I suspected it was because my neighbors had accused me of being a nuisance. They harassed me constantly—throwing strollers at me while I was walking, as if hoping I'd harm a child and get in trouble. A neighbor threw buckets of water at me as I passed by. They insulted me, yelled terrible things, and even threw garbage onto my roof. The children climbed onto my roof with sticks, damaging the waterproof membrane and causing leaks.

Eventually, the police showed up at my door and took me to Esteves.

For years, I had gone to the municipality to ask for work. I signed up for cleaning jobs, administrative positions—anything—but nothing ever came through. Desperate, I went to the office of Quindimil, the mayor of Lanús, who had been in office for twenty years. I spoke with his secretary and explained my situation—that I was educated, looking for work, and alone. The secretary told me, “Would a letter of recommendation help? Something you can present wherever you want?” I said, “Yes, that would be ideal. It could open doors for me.” She told me to return in ten days to pick up the letter.

But the very next day, the police came again. I got into the patrol car and told them, “Take me to the municipality of Lanús. The mayor has prepared a letter of recommendation for me,” thinking this would prove I wasn’t adrift. They responded, “We know where we’re taking you.” That’s when I realized things were taking a dark turn.

We arrived at Esteves. I didn’t know what it was at first. I’d never been there and had no reference points. I just saw the building and thought, “This looks like an asylum.” It was October 27, 1997, at 11 a.m.

When they brought me inside, I was confronted with chaos—barefoot, dirty, drooling women came toward me. They escorted me to the admissions area. I was frantic, telling the doctor about my desperation. I said, “If I have to stay here, they’re going to rob me blind. They’ll break into my house. I have two cats that are giving birth!” The doctor ignored me.

I couldn’t even look at that psychiatrist; whenever I saw her, I wanted to spit at her. I tried to reason with her, but she said, “You must stay here. We need to run tests, including toxicology. There’s a police report from your neighbors. You’re staying.”

They processed my admission, but I managed to escape. Alicia, a staff member who later became an acquaintance, recognized me and started shouting. She grabbed my arm as I was about to leave the premises, called for the guards, and they carried me back inside, lifting me by my arms so my feet couldn’t touch the ground.

I yelled at them, “This is illegal! What you’re doing is repression. This is an unlawful deprivation of liberty! I haven’t killed anyone; I haven’t stolen anything. My only crime is being unemployed!”

They confiscated my wallet, my university ID, and all my belongings. I asked another patient for a sheet of paper and wrote a message: “I want to speak to the hospital director. This is an unlawful deprivation of liberty. I demand a lawyer.” When the staff left the office, I sneaked in and pinned the note to a corkboard. I included my name and ID number.

They had taken my ID, my wallet--everything. At Esteves, they don't return your belongings until you're discharged. They eventually gave my wallet back, but the money was gone. They had also taken my purse, my cosmetics, and a pair of scissors I carried with me—a keepsake from my father. They told me they had confiscated it to prevent me from harming myself, although I had no intention of doing so.

Years later, when I was finally discharged, I asked about the scissors. They simply said, "It disappeared." It was devastating because it had been a cherished memory of my father.

From there, I was taken to admission, holding onto the hope that I would be released within a month. Within fifteen days, they had run every possible test on me—blood tests, liver function, mammogram, colposcopy, Pap smear, lung X-rays to rule out tuberculosis. The doctor eventually came to me and said, "Your test results are excellent."

I replied, "Great, then I'm ready to leave."

But he shook his head. "No, you can't leave yet."

Confused and growing impatient, I asked, "What do you mean I can't leave? I'm fine. There's no reason to keep me here."

He explained, "This isn't about your health. There's a legal case. Your neighbors have filed a complaint, and they don't want you returning home."

I was furious. "I don't care what my neighbors want! That's my house. I need to go back to my life!"

But he stood firm. "No. Legal matters like this take time."

From there, they transferred me to the Ayerza Ward, where I remained hospitalized for two and a half years. During that time, they asked me for phone numbers of family members. The only ones I could remember belonged to two cousins. My cousin—my godson's mother—eventually came to pick me up but refused to take me to her home. Instead, she brought me to our other cousin's house. She made it clear that she wouldn't let me stay with her, saying she didn't have a proper bed for me and wouldn't leave me to sleep on a mattress on the floor "like a dog."

So, my second cousin took me in temporarily. I stayed with her until Sunday evening at 6 p.m., when they came to pick me up and take me back to the ward, just in time for the 7:30 pm dinner. I was allowed to stay a bit longer—up to a week—but never more than that.

While I was stuck there, my worst fears came true. My absence emboldened my neighbors. They broke the locks on my house and ransacked it. They looted everything. I had been admitted in late October, on the 27th. My overwhelming desire was to return home—not just because of the house itself, but because of my kittens. They were living beings that needed care, and I was desperate to make sure they were fed. Beyond that, I longed for the freedom to move around, to sleep in my own bed, even if the walls were peeling or the roof leaked. My home, no matter its flaws, was my sanctuary.

By December, I thought my time at the hospital was coming to an end. One day, I noticed the doctor and nurses bustling around. I felt hopeful. I thought, “Finally, I’m being discharged.”

But no. That hope was crushed.

Instead, they told me to “pack my things.” At that point, I had almost nothing left: two skirts, two blouses, a pair of pantyhose. My belongings were stolen almost daily.

We each had a small wooden cabinet with a padlock to keep our things secure, but it didn’t help. The locks were constantly being broken. I never who did it, but the staff insisted it was the patients. I couldn’t imagine how they managed it—they didn’t seem strong enough to break locks. Maintenance would come, replace the padlock, and by the next day it would be broken again.

Sometimes, they took clothes. Other times, they rifled through wallets and took whatever cash they found. On rare occasions, they left your clothes untouched. But the thefts never stopped. It was relentless—a constant cycle of anxiety and anguish.

And so, when I saw all the movement and they told me, “Pack your things,” I gathered everything I had into a bag. I asked, “Did my cousin come to pick me up? Am I going home?” The nurse replied, “No. This is going to be a long stay for you.” I asked, “But where are we going? Why? If all my tests came back fine, why can’t I leave?” She said, “We’re transferring you to another room. Follow me.”

I followed her, and they moved me deeper into the hospital. They put me in Ward One. I didn’t know anyone there because we didn’t have contact with the other wards, except occasionally when we went to the park and were told not to wander too far. Sometimes

a girl would approach to ask for a coin, a cigarette, or just to say something.

A few days later, a girl came over to greet me. She was making pennants, and I joined her, helping to decorate the room. Christmas was approaching, and soon they would start putting up the tree and preparing for holidays. I still held on to the hope of spending Christmas at home or at my cousin's house.

Then I met another girl. At first, I thought she was unwell because of the way she moved under the effects of haloperidol. She came up to me and said, "Come here. What's your name?" I told her mine, and she told me hers. She began to tell me her story: "They brought me here and took my baby away." Then she added, "My husband tells me not to talk to the other patients. He says they'll make me crazier. He says to talk only to the nurses and doctors, not the crazy ones." I asked, "Then why are you talking to me?" She replied, "Because there's something about you. So you do the same—only talk to me."

With nothing else to do, I followed her around. We chatted, and she gave me advice: "Don't drink mate here. These people have mouths infections—you don't want to catch something. Stick to water." That same girl eventually recovered and graduated as a therapeutic companion.

By the end of the year, I had celebrated a warm Christmas dinner. They even held a birthday celebration for me and some of the other girls born in December, though I didn't get to spend it at home. My cousin took me to her house for a short while, but I had to return to the hospital afterward.

During that time, I had a mate set, and that's how I met Dorys—the woman who would later write the book *Chronicles, Life Stories of a Neuropsychiatric*. At that time, she hadn't started writing yet. Dorys gave me the name Angie. When we first met, she asked, "What's your name?" I told her, "My name is María Angelina." She said, "That's way too long! You need a pseudonym. From now on, you're Angie. It'll bring you luck. And spell it with an e—it's more sophisticated."

Through Dorys, I met Beatriz and Hilda. Beatriz and I used to go to the bathroom to pray together, and I would warn her, "Don't overdo it, or they'll medicate you for mystical delusions." Hilda was discharged and would come back to visit us while we were still hospitalized. Dorys, on the other hand, stayed in for many more years before finally getting out. She and I remained close friends until the day she died.

We bonded over stories about our grandparents, all of whom had come to Argentina by ship—some from Spain, others from Russia or Italy. We found comfort in sharing

that shared thread: we were all grandchildren of immigrants.

During the day, I would feed the cats and dogs. When it was time for lunch and the nurse stepped out, I would take my plate to feed the animals. The food was terrible—I ate a little and gave the rest to them. They already recognized me. It was a small way of reconnecting with the my old life, back when I had animals at home.

A few weeks later, Amelia arrived in Ward One. She was a visual artist, a short story writer, and had been an actress. As soon as we met, we formed a close bond. Even after I left, I continued to visit her, though I've stopped now. The last time I saw her, she seemed very anxious and didn't recognize me. It broke my heart, and I stopped going back. Amelia had long known she'd never leave the hospital. During our time together, we became close friends and would fantasize about rescuing my kittens and living together once her house or mine was repaired. We shared a deep connection. Even in moments of sadness and despair, we supported each other, holding onto the hope that our lives might someday change.

Meanwhile, my cousin was speaking with the social worker and the psychiatrist, trying to arrange the conditions for my discharge. But it seemed they focus was on getting me a disability pension—which I didn't want. I wanted a job.

Time passed until one day, they asked, "Who wants to go to Córdoba?" I raised my hand immediately. We were going to Cura Brochero. Ana María Monzón, who had worked for many years as an admissions nurse before becoming head nurse and later the Recreation Coordinator, organized the trip. She came up with the idea of allowing us to shop at a store without using money. The food at the hospital was terrible—raw meatballs, rice so stuck together that you could flip the plate over and nothing would move. It was a disaster. Eventually, we protested, refusing to eat, and word reached Dr. Linero, the hospital director at the time. After that, the food improved.

On the trip to Córdoba, Monzón suggested, "Let's pretend you're living outside the hospital. You'll shop and organize yourselves to cook your own meals."

When we returned, she had another idea: "Girls, what if we continue this in the hospital? You've shown you can cook without burning anything, the meals were delicious, and you worked together, teaching and helping each other. If it's possible on vacation, why not in daily life? What do you think about working in the CREAR (rehabilitation service) kitchen every day?"

She encouraged us to invite others to see what we were doing and to make the kitchen feel like home. "When you cook, you invite people into your home," she said. I raised

my hand right away and said, “Count on me.” Every day we invited others—people from CREAR, night nurses, even Néstor Costa¹⁹. It was wonderful.

Later, another job opportunity appeared, also proposed by Monzón. She suggested I help with the chicken coop. There were 1,600 hens, and we had to sell the eggs. The money went to the cooperative, and we were paid for our work.

Then, another opportunity came up. Three recreation technicians approached me, saying they were looking for girls to train in games and recreation to visit hospital wards and bring joy to vulnerable patients. Once we completed the training, we formed a group called Guardians of Illusions. It was an inspiring and rewarding experience—bringing hope and smiles to people who needed it most.

One day, Ana María Monzón said to me, “You love books, don’t you? I thought of you as the hospital librarian. There used to be a library here, but the librarian left, and it hasn’t had anyone in charge since then. The books need to be catalogued, and the space needs organizing. Would you like to start small, doing something like that?”

“Yes,” I told her. She added, “There’s no pay, but the work will be yours.” I was thrilled. I organized the books, and it turned out I did a pretty good job. Later, when I studied library science, I realized —without knowing it—I had created an inventory using a topographical signature. Back then, I had never even seen a catalog card. I continued like this for a few months until Loli, the current librarian, arrived. Ana María introduced us and told me she would help me. Loli had been a librarian for many years and would teach me. We got along immediately.

Sometime later, I joined PREA. One day, as I was going to take a shower, Lilian Vargas, the head nurse, said to me: “I want to let you know there’s now a chance to leave through PREA. There’s going to be a meeting, and I want you to attend.”

I told her, “But I want to leave to go home.”

She replied, “Well, you’ll leave through PREA, and at the same time, we’ll see what we can do about your house. Don’t miss this opportunity. I really want you to go to the meeting, listen, and see.”

¹⁹ He was a writer who worked at the hospital and at the Libremente Community Center, mentoring patients and community members in developing their literary works.

I joined PREA and went through all the steps, including the twice-weekly assemblies where we spent one or two hours discussing and working through fears. I was thrilled and thought: “I’m getting out. I’m going to live at home and work as a librarian. I feel like I’m touching the sky.”

In March 2000, I moved to Adrogué. At PREA, we held meetings to decide who we wanted to live with and who we got along with. Lucy and I had already grown close, and I also bonded with Celia, a strong-willed grandmother, as well as Dorita and Graciela, who worked in the kitchen. I used to give them a hard time, but they stuck by me. Even now, I visit them to cut and dye their hair. We all ended up living together, and we stayed together for 16 years.

At first, I continued working a few days at the hospital. I’d work and then stay overnight. One day, Ana María said to me: “Why are you staying overnight at the hospital?” “Because I live here,” I replied.

She said, “No, you don’t live here anymore. You already have your house. Move everything. Either you move, or you move.”

So, I moved to a house on Amenedo street. I got attached to the bed I used there, which belonged to the landlord’s daughter. When we moved into the apartment, the landlord told us, “Take everything—furniture, everything.” So, I took my bed.

After leaving the hospital, I took courses in library science, several municipal training courses, and computer classes. I also did various courses at Libremente. Eventually, I received a training scholarship. That lasted until September 1, 2003, when I was offered a permanent position at Libremente as administrative staff, with hours devoted to library work at the training center. The scholarship had been for a year and a half, though they were usually for three years. I was overjoyed.

One day, we went to speak with the minister. He wasn’t there, but his secretary received us. I went with María Rosa [*] and two or three other patients. I had written a poem and left it for the minister. Later, he began looking into something—I’m not sure what exactly—but when we returned, María Rosa said to me: “Would you like to tell Dr. Linero what happened today and what we talked about?”

“I’d love to,” I said.

As we were talking, the phone rang, and Linero said: “Wait for me outside for a moment.” When he came back, he called me over: “Come here, Angie, come. Your permanent position has been approved. The appointment is official.”

I couldn't believe it. We went to the director's office, where the associate director, Patricia Esmerado[*], was waiting. She smiled, hugged me, kissed me, and said, "Congratulations—you deserve this."

I left feeling so happy and went home to share the news. Graciélita said, "Well, I'll make a special meal for the occasion." That's when I officially started working as permanent staff—13 years ago. Later, I spent many hours at Librementé. Around that time, Alcoholics Anonymous started holding activities there, and I was appointed secretary. I didn't drink, but I stayed to accompany them, talk with them, and take calls from anyone who reached out. That was about seven years ago.

In 2009, Mercedes [*] got me a scholarship to pursue advanced computer science. Afterward, on my own initiative, I enrolled in courses on ceremonial protocol and on organizing conferences and events at the University of Quilmes. We were also interviewed by newspapers and T.V. Channel 11. Unfortunately, that made us somewhat famous.

In 2014, Maxi, a psychologist and the chief resident at Esteves, called me and said, "There's an opportunity I'd like you to consider. With the implementation of the National Mental Health Law, there's a chance for you to join the Ministry of Health and work with the mental health advisory council. It's a section that brings together professionals, patients, and family members to provide guidance and strengthen networks with people across the provinces."

I began working there on Mondays. But in December, when Macri took office, Andy Blake, the incoming National Director of Mental Health, discontinued all the programs. I left because the purpose and momentum behind the initiative had been lost. Now, I'm part of the advocacy movement for users of mental health services and for defending Law 26,657.

RENATA S.

-36 years old-

Interviewed in August 2014



I was born in Luján on July 12, 1978. I'm 36 years old. When I was a child, my mother placed me in a juvenile institution because of financial difficulties. I had a younger sister and several little brothers. Now, I don't know any of them. I only remember my sister, who stayed with me for a while in the institute. Later, I found out that my mother had placed all my siblings in different facilities, separating us completely. At first, she would visit me, but eventually she stopped coming, and I lost all contact with her.

I saw my sister again when I was in the hospital. I wanted to see her, so the staff arranged it. They would take me to visit her in an ambulance or a van, and I would bring her food because she was struggling financially. I'm an aunt—I have four young nephews. Before I left the hospital, I visited my sister, but since my discharge, I haven't seen her. It's complicated. I don't know how to travel, and I'm too afraid to go on my own. I feel ashamed and scared I might get lost.

I lived in two different homes. I liked the first one, but not the second. In the first home, I made some friends, but I was later transferred to the second institute because my sister was there. However, one day she ran away, and I stayed behind. I never had

the courage to escape. I knew they could send me somewhere even worse. At first, the treatment at the second home was mediocre, but it was a large, nice place. Some people wanted to take me in, although a few only wanted me to clean their rooms. I also cared for an elderly woman, who has since passed away.

Sometimes I helped in the kitchen or worked in the laundry room. The woman in charge of the laundry room would sometimes take me on leave so I could spend holidays or summers with her family in the countryside. During that time, I attended catechism classes near the institute and went to primary school, though I don't think I ever finished it.

When I turned 21, the legal age of adulthood, I was sent to Esteves Hospital. I had already been on medication, but I had side effects like my eyes rolling upward. Honestly, I think they hospitalized me simply because I had come of age and they didn't know where else to send me. I don't remember exactly how long I stayed there—I arrived in 1999 and left around 2004 or 2006.

Life in the hospital was somewhat similar to life in the institutions, except you had to be more respectful toward your roommates. It was quieter than the homes I had lived in, but I didn't own anything. I bathed every afternoon, and there was a stove near my bed where I dried my clothes. Most of them were eventually stolen. By the time they moved me to a different ward, I had almost nothing left—no tights, underwear, or bras. I was nearly naked.

I started in the Admission Ward, which was at the back of the hospital. I stayed there for several months before being transferred to Bosch Ward, a much larger ward—bigger than a house or an apartment. It had an entrance, a big patio, and a door leading to the dormitory, which was also spacious, like in most hospitals. There was a nurse's station and another large room at the back.

I ate quite well in the dining room, and over time, I started studying again through CREAR, returning to primary school. I found it a little boring, though. I made friends in my room, including someone who became my best friend. She was very kind. I would help her make her bed sometimes, and we both helped with chores like washing the dishes after snacks or dinner. We folded bedspreads, made beds, and occasionally helped the older women bathe.

I also attended workshops, including one where we made disposable diapers and wipes for the hospital. We were paid for that work, though only a small amount—20 or 25 pesos. Later, we participated in a workshop through PREA to prepare us for reintegration into society. It taught us practical skills for living independently. For

example, they sent us to do grocery shopping at stores like Coto in Temperley or Carrefour. One summer, shortly before we were discharged, we would go out as a group to get ice cream or take walks.

Eventually, I left with a group of five girls. Now, I've been in PREA for eight or nine years.

After leaving the hospital, we first moved into the house of a nurse's son, who lent it to us. We stayed there for a while, and then we moved to another house on a street near the hospital. At the time, I was receiving payments from a program, though I don't remember its name. Later, I started receiving a plan that paid me 150 pesos. Eventually, I began the process of applying for a non-contributory disability pension. At first, the hospital social worker helped me, but afterward I continued the paperwork on my own. The pension provides monthly payments, but as prices went up, I spoke to Agustina [*] that I couldn't make ends meet and didn't have enough clothes. She suggested I talk to Mercedes [*], so I did. I explained my situation and asked for additional income, and that's how I got this job. Mercedes told me the position at Promover would last for two years.

I enjoy working, though mornings are difficult for me. I take the bus because I have a pass that lets me travel for free on any line from 1 to 200. The pass is valid for ten years. It says I can travel with a companion, but I usually go alone. I work as a receptionist at Librementes three days a week—Tuesday, Thursday, and Friday. I open the door, answer people's questions about workshops, and let them know if someone is absent and why. I also run errands, like making photocopies or getting keys copied, as I did the other day. I've been working here since last August.

Before this job, I attended various workshops, including healthy cooking, tailoring, voice training, computer skills, and movement. My favorite was the movement class because it involved dancing. Now, in addition to working, I come on Mondays for breakfast and on Wednesdays to meet with Agustina, who manages my money when I need to buy something. After work on Thursdays, I see my psychologist. On weekends, I often watch movies—sometimes they're repeats. I like action and romantic films. Sometimes I spend the weekend doing laundry or other chores.

Currently, I live with four housemates in the second home I've been assigned to. I moved here because I didn't get along with two people in my previous house. One day, Belén [*] noticed I was upset and asked what was wrong. I told her I wasn't getting along with my housemates and that if there wasn't space in another house, I would go back to the hospital. She told me to wait, and eventually, I moved.

I like my neighborhood. There's a nearby block with lots of shops—a plant store, a bazaar, a butcher, a market, and a greengrocer. My house is fairly typical. It has two rooms and a bathroom with a bathtub and shower. I share a room with one of my housemates, and we get along very well. I'll be sad when she leaves, because she wants to live on her own. It's hard to lose someone you've lived with for so long—three years, in this case. I care about her deeply, and it's upsetting to think about her moving out.

She's such a good person. She takes me on outings, and we talk and listen to opera together. Just yesterday, for example, we went to Jumbo supermarket because she wanted to show it to me. Last year, I saw a sign for Holy Land Thematic Park and told her I wanted to go, so she took me. It was beautiful—there were donkeys, camels, and statues of saints like Mother Teresa. We saw people praying and the depiction of creation. She also took me to the Colón Theater. I had seen pictures and heard about it, so she invited me to see an opera there. The Colón is enormous. There's even a special seat for the president.

As for my future, I don't know. Right now, I'm focusing on having gallbladder surgery and losing weight, which is why I started yoga on Wednesday afternoons. I haven't thought much about vacations or the summer, but if I could wish for something, it would be to meet other companions my age. I already have my housemate, who is amazing, but I'd love to make a friend closer to my age.

HELEN

- 59 years old-

Interviewed in April 2014



I was born 59 years ago in Monte, in the province of Buenos Aires. I'm not exactly sure where, but my birth certificate simply says "Monte." My family consisted of my parents, an older sister, and a younger brother.

During my childhood, we moved around a lot—to Córdoba, La Pampa, and Banfield. In Córdoba, we lived near a seminary where priests were trained, and I remember hearing the seminarians sing in the afternoons and evenings. They sang all the time. We stayed there for a while with my father, but my parents fought constantly, throwing plates and all kinds of things. Eventually, my father left, and we stayed behind. After some time, though, we moved back to be with him in La Pampa.

My father traveled often for work. He was a naval machinist, though if anyone asked, he would simply say he was a mechanic. In La Pampa, we settled in General Pico because my mother went to the courts, and they told her, "Ma'am, how can you separate when you have three children?" Even while they were apart, my father always sent money. My sister and I were already in school, and since my mother insisted on sending us to private

schools—my sister and me to one run by nuns, and my brother to one run by priests—it was very expensive.

When my parents reconciled, we moved again within La Pampa, living in two different houses. Both were in poor condition. In the first, the landlord tried to assault my mother, so we had to leave. The second house was damp and rundown, but we had no other choice.

My mother always worked—doing laundry, washing sheets, and cleaning houses. My father worked in the fields and on road construction. He even worked on the construction of the General Paz highway. His job was to maintain and operate the large machinery used to build roads. While we were in General Pico, he traveled to the capital for work on the highway. One day, he came home and announced, “Tonight, we’re moving to the capital.” My sister was older by then and needed to attend high school and eventually find work, but there weren’t many opportunities in General Pico since it was such a small town.

So, we packed up and moved to Banfield in the Gran Buenos Aires. My father found a job at a workshop and brought my sister to work there too. His boss called him “El Petiso” because he was short. They both worked there until my father got into a dispute with the boss over wages—we were renting at the time and struggling to make ends meet.

After that, my father bought a piece of land and built a modest house. It wasn’t much, but it was ours. Around this time, he began working for two brothers, the Fernández brothers, who owned a machine shop in the Capital Federal. Once again, he brought my sister to work with him.

My sister eventually finished high school, but I didn’t. We both attended the school of Nuestra Señora de Lourdes, which was run by nuns. I only made it to my second year. Since my sister had her diploma, she was able to get an office job with the Fernández brothers. Meanwhile, I stayed home. My mom told me, “Look, Elena, school just isn’t for you. It’s better if you to stay with me.”

So, I stayed at home and helped my mom. I cleaned the floors, washed the dishes, and tried to lighten her workload. Around that time, my father left his job with the Fernández brothers and started his own road equipment workshop with two partners. My sister continued working for the Fernández brothers, but my father decided to involve me in his new workshop. He put me in charge of accounting, but it didn’t go well. I lasted two or three months, but I didn’t know anything about accounting. My dad meant well, but I simply couldn’t manage it.

Still, I wanted to work. I wanted the things my sister had—the clothes, the vacations she took. She went to Brazil and traveled to all sort of places. And to have that, I needed a job. My dad used to say, “Well, daughter, if you don’t have the brains for it, what can we do?” But I was determined. I got a job as a saleswoman at Casa Tía store in Lomas de Zamora, but I didn’t last long. Then I worked at Cinco Hermanos, another well-known store, also as a saleswoman.

Eventually, my mom got sick and became bedridden, and I had to leave everything to take care of her. At that time, I had moved out of my parents’ house and was living in a boarding house in Lomas de Zamora. I wanted to live the life my sister had—the clothes, the nice things she had. It wasn’t envy; I just wanted that too. I wanted to have decent clothes because mine were very poor, very worn.

My last job back then was cleaning at a nightclub, but the pay wasn’t enough to live on, so my dad helped me by sending me money every month. But when my mom got sick, I moved back home to care for her. She spent two years bedridden. I think she always had some kind of illness. For as long as I can remember, she complained of headaches and stomach pains. Then she developed cancer.

By that time, my dad had sold his share of the workshop and moved south to work at Papel Prensa. He came back when my mom got sick, but he didn’t live at home. Instead, he stayed in a boarding house because my parents still fought constantly.

When my mom passed away, my world collapsed. Losing her was devastating—for all of us. Just yesterday, I was talking about how you’re supposed to accept death, but I couldn’t. I didn’t bathe, I didn’t clean, I didn’t eat. I wandered the streets at night, completely lost. I felt like I was falling apart. My dad took me to a private psychiatrist who started treating me, but the doctor told him that it would be too expensive and suggested taking me to Esteves Hospital instead. And that’s how I ended up there.

I was 31 years old when I first arrived at Esteves. I had never even heard of the hospital before. I stayed there for fifteen days, but I suffered terribly. I thought my family was dying while I was gone. I saw strange, blurry lights and horrible things—like blood. My dad came every day and brought me coloring books to keep my mind occupied. After those fifteen days, he brought me back home.

I continued with outpatient treatment, but I relapsed and was admitted again for another fifteen days. This cycle repeated several times. I stayed in Ward Five, then Ward One, and eventually in Ward Three, where I ended up staying for ten years.

During all that going in and out of Esteves, my dad and I became very close. Those were probably the best years we ever had. We became friends. He tried to protect me. He took me on outings, and we'd buy watermelon and eat it in the car. But he was getting older, and his health was deteriorating. He stopped bathing, wore pants stained with food, and eventually he passed away.

At that time, I was living in the house with my brothers, but my dad stayed in a boarding house because he didn't get along with them. Later, they moved him to a PAMI nursing home because we couldn't care for him anymore. He had accidents, he couldn't manage on his own. But even in the nursing home, he fought with everyone and eventually escaped to come back home—at 86 years old.

That was my dad. You couldn't contain him. He fought his whole life—for himself, for his family, for what life threw at him. He fought with engineers over wages, over family allowances. And thanks to that stubborn strength, he managed to keep our family afloat.

The last time I saw my dad, I was in the hospital, and he came to visit me. I told him, "Go buy something at Betty's," the lady who ran the grocery store in the hospital. He thought for a moment and said, "No, daughter, you go." I insisted, "No, Dad, let's go together." But he said, "No, I'm going home." He couldn't take it anymore; he had prostate cancer.

At that time, I was staying in Ward Three, where I remained for ten years. I stayed because after my father passed away, I lost it all over again. I always break at the end. I screamed, cried, wailed like someone out of their mind. If the hospital walls could talk, they would echo my sobs. Eventually, I came to terms with it and kept going.

My siblings stopped visiting the hospital. They fell apart. At first, everything seemed fine, but then it all went terribly wrong. There was something deeply off—something that felt unnameable: witchcraft, bad energy, or who knows what. There's a song that says, "The rhythm of life seems bad to me..." That's how it felt—like life itself was out of tune. I kept asking myself, "Why me? Why me?"

I stayed in the hospital for years. But one day—after about eight years—a psychologist named Carmen Cáceres[*] approached me and said, "You're going to join PREA." She interviewed me and explained what the PREA program was, but I told her, "No, doctor, I'm staying with my siblings."

One day, the nurse on my ward, Juanita, said, "Go to the door; someone from PREA is waiting for you."

Two women, Silvina[*] and Viviana[*], were waiting. They took me to the SUM (a multipurpose room) next to the hospital, where we began attending classes. I went for about two years. I would ask them all the time, “When will we get the house?”

Then one day, the doctor came and said, “I have news for you—we’re going to see the house.” We were thrilled. After completing a “moving course” we finally left the hospital.

I moved out in 2010. At first, I went to a house in Avellaneda, but then I asked to transfer because one of the girls there was too cheerful and energetic, and we clashed—since I can also be confrontational. It wasn’t that they kicked me out; I just wanted to leave. I’m still friends with the people from that house. When we run into each other at the curator’s office to collect our stipends or at the Banco Provincia, I always greet them warmly.

Eventually, Dr. María Rosa[*] offered me a house I liked. She took me to see it and made sure I felt comfortable there. I told her I loved it and asked to move in. She is incredible, and I care so much about her that I call her “mommy.” She laughs and says she already has children, but I tell her it’s just a joke—she’s too young to be my mother. She’s helped me a lot, giving me the strength not to end up back at Esteves. I hold on to her guidance and support.

Now, I’m waiting to receive my non-contributory disability pension. It’s only 2,000 pesos, but let’s see. I’m working. I used to work at an American fair, but it was too physically demanding—carrying clothes and heavy racks all day. Now, I assist with visual arts workshops for children and adults at Librementé, and I’m about to help with a theater workshop for kids. I love this job, even though it’s tiring—I’m not 20 anymore!

My dream is to save enough money to visit Mar del Plata someday.

I don’t take much medication now, though I recently told the doctor I was hearing voices again. When I first entered Esteves, I heard voices too. The nurses back then were relentless—they dismissed me, saying, “Stop pretending, stop being dramatic—you’re fine.” They said that because my eyes would roll upward in a frightening way.

I don’t have much contact with my siblings anymore. They don’t have mental health issues like I do. Maybe they take a Rivotril once in a while, but nothing more. I love them, though. My brother is my only brother, and I love him dearly. My sister and I played together as kids, went outside together—how could I not love her? But she distrusts me because of things I’ve done. My brother says he’s working, but he won’t tell me what he does. My sister hardly talks to me. When I call, she brushes me off, saying, “No, no, no, Elena.”

There’s something buried between us that we can’t seem to resolve.

WITH MY FRIEND
UNTIL DEATH DO
US APPART

104

IRENE

-62 years old-

Interviewed in December 2016



I was born in Villa Ballester, in the San Martín district of Buenos Aires Province, and I've lived there my entire life. My parents came from Europe—from Austria—in the 1950s. They were originally from Romania but moved to Austria after the war. They had heard there was plenty of work in Argentina and that life was good. They were also afraid another war might breaking, so they decided to leave Europe.

My sister came with them when she was four. She only spoke a rural German dialect, and when she started school, she struggled because of the language barrier. That's why my parents spoke only Spanish to me—to prevent the same difficulties. I could understand German perfectly, but I never learned to speak it fluently—just a few words here and there.

My dad worked as a painter with my uncle, and my mom worked as a cook in the home of a duke.

I have vivid memories of my childhood. We had a big garden where my mom grew vegetables, and we always had dogs—big, aggressive police dogs that were given to

my dad. They were kept in a pen, and only my dad could go near them. Animals were always part of our lives. Dogs, cats—they were great company.

I attended kindergarten, primary school, and three years of high school, but I didn't finish. I don't know exactly what happened—I got sick and couldn't study. I failed two subjects, and when it was time for the exams, I hadn't prepared. After that, I gave up.

I started working at a company called Cronos, assembling telephone intercoms. I put together the plastic boxes that held the wiring, installed the brackets for the cables, and painted them. The pace was fast, and you had to keep up. I had coworkers but not close friends. I worked there until I was 33, when I was let go. That was my only job. My sister studied weaving and cooking. Now she works as a cook and also sells cleaning products and cosmetics.

My dad had a heart attack and was left partially paralyzed—he couldn't speak and had limited use of one arm and one leg. He lived for another three or four years, but didn't stay at home. He had separated from my mom and was living with another woman. I stayed with my mom, while my sister lived across the street.

My mom had depression and had a heart condition for about 20 years. I took care of her.

When I was 17, I had a terrible experience—I got food poisoning from fish. They found me unconscious on the floor and thought I had died. After that incident, I developed severe nerve problems. I was taken to Castex Hospital, and even after returning home, I couldn't recover. I wouldn't get out of bed; I stayed lying down all day.

I saw several psychiatrists, but none could figure out what was wrong. One even said, "I can't treat her—this isn't my area," and referred me to another doctor. That doctor helped me. He started with medication and later added physical exercises, group therapy, and even theater.

I ended up at Esteves Hospital because I could no longer afford my private doctor and had to stop treatment. Without my medication, I relapsed and began losing my balance. At the time, Castex Hospital didn't have a psychiatrist, nor did Diego Thompson Hospital in San Martín. To get medication, you had to get in line up at four in the morning, and my mom refused to let me go out alone that early. That's why I wasn't receiving treatment at any hospital—because my mom didn't want me leaving the house on my own.

The problem was that my mother was very sick, and our economic situation was so dire that we couldn't handle it anymore, especially after a new president took office—someone terrible. Since I couldn't pay for my mom's medication, I decided to leave my house. I walked and walked until I got lost. I lived in Villa Ballester, on the other side of the city. Eventually, I returned home, but because my mother was so ill, they called the police, and I was hospitalized—not at the Esteves Hospital, but at Evita General Hospital. After being discharged, I wandered again.

I walked all over the city and learned things I had never had time to notice before because I was always working and studying. Buenos Aires so much garbage, so many children living on the streets, so many people wandering aimlessly. My father had already passed away, which made everything even harder for me.

While wandering through the Capital, I realized food was everywhere. At McDonald's, they threw away bags of food. Sometimes I even found money, which I used to buy something to eat. At night, I slept in business doorways, though I never slept much. During winter, I found clothes tossed in the garbage. I don't know how long I wandered—months, maybe.

I remember meeting a girl once. I offered her a soda, and she stayed with me for about a week. We walked together until she went her own way. I kept walking, and one summer, I got severely sunburned. I eventually returned to the Evita Hospital in terrible condition, my skin burned from the sun.

Other things happened while I was wandering. One day, during a storm, everything went dark—I couldn't see anything. I sat on a doorstep, and a woman came out of her house and told me to leave. I started walking slowly, and suddenly, I was hit by a motorcycle riding on the sidewalk. The pain was unbearable.

At Evita, they ran all sorts of tests on me. I stayed there for six months. A psychiatrist told me they were going to send me to a nice place with trees, and I was taken by ambulance to Esteves Hospital. I spent my first night in the Ayerza Ward and was later moved to Ward Four.

Back then, the hospital had pine trees, though they've since been removed. On my first night, they sent me out to look for a girl among the pines, even though I didn't know her or the hospital grounds. I met a nun who brought me back to the Ayerza Ward and warned me: "Be careful with the nurses—they're crazier than the patients." She wasn't wrong. On my first day, they sent me searching for someone I had never met.

Eventually I was assigned to Ward Four. At first, everything felt horrible—the way they treated us, the way they bathed us. They made us sit together, dumped buckets of powdered soap on us, and rinsed us off. I hated it. I started helping others instead—changing their clothes, bathing them. I bathed separately, avoiding those group baths. The ward we lived in used to be a stable. I bathed in a corner and then did small tasks like making beds, so nurses wouldn't bother me. Four years went by like that.

I was eventually discharged, and my brother-in-law came to pick me up. But there were problems at home—he was separating from my sister, who was ill and needed eye surgery. She was very anxious. I didn't stay home for long. Those were the last years of my mother's life. My sister and I didn't get along, so I ended up returning to Esteves Hospital.

By then, the hospital had changed a lot. They had renovated it, and it looked nicer. Years went by, and I kept doing small tasks. I made a few friends there—not with everyone, as there were 114 of us—but with a couple of women I'd drink mate (yerba mate) with. One eventually went to live with her sister, and another left after twelve years at Esteves through the PREA program. I didn't like staying in the ward because people were always dying. The older women, who were very frail, were placed in a separate ward eventually.

The hospital was boring—always the same routine. Milk was served at a specific hour, dinner, and nothing ever changed. I joined embroidery workshops, but those were later replaced by the CREAR. I also attended knitting, crafts, and drawing classes to pass the time. My sister and niece visited me while I was there.

Fifteen years passed before I joined the PREA program. At first, I didn't even know what it was, but a friend encouraged me to sign up, saying it was nice and that I'd get to leave the hospital. Eventually, they called me. We took courses and spent three years preparing to leave. We had outings, meetings, and cooked together once a week—it was completely different from the hospital routine.

After so many years in the hospital, though, no one from my family came to see me. I felt very alone. My sister had an accident, and her eyesight needed surgery, so she stopped visiting and would hang up quickly when we talked. Feeling unwell, I started walking again for two days until a kind woman took me into her home, fed me, and called the police, who brought me back to Esteves Hospital. I was worried they wouldn't let me stay in the PREA program, but Dr. Silberman[*] reassured me that I could continue. Not long after, I was finally discharged.

So it happened that they surprised us with the news—we were moving to a new house, and a new chapter in life began for the four of us who were discharged. We got along well, and living in a house was something completely different. The house needed a lot of repairs, but to us, it was a dream come true after everything we'd been through. It had a bedroom, a large dining room, a small kitchen, and a tiny, covered patio.

At one point, one of the ladies broke her arm and had to return to the Esteves Hospital. Two years later, they brought in someone new, but she wasn't suited for group living. Eventually, there were three of us, but then one passed away, leaving just two of us—Anita and me. We've been living together for ten years now, and we've gotten along well. I never leave Anita alone because I don't like the idea of her being by herself, and Anita doesn't feel comfortable leaving me alone either. I used to sleep at my sister's house on Saturdays and return on Sundays, but I don't do that anymore—it's too dangerous. Now, my sister comes to visit me with my niece.

We moved into a new house, where we now live, after Dr. Silberman called us one day and told us she had a big surprise for us. She said, "You're going to move." We couldn't believe it. Our previous house didn't even have proper running water. The water quality was awful, and we had to fetch it in buckets from a tap in the hallway. We had to wake up at five in the morning because by eight, there might be no water at all. This was a common issue in Lomas district, and it was exhausting. The house was also very damp, and we worried about how it might affect our health. Thankfully, after an interview with Dr. Graciela Silberman, everything moved quickly, and a month and a half later, we were here.

We've been in this house for two years now. It's lovely, and the neighborhood is much quieter. There are a few dogs that someone abandoned near the corner kiosk. They followed us home one day after we fed them, and now they always come back. We always make sure there's something for them.

Here, I cook and watch TV. In the afternoons, I listen to Radio Continental and Radio 10. I don't have much free time because I have to go out to get my medications. I'm also seeing a traumatologist about my spine—it's a congenital issue with my bones. Sometimes, I'd come to Community Center Libremente for yoga classes when Professor Ali was teaching, and I still go for drawing classes.

Recently, I've been sad because our kitten, Pompona, passed away. Anita and I chose her because she was the smallest and had a limp. We thought, "No one will want her," so we decided to keep her. She was a good companion, and we had her for five years. I've loved animals ever since I was a child—they're so comforting. The hospital used to be full of cats and some dogs, but I never got too close to the dogs because I was afraid

of them. Anita and I don't want to adopt any more pets, though—we're both getting older. Towards the end, it became hard to go out and buy food or litter for Pompona. There used to be a store next door, but now we'd have to cross the street, and that's difficult for us.

Not long ago, I fell out of bed in the early hours of the morning. I'm recovering, slowly but surely. Anita called PREA, and all the nurses came, but I don't remember much. When I woke up, I was in the clinic in Adrogué. They discharged me after two days, gave me an IV, and then Lili[*], the nurse, took care of me at home.

If I could give advice to others, I'd tell them to take their medications and never stop. No matter how many hours they have to wait, they should be seen by a psychiatrist. and avoid self-medicating. They should trust the doctors—they've studied for a reason.

MABEL

-66 years old-

Interviewed between March 2014 and July 2016



My name is Mabel, and I'm a hairdresser. I graduated as a hairdresser at 15 and opened my own salon with furniture gifted to me by my godmother, who had also been a hairdresser but decided to stop practicing. I studied hairdressing for two reasons: first, I loved it, and second, because my father's death affected me deeply. After he died, it felt like something inside me shut down—I couldn't concentrate, and my memory wasn't strong enough to study anything else. Back then, there weren't any psychologists to turn to.

From the neck up, I always pay attention to people, but beyond that, I barely notice them. The head is my passion. I've never failed as a hairdresser; I loved the work—it's an art to me. When I was doing hair, I felt fulfilled. My favorite thing to do was cutting hair, followed by coloring. I also studied people in my own way; hairdressing is a lot like psychology. I had clients who genuinely cared about me. I'll never forget one client who came to visit me while I was in the hospital. She had gone to my salon, and my son told her I was hospitalized. One day, as I was sitting in my room drinking mate, she showed up. She asked what had happened to me, since I always seemed fine, so I explained. Then she said, "Can't you cut my hair? If you don't, I don't know what I'll

do.” I told her I didn’t have scissors or tools at the hospital and recommended another hairdresser I knew in Banfield. She burst into tears and said she hoped to see me again soon, but I never saw her again.

My dad died when I was six or seven, and it left me stunned. Before he passed away, he had been building a house in Banfield. He worked as a train inspector, and I remember he would take my sister and me along on his vacations. The trip I remember most was to Córdoba. We took photos, explored, and spent wonderful days with him. Many years later, after I left Esteves Hospital, I returned to Córdoba. It was autumn, and we stayed in cabins in Cura Brochero with a group of women from the hospital. It was freezing—I even saw snow for the first time in my life.

Back to my dad: he had taken out a loan to build the house. At the time, the Mortgage Bank offered 50-year loans. My dad, who was also a bricklayer, began building it himself. But he passed away before he could finish it. After his death, we moved to Banfield, and my grandmother came to live with us. It was me, my mom, my sister, and my grandmother. My mom started a small business at home, and that’s how we managed. A few years later, when I was around ten, my mom remarried. My stepfather was a good man.

At 15, I set up my salon at my mother’s house—we had plenty of space. I worked there until I was almost 30. When I was about 20, I got engaged to my husband—my ex now. He was 20, and I was 22. He worked as a construction foreman and made tiles. We dated for a year and a half and got married in September. I was happy, working at the salon at my mom’s house. We lived nearby, renting an apartment just around the corner.

Three years into our marriage, I wanted to have a baby, but my husband wasn’t ready. He kept saying, “Wait, wait,” but I told him, “I’m almost 25, and I love kids.” So I got pregnant and had a daughter—she’s 40 now.

When I turned 30, I wanted another child, but my husband kept saying no. I insisted, saying, “Come on, I’m already 30,” because I wanted a boy. Eventually, I convinced him—or rather, I just stopped taking precautions—and I got pregnant again. When he found out, he wasn’t happy and said he didn’t want another child. I told him I didn’t care—I was having the baby. I was upset by his reaction, but I gave birth to a beautiful boy, who’s now 35. He was born weighing more than four kilos. When they brought him to me, I cried. He was so big that I had to buy new clothes for him because nothing I had fit him.

Over the years, I wanted to buy a house, but my husband was obsessed with cars. He would buy one, keep it for three or four months, then sell it to get a better one. It made me anxious and depressed. At the time, I was seeing a psychiatrist and was starting to feel better. But he was always focused on cars, and I was always focused on the house. Then he decided he wanted to become a pilot. As usual, I was patient and supportive. He completed the course, but it was expensive, and I lost a lot of weight from the stress. I was hardly eating because of my depression. He'd say, "We're young," and I'd reply, "Yes, but we have two children, and I want us to have a house. If anything happens to us, the kids need somewhere to live." But he never listened.

From there, we moved back to Banfield and rented another house. I'm not sure if it was because I was so thin, if it was God's will, or just fate, but I ended up getting pregnant again and had another boy, who is now 33 years old. In that house, I set up my hairdressing business, and my clients came to me. I also did house calls, and my husband bought me a moped, which made things much easier.

After nearly nine years there, the owner asked us to leave. I searched and searched for a new place but couldn't find anything. Everyone in the neighborhood knew me, and one day I asked a lady on the same block, "Don't you have a house to rent?" She said, "I do, but it's in bad condition. If you want it, I'll let you have it. You fix it up, and you can pay me back whenever you can." So, we fixed it up, made it nice, and moved in. That's where my two kids live now.

At that time, my husband got a great job at the dairy company "La Serenísimá" in Longchamps, and I thought, "The money he earns from this job will go toward the house! This house is going to be ours". But no—he decided to buy a brand-new car instead, a Galaxy. Time passed, and while he drove that car to work, I kept busy with the salon, managing our three kids, their schools, and their high school activities.

Then one day, at the gas station where he parked the car near La Serenísimá, he met someone—a woman who worked there. I don't know how it started, but it happened. And just like that, my world fell apart. We had been married for 23 years. He was my first boyfriend, and I had married him out of love.

He became distant and started coming home late. I'm not stupid, so I began digging for answers. Eventually, I found out about the girl—she was twenty. I said to him, "How can you get involved with someone that young? She's the same age as your daughter!" He wouldn't respond.

I fell into a deep depression. I wanted to end my life—I even tried to cut my wrists. My daughter found out and had me admitted to Esteves Hospital. There, they treated my

wounds and gave me antibiotics. But emotionally, I was still broken. The psychologist and psychiatrist worked with me and prescribed medication. Slowly, I started to recover.

My daughter visited me often and asked, “Mom, what are you going to do?” My kids suffered so much—they didn’t expect this any more than I did. I stayed in the hospital for two years. My daughter visited regularly, but my sons came only sometimes. My ex? He never visited.

One Sunday, as I was waiting for my kids to visit, I was sitting at the hospital entrance, broke and desperate for a cigarette. I saw some people visiting another patient nearby, and I asked a man, “Do you have a smoke?” He said yes and gave me one. That’s how I met Rafael—the man who should have been the love of my life.

We started talking, and I shared my story with him. He told me he was there to visit his sister, who was unwell. After that day, he came to the hospital every day. He’d spend ten minutes with his sister and then sit and chat with me. He brought me sugar, yerba, and even slippers. He had been separated for years and was two years older than me. Eventually, I was allowed weekend passes, and Rafael would pick me up on Fridays. He had a car and would drive me to see my clients. He’d wait outside while I worked with my big bag of tools—my hairdryer, rollers, everything. I’d do two, three, even four clients in one day, and then we’d go back to his place. At first, we were just friends. I told him I was still grieving and couldn’t start a relationship, but I’d be happy to have him as a friend. He said, “Don’t worry about it. I’m not asking for anything. I just like your company—the way you talk, and being with you.” He was a gift from God.

At the time, I couldn’t go back to my house because my kids didn’t want me there. They argued with me and didn’t understand my decisions. I told them, “You live your lives, and I’ll live mine.” When the hospital had family meetings, my kids didn’t attend. So, when I was discharged, Rafael signed the paperwork because my children wouldn’t.

I moved in with Rafael as his partner. He was a true gentleman—so attentive and caring. When I needed surgery, he accompanied me to the hospital, stayed by my side, and bought me everything I needed, including a girdle for my recovery. He took me home and looked after me. We went everywhere together. He was a real man.

At the time, my children were still young—the oldest was nineteen, and the youngest, seventeen. My daughter was already married, and one day she told me: “Mom, I can’t take care of my brothers. Dad hardly comes around, and I can’t handle them. One of them—I don’t even know where he is—and the other one told me he’s drinking.”

I cried and cried. Rafael told me to stop crying, saying my children were rebellious. But in the end, I left him and never saw him again. It was so hard. When I left, he told me: “Remember what I said—you’re going to end up back in the hospital. Your children are going to drive you crazy.” And he was right.

I left Rafael and went back home, but my children went their own way. I couldn’t work much because my clients had gone elsewhere while I was gone. After a few months, I fell into another deep depression and ended up back in the hospital. The pain, the anguish—it was overwhelming.

I spent a week in the Admission Ward. I remember they took away my clothes, and I spent four days in a nightgown, freezing. After that, they moved me to Ward One, and that’s where I met Adriana.

It was 1998, the year I was hospitalized. We were in line for milk, and Adriana was standing behind me. I looked at her and thought, “What a beautiful girl.” I turned to her and said, “Hello, how are you? What’s your name?”

She said, “Adriana.”

I replied, “I’m Mabel. Nice to meet you. Adriana, you’re beautiful—you could be a model.”

“Do you think so?” she asked shyly.

We started talking. Adriana was very reserved. She didn’t go outside and mostly stayed in her room. I, on the other hand, was always out and about—I drank mate with the others, walked around the hospital. I hated feeling confined. After lunch, we’d gather, share stories, and talk about our lives. Adriana became very attached to me.

We spent two years together in the hospital, and when we were discharged, we were placed in the same group homes. In every home I’ve been in—three so far—Adriana has been with me. We stayed nine years in the first one, a little over four in the second, and we’ve been in this one for a month. Soon, I’ll receive a certificate of cohabitation recognizing all the years I’ve spent in these shared homes.

Over time, I repaired my relationship with my children. I visit them now, and I’m a grandmother. But they never include me in their plans. At Christmas, one son told me he was going to Pinamar and couldn’t visit. On New Year’s, he said he’d be spending the evening with his sister-in-law. When I called my other son on Christmas Eve, I couldn’t reach him. My daughter told me I couldn’t stay with her because she only had

three beds, and there wasn't room for Adriana and me. She also said there were no taxis available.

So Adriana and I spent the holidays alone.

When I was getting ready to move into this house, I called all three of my children and told them, "I'm moving on January 13. Here's the address." They said they'd visit me. Have I seen them? Not yet. I pray to God that they'll come, but for now, it's just hope.

These days, I keep myself busy in the house. I help out where I can—doing laundry, cooking, cleaning. I've had wonderful companions in the houses I've lived in, and others not so much. Some were "diamonds in the rough," as Graciela Silberman^[*] says.

My daily routine is simple. I wake up early, help some of the girls with their medication (I've been authorized to do so), drink mate, pray, and water the plants. Sometimes, I go up to the terrace to look around, and then I come back down to prepare food with one of the girls. After lunch, I take a nap for an hour or so, then wake up for more mate. In the evening, Adriana and I have coffee with milk. We do laundry together.

I don't go outside much—it's hard for me to walk because of my weight. I have a herniated disc, but I can't have surgery until I lose weight. In the previous house, I gained a lot because I was anxious and ate too much.

Looking ahead, my priority is to lose weight and get rid of this pain. If I feel well enough, I'd love to open a hair salon again. I don't want to get married, have a partner, or anything like that. I'm done with relationships—or at least that's how I feel now.

What I want most is to be able to walk. To take long walks with Adriana. I'll go with Adriana to the end of the world. With my friend—until death do us apart.

[Two years later]

I can add to the sad story I had with my children that now, thankfully, I have a good relationship with them. My youngest son recently separated from his wife. After twelve years of marriage, she left him for another man. She had three children with different fathers, plus my granddaughter, who is his child and is ten years old. Since he still had to work, I told him: "Don't stop working. The same thing happened to me, and I ended up in a bad place. You don't have to go through that. You have a good job—don't lose it

to depression or hurt feelings.”

So, Adriana and I started picking up my granddaughter on Fridays and taking care of her at my son's place until Sunday. But later, Adriana got sick, and her doctor told her she couldn't keep going —she had lost a lot of weight from those visits. My son was in such a bad state that he only bought junk food, and Adriana simply couldn't eat that.

He fell into a deep depression, had a panic attack, and eventually had to stop working. He didn't want to go through the truckers' health insurance system, so he chose to see a private psychiatrist. The psychiatrist explained how to take the medication properly. I asked my older son, “Can you leave your brother's pills with me?” He said, “No, Mom.” I replied, “Don't you trust me? I've taken pills and never misused them. Let me manage this.” I told him, “You need to take the pills exactly as prescribed. That's the only way you'll get better.”

At the time, he was paranoid, saying things like: “Close everything. They're following me. Someone's outside.” He blocked off the entire house, and I took care of him. Over time, he improved. During that period, when we spent so much time together, I talked to him about many things—things from my life that they had never wanted to hear before. He couldn't believe what had happened to me with their father. Of course he couldn't believe it—we never had the chance to talk, and they never listened to me back then.

Eventually, the psychiatrist reduced his medication, and he started feeling better. I would come back here, discuss his treatment with the psychiatrist, and then return on weekends to help. He would pick up my granddaughter on Friday nights and drop her off on Sunday nights. I washed his clothes and cooked for him. He gave me this chain, a pair of Adidas sneakers, and took me out to eat at La Quintana in Banfield. On June 9, my daughter's birthday, he invited us to lunch.

Now, I have a retirement pension. Before, I only had the non-contributory pension. It's the retirement program for housewives, and I also have PAMI coverage. Diabetes medication is cheaper, and I have access to doctors and the Adrogué Clinic for treatment. Life is smiling at me. I was enrolled in the retirement program this year. This retirement program was implemented by President Cristina Kirchner, along with the Universal Child Allowance and equal marriage legislation. Analía Monchetti[*] found out about my situation, and that's how I ended up at the National Social Security Administration (ANSES).

At this group home, I have to contribute to the pooled fund, pay into the cooperative, and buy my diabetes medication. It all adds up. At one point, I ran out of money. My

son owes me money, so I told him, “Look, I need you to give me some because I have to buy my diabetes medication. If I don’t take it, I could die.” He said, “Die. I don’t have any money.” My heart broke when he said that. I decided not to go back to his place. He’s going to have to call me and apologize. He needs to think before he speaks.

Later, he called and said, “I didn’t say that.” I told him, “Don’t lie. The things that hurt me stay with me. Think before you speak.” That’s the thing with family—there are pros and cons. It’s a package deal. I have a lot of patience with them because they’re my children.

But recently, we had a small argument, and I haven’t been back for fifteen days. I’m kind, but no one treats me like a fool. One day, we were drinking mate with one of his friends, and he said to her, “You know, my mother abandoned me when I was fourteen.” That made me angry because I had just met the girl. I said, “Who abandoned who? It was your father. I ended up in a mental hospital, and none of you came to see me—not even to check if I had mate or cigarettes or anything. Do you remember that, or have you already forgotten?”

You’ve told me this story three times. You’re holding onto resentment—you need to let it go.”

Until he calls me, I won’t go back to his house.

The other day, he told me: “Mom, I’ve already bought the materials—metal sheets and tiles—and I’m going to build a room here for you to live in. Adriana can move to her house in Avellaneda.” I told him he could build the room if he wanted, but I plan to keep living with my friend. Having a friendship that lasts so many years is rare. We’ve overcome so much together. For me, Adriana comes first because she’s been by my side in good times and bad for the past eighteen years.

BEATRIZ & SILVIA

-58 years old - 50 years old-

Interviewed in July 2015



[Beatriz's Story]

[Beatriz] I was in the hospital for nine years because of depression after my dad passed away. I was left alone, became depressed, and my cousins took me to the hospital. I stayed there for nine years and then moved to a group home—with Silvia.

I was born in Lanús on January 7, 1965. I have Italian ancestry. I'm Argentinian, but my grandfather was Italian. My family today consists of my cousins. I was an only child. My father was a retired railroad worker, and my mother was a housewife who cleaned, ran errands, and managed the household. She passed away when I was thirteen.

I went to school until seventh grade. I started high school but didn't like studying, so I dropped out after a year. Then I worked as a cleaner in family homes. When I was seventeen, I got a job in a flower factory, ironing flower petals with a machine. I worked there for three years. I wanted something better, but I couldn't find anything, so I stopped working because the pay was so low. I thought I'd find a better-paying job,

but I didn't, so I went back to cleaning family homes. It still wasn't much money.

When my father died, I was twenty-six. I didn't want to do anything. I missed him terribly and cried all day. My aunts and cousins came to see me, helped me bathe, and washed my clothes. Finally, they admitted me to the Esteves Hospital.

[Silvia] Her cousins and aunts visited her, but since she stayed in bed all the time, she didn't bathe, wash her clothes, or cook for herself. Why? Because her family didn't bury her father properly and didn't let her see him. She was overcome with pain and grief.

[Beatriz] Yes, they didn't let me see him. My dad had a tremor, so I called an ambulance, and they took him to the hospital. He was there for two days before he passed away. There was nothing more they could do. Afterward, they took him straight to the cemetery and didn't let me see him.

[Silvia] She fell into depression.

[Beatriz] I was like that for a year.

[Silvia] Until they took her to the hospital.

[Beatriz] They told me they were taking me to the hospital to treat me and then discharge me. I ended up being hospitalized for nine years. I wanted to leave. The confinement was awful. The hospital was awful.

[Silvia] It's horrible—they mix everyone together: people who are fine with people who are not. I was fine. My issues were just nerves, you know, anxiety. But they mixed me in with everyone else. It's not like I was a bad person. They made me mentally worse—they did it on purpose. And I never hurt anyone, not then, not now. It bothered me, and that's why I understand her.

[Beatriz] I recovered from my depression because of the medication they gave me. It helped me get better. I've been better for about a year now, and they've stopped medicating me.

[Silvia] Except for when you hear your mom's voice, right?

[Beatriz] Sometimes.

[Silvia] Sometimes. They give her haloperidol for that. You don't know how that pill makes me twist up. But they don't give me anything now.

[Beatriz] I take sertraline and biperiden in the afternoon for the voices, and then nothing at night. At the hospital, they gave me so many medications.

[Silvia] You've always taken sertraline.

[Beatriz] The medication helps. Sometimes, when I'm walking down the street, I hear people's voices, like they're talking about me. But when I take the pill, it stops.

[Silvia] When she gets those strange ideas or hears voices, she says, "Fush fush." I do the same thing when bad thoughts come to me. When malicious or stupid thoughts pop up, I say, "Fush fush, fush fush." It calms me down.

[Beatriz] At the hospital, I stayed in the same ward the whole time. There were workshops there. I attended the painting workshop. I didn't have any real friends in the hospital. Sometimes, I was friends with Teresa, but only briefly—we didn't get along very well. Then I became friends with her [Silvia]. We met during meetings at the hospital to prepare for discharge. I love her very much. She's my only friend.

[Silvia] She was in Devoto Ward, and I was in Ward Three.

[Beatriz] The doctor on the ward, Dr. María Rosa [*], told us about PREA. She said we'd do better in the group homes, and they chose me to move there. They started holding meetings to see how we were doing, and then they transferred me to the group homes in 1999. That's where we met.

[Silvia] We'd occasionally catch glimpses of each other when walking from one place to another, but it wasn't until 1999, during the selection process for each house, that we actually met. That's when we started getting to know each other. Later, we grew closer when we moved to the San José neighborhood. We were part of the second group to leave the hospital. First, the group from Bermúdez's upper floor left, and then it was our turn.

[Beatriz] In the house, there was a woman who was aggressive—she pulled my hair several times. We didn't want anything to do with her, and we told the doctor that we wanted to stay at our house. We lived there until 2009, and then we spent two years in a house in San José.

[Silvia] We wanted to become independent. And we are independent now, but I still need to resolve my own situation so I can move forward. I want the State to grant me a house where she can come and live with me. That's what I'm missing. But I don't want to leave the Community Center; I just want to reclaim what was mine before coming here.

[Beatriz] I cover my expenses with my father's pension. My cousin manages the money—she pays the rent and leaves me some for errands and groceries. She comes to see me once a month, usually when the rent is due.

[Silvia] Until 2012, we lived in the house in San José. Then, from 2012 to 2014, we were in Lavallol, and since 2014, we've been here. We keep moving because the leases keep ending. We were fine in Lavallol, but she got sick, and the doctor suggested we move here, where she could be monitored more closely.

[Beatriz] I became paralyzed—I couldn't move my legs.

[Silvia] That was the first incident. The second time, she vomited a lot.

[Beatriz] I don't know what caused it. Maybe it was something I ate. They admitted me to the Lanús polyclinic and said it was like a food binge. I stayed there for two days while they ran tests. The first time, when I couldn't move my legs, I was also admitted to the polyclinic for two days.

[Silvia] Even the doctors couldn't explain it.

[Beatriz] Now I do painting and yoga.

[Silvia] At Esteves, she participated in workshops, and she's been going to the Community Center as well since the end of 1999. She didn't attend much last year, but this year she's been going regularly.

[Beatriz] I've been going to yoga and exercise classes. In the painting workshop, we create drawings and landscapes, sometimes using stripes. We also take walks through the park, and occasionally, we go to Lomas for ice cream.

[Silvia] There are some things here that don't work perfectly, but we're doing fine together. We keep moving forward. I'm grateful, and to show my gratitude, I give her gifts. She gave me a mattress, a wardrobe, and even a sugar bowl I really liked. I'm deeply thankful for everything she's given me. We complement each other.



[Silvia's Story]

[Silvia] I ended up here because of a report they filed about me, saying I caused a scene with the radio and TV at my house in San Andrés. The people there didn't really know me—only my last name, because my grandfather was one of the founders of the first businesses in San Martín, in the province of Buenos Aires. He was among the first to open businesses there. I have Arabic, French, and Spanish heritage, which is why my mom and dad got along so well.

We had to live in San Andrés because we couldn't afford rent anywhere else. My dad trusted everyone, and my mom used to tell him: "Alfredito, let's save money so our daughters can keep their jobs, the business, and a home." But my dad would money away until there was nothing left. In the end, it was just me and my sister. She's four years younger than I am.

I was born in San Martín. My mom worked in a market my dad ran, which later became a rotisserie. Before that, she worked with my grandfather in a silk shop that was part of a large bazaar. My mom also worked as a fabric danner, but when that business failed, she focused entirely on the market. My uncle helped too—he had a bazaar, a butcher shop, and a produce store, and he always reminded my dad to prioritize us: "Alfredo, you need to take care of your daughters and your wife." My parents were good people.

Even when we lived in Ciudad Evita, I helped anyone in need I also have a brother from my mom's second marriage—he's thirty-five now.

My childhood was very happy. I was always quiet and calm, unlike kids today who scream all the time. As a teenager and young adult, I was cheerful and loved dancing. But then something happened, and they brought me to Esteves when I was thirty-eight. I'm fifty-eight now.

I went to the hospital two or three times because they said I was yelling. I don't yell—I just talk loudly. I have a strong personality, but that doesn't mean I can't stand up for myself. I have rights too. Now, I speak up and say what I need to say.

I attended primary school at Domingo Faustino Sarmiento School No. 1, right across from the square and the city hall. My classmates were great—they never bothered me, except for one time when a classmate complained to the principal, and the principal punished only me by making me to stand in line. My mom stood up for me and asked, "Why are you punishing my daughter when she was just defending herself?"

I went to high school at ENET 24 in Villa del Parque. They had promoted it in our primary school, explaining that it was part of the educational system established by General Juan Domingo Perón. The first three years were a basic track, and the next three specialized in technical administration. If you didn't want to continue to the sixth year, you could graduate as a banking assistant. It was considered a pre-university school. My cousin and I went there together—we had also attended primary school together. Everything went well; my classmates and teachers respected me. But I didn't finish the sixth year.

After finishing high school, before I started working, I stayed home and ran the household. At the time, I lived with my father, grandmother, and aunt. My parents separated when I was fourteen—it was mutual. My sister went to live with my mom. I got along with my mom, but I prefer not to think about her because it makes me anxious. I was very close to my paternal grandmother, though I loved my maternal grandmother too.

At twenty-three, I was recommended for a job at a school in San Martín. I worked there from 1981 to 1986 in the treasury department, summarizing accounts as a non-teaching secretary. The pay was low, even though I worked hard and did well, so I had to quit. Then, from 1986 to 1987, I worked as a secretary for a lawyer and a notary—a married couple. I did typing for them. I had studied administrative secretarial work during my last two years of high school.

Then I became friends with a girl in the same building, and she helped me get a job at Zeit, a temporary work agency. It was supposed to last three months, but I stayed for a year at a German toy company that made dolls and boats. I did administrative work, answered phones, and ran a mimeograph machine.

Later, I worked for a year at Winka, a metallurgical company that produced copper and bronze parts, as a receptionist. After that, I spent another year at The National State Gas company.

In the 90s, I was out of work. I couldn't find a job anywhere—not in San Martín, not in the Capital, nowhere. I was living with my dad. My mom had remarried. My sister was living with her husband and son in San Martín. We were all struggling badly. And I paid the price, even though I always behave well. I'm not the kind of person who causes trouble. I'm not a bad person; I have good habits. I don't get angry, I don't laugh at people, I don't make fun of anyone, and I don't offend others.

I ended up in the hospital because they said I caused a scene with the television and the radio. That's what the landlord in San Andrés—where we lived—reported. But I was just hitting the TV to make it work because it was very old—made in 1945—though it still worked well. I was trying to fix it, and the radio didn't work properly either. They misunderstood what I was doing; I never meant anything bad by it. They filed a report at the police station, and the police brought me here.

They accused me of yelling. I don't yell. I raise my voice, but I don't shout—and do you know who yells? People without common sense. I raised my voice because they weren't listening to me and were disrespecting me. I was defending myself. It's not like I'm paranoid or anything. But the doctor didn't understand me. She said I was paranoid schizophrenic; otherwise, I wouldn't have been eligible for subsidies or financial assistance. And since I had no money—just the 300 pesos my mother received—I had to accept that diagnosis until my situation improved.

The first time I was in the hospital, I stayed for a month. They released me on a trial basis and then fully discharged me. I've been hospitalized maybe four or five times. When I was discharged, I would go back to my mother's house. I was hospitalized in 1992, but I was at home in 1994 and 1995. I think I returned in 1996, then again in 2000, and later in 2009. When I was discharged in 1994 and 1995, I lived with my mom in Ciudad Evita. I went back to the hospital because I didn't have a home. My sister's house is very small—only two people can live there. My sister has her own strong personality, but she's a good person, like my mother, like me. And my nephew is an angel. I raised him—from the moment they handed him to me straight out of the incubator.

I haven't been to the hospital in six years, and I never want to go back because, honestly, it was a horrible experience. They treat you like a cadet and give orders as if you're a soldier: "You have to bathe," "Do this," "Do that," over and over. There was no need for that—I would grab my clothes and go bathe myself.

My mom and dad used to visit me in the hospital. They brought me clothes and other things. But then they passed away. My mom died in 2009, and my dad in 1995, on August 17. My mom died very young—at seventy-three. My dad passed away at sixty-seven. You can't imagine how much I suffered, how much I cried. You don't know what kind of people they were. And the same goes for their parents.

[Beatriz] I became very depressed. I cried all the time.

[Silvia] I joined the PREA program because I talked to the nurses about it. I told them I wanted to join, and eventually they admitted me. That's where I met Beatriz. We became friends because she's kind and gentle. I'm kind too, but I have a strong personality. I don't spy on or mistreat anyone—I swear on my mother's life, may God bless her soul in heaven. I met her there, and we've gotten along well ever since.

I receive a subsidy and 500 pesos from my mother's pension because her husband gets 72% of it, and I get 28%. I was supposed to collect yesterday, but I wasn't feeling well. They explained everything to me when I went with Nadia [*] to the curatorship in Banfield. They already knew me there and told me to explain to the doctor that they need to continue managing my case.

When I arrived, the doctor said, "I'm angry with you because I already explained this to you." Honestly, I don't remember, but I accepted it. Apparently, I no longer belong to the same judge in Morón; now my case has been transferred to the curatorship in Banfield. They told me that it could take several more months—maybe six.

Now, here's the problem: I wasn't able to collect the subsidy today, even though my account is active and up to date. The social worker told me I need to collect it, and she confirmed that it must be done through the courts, at the court curatorship. I have it written down somewhere. The subsidy I receive is for external living expenses: 710 pesos for food and 380 pesos added to my pension. This was an increase because I used to get very little, only 1,900 pesos. Now I get 2,790 pesos, which is still low. I have to go every month to collect it.

As I said, we wanted to live on our own, and we hope to continue living independently—to live more peacefully.

[Beatriz] To live more peacefully. We help each other.

[Silvia] She cleans the table, wipes the furniture, and sweeps the room, the hallway, and the dining area. I clean the counter, wipe the furniture, mop the floor, wash the sink, and tidy the bathroom.

[Beatriz] I sweep the hallway here.

[Silvia] For now, I don't receive my father's pension, but I promised that when I do, I'll pay for the electricity and gas. Right now, PREA is covering those costs. She also gets help from the railroad workers and her father, but I don't. I earn very little.

In terms of family, I'm close to my sister, my nephew, and my godmother aunt. My sister and I talk every day. If she doesn't call me, I call her, in case she's tired or forgets. My nephew is twenty-six. We're always there for one another. I also have friends I met in San José. I became friends with the owner of the house we rented and another lady I met on the train.

[Beatriz] Not me. I'm on my own. I had a boyfriend once, but we broke up six years ago. I met him at a store. I cared for him, but not enough.

[Silvia] My past relationships didn't end well. They thought I was naïve, but I never gave myself to them, and they betrayed me. One relationship ended because I was four years older than him, and his mother didn't approve. I cried so much—I couldn't find comfort. I loved him deeply, with all my soul. That relationship lasted from 1986 to 1988—three years. I never heard from him again.

As for my activities, I visit my sister in San Martín. I take the bus there. I also go to PAMI and the Gandulfo Hospital for check-ups. I go alone because I don't need anyone—I know how to manage my own affairs. I also accompany her when needed. I have to get a mammogram and a pelvic ultrasound. My hip is fine, but my spine is in terrible condition. I have osteoarthritis and scoliosis, and it's advanced.

We're happy because they congratulated us for paying the rent and the phone bill. I pay for the phone, and she pays the rent, though I also contribute 500 pesos while she pays 2,000. Woronowski [*] told us he "takes his hat off to us" for managing to keep up with the rent—he said everyone should follow our example. But we don't try to act like big shots. Beatriz often invites me to eat, and when I have money, I contribute to groceries. Still, many times we fall short, and I end up putting in extra money.

Now I need to cover expenses like the cabs and books—books I buy for reading. I love reading about history and literature. Right now, I'm reading something I asked Marcela [*] for about Francisco Bergoglio. It interested me, especially the part about children's joy and the hope they bring. It mentioned someone planting an olive tree in front of the San Martín cathedral as a symbol of joy and new beginnings.

In the future, I want to work—but not in a way that ties me, metaphorically speaking, to being a “prisoner” of Esteves. I want to live as though I've moved on from that world. My world is about doing things the right way.

I'VE NEVER HAD A LOVE LIKE THAT

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GABRIELA

-68 years old-

Interviewed in January 2015

I was born in 1946, so this July I'll turn sixty-nine, but I feel fifty-five. I probably should already be a grandmother, but I feel young. I give myself youth. I take steps to make sure the years don't come crashing down on me. Having a partner helps, and so does staying joyful.

I am Argentinian, and I carry that identity with great pride. My mother was Argentinian, but my grandparents were Russian-Jewish. My father was Polish, from Warsaw, where "the Pope of the Smile" came from. I even went to see that Pope at La Rural when he visited. At school, they called me a "shitty Jew." The only Yiddish I know is meschiguene, which means "crazy." I also know a few words like eign (eyes), noss (nose), and moil (mouth). My mom didn't teach me Yiddish, but my dad taught me a little and sang me a song called "Jerusalem of Gold." Some of my cousins learned Yiddish because they went to a Jewish school, but I didn't.

I was born at one in the morning in a clinic in Palermo neighborhood, but we later moved to a house on San Nicolás Street because my mom wanted a backyard, not an apartment. Today, I met with a psychologist who happens to live in the same neighborhood where I grew up. My childhood was wonderful—I was happy. I was a blonde girl with curls. In one photo, I'm sitting on a blanket, wearing an embroidered dress, with chubby little hands. I lost that photo.

I never went to kindergarten because they didn't really exist back then, or the ones that did were for the rich. As a child, I loved painting flowerpots, and we'd buy flowers to plant in them. My dolls were made of cloth, and one year for the Three Kings holiday, I got a mate set as a gift. I played hide-and-seek, hula hoop, and other games. I even liked washing the yard and the sidewalk. I had one friend, but she wasn't a good friend—she only came to my house to eat.

I started school at five years old. I went to School Number 12, Ernesto A. Bavio, on Bahía Blanca Street. At that time, I had a Jewish friend because my parents were Jewish. His name was Simón, and he used to give me rides on his scooter. Maybe I should have married him. Later, when I was around thirteen, I got my own scooter and would ride it around the neighborhood.

When I was eight, I took care of a neighbor's daughter. Her father tried to abuse me. He exposed himself and wanted me to do things, but I ran away and told my mom, who reported him.

I also had an older brother who passed away a few years ago—I don't remember exactly the year. When we were kids, my dad went to Brazil to work in a textile factory because he couldn't find work here. I adored him then. He brought me an Aerolíneas Argentinas bag and three little dresses. We wanted to join him in Brazil, but he didn't want us to come. He was a womanizer, and he didn't want us interfering in his life there. I loved him back then, but he hurt me deeply later on.

When he passed away, about twenty years ago, I felt like he wouldn't leave me alone. To this day, when I look in the mirror, I see his face instead of mine. When I had my passport photo taken, it was his face that showed up, not mine. Why does that happen to me? He still tells me things in my head—he controls me. He calls me crazy and says I talk nonsense.

I went to school wearing my white coat, all neatly starched. I had a teacher who made us draw, and I still like drawing, though it's expensive. Back then, I used to draw flowers and maps. At home, as a child, I also drew faces because I had a complex about my nose. I wanted it to be upturned, even though I don't have a big nose. I used to draw myself with a small nose and say, "That's me." I also drew houses with apple trees.

I remember a teacher who once yelled at me for laughing. As a child, I also loved dancing—and I still do. Back then, I danced classical and Spanish styles. I wore a polka-dot dress with a rose in my hair, my face painted with blush. But the most beautiful dress I ever had was a pink one with sequins, a mini skirt, and a matching purse. I wore it for the first time at a Jewish party at the River stadium, where Estela Raval sang with the Cinco Latinos.

When I turned fifteen, they threw me a party. I wore a red dress with a hat. There was cider, beer, pastries, sandwiches—everything. I danced with a boy I liked. I had an album from my fifteenth birthday, but I lost that too. Back then, my mom controlled my outings. When I went out, I wore a mini skirt, bracelets, rings, earrings, and high heels. I had perfect legs. Now they're fat.

Later on, I dyed my hair bluish black, and I looked like Sara Montiel. I also used tweezers and rollers to straighten my hair.

I went to school by bus because it was in Caballito neighborhood. At that time, there was an inspector on the bus who checked tickets. I always threw mine away, but the

inspector knew me and never said anything. Eventually, I finished high school. My mom passed away, and my dad remarried. I got along well with my stepmother. She wasn't like my mom—she was a more independent woman. My mom is like an angel to me because she never bothered me again. My dad, though, is disgusting—he mistreats me. I miss my mom.

My favorite season is spring because that's when flowers bloom. I also like summer. In high school, at the botanical garden, I used to collect leaves and put them in a folder. They were all beautiful, one more than the other. My folders were neat, and I had large, beautiful handwriting. What does that mean? It means I have a lot of personality, and I don't let others dominate me.

I've had several jobs. My first was as a saleswoman in a perfumery. I was also a manicurist for men. I worked at a Greek salon where people danced like birds. I sold items and worked at the counter there. Sometimes I think I was a doctor in another life. I feel this because when I see prescriptions, everything comes back to me.

The most important things in my life were having two children and experiencing a great love. The love of my life was Alberto. There was passion with him—kisses, hugs, true passion. Now, that's gone. I met him while walking downtown on Florida Street. At the time, I was working as a packer at Harrods store. They'd bring me colored paper, and I'd make beautiful bows. That's where I met Alberto. I was on my way to the bus, and back then, I lived in an apartment.

Alberto was beautiful—he was a model. I've never had another love like him. We were together, and I wanted to have a baby, but I couldn't get pregnant. I handled the money and the Diners card because he didn't have any. He was a widower with two children. One holiday, he went to Córdoba without me, and I got angry and left him. I went to a travelers' hotel, but later I regretted it. Still, he never came back for me.

When I was single, I had a baby girl. She must be around forty now. At the time, I lived alone. Later, I had another baby. By then, I had a new partner, Jorge, who was from Madrid. Before he left me, I left him. I have to ask my psychologist why I always leave first, before they do.

Jorge printed cards; he had a small press in Ciudadela. We had a house together, but at the beginning, we didn't even have a bed. We slept on a mattress. When he won some money, I made him buy furniture, and my mother-in-law gave me pots and pans. I cooked everything—pascualina tart, chicken, mondongo stew. Now, I don't cook at all.

We were together for about two years, but I got tired of marriage, and he didn't want children.

After Jorge, I had another partner. He was a watchmaker, Russian Orthodox, and we were together for about two years. We lived in Ballester, a beautiful neighborhood. One day, while I was at home, somebody knocked on the door—it was the police, coming to get me. I think the neighbors must have called them. At first I thought it was a joke and laughed, but the police took me to Esteves. I ended up staying there for four years.

I had nothing—no clothes, no money to buy mate. No one came to visit me. I was in the Devoto ward, and I didn't like being there. I used to talk to María Rosa [*] and cry. Why did I end up in the hospital? My patience ran out. My mom passed that patience on to me. I felt so alone.

I don't want to talk much about my time in the hospital. I was there for four years before moving to PREA, sixteen years ago. How did I end up in PREA? They told me about it at the hospital. At PREA, we had breakfast, made aprons, and painted boxes. After I left, I worked at a flower stand on the hospital grounds. That's where I met Vanesa, who was part of the community. She could have been my daughter.

The first place I lived after leaving the hospital was a house on San Roque Street. I lived there with Delia (who passed away), Anita, Mariela, Blanca (who also passed away), and Lucía, who was my friend. Lucía was older than me, very neat and tidy. I, on the other hand, have a messy wardrobe. In that house, I left a part of my life. I had good companions there—four of them have passed away. Dora also lived there, but she went back to the hospital because she stopped bathing and taking her pills. She used to call me “my Jew.”

We had to leave that house because the owner said it wasn't in good condition. When maintenance workers came, they stole our TV, a recorder, and a cell phone. After that, Mariela and I moved into a new house. There, I had a neighbor who sold ice cream, and we became friends. I didn't like that street much because it was unpaved.

Later, I moved to Bermúdez Street. There I lived with Manuela, who was crazy—she would kick, throw clothes at me, keep me awake, and insult us. I stayed in Bermúdez for about three years with Soledad, who is my friend, and then Martha moved in.

Now I live in another house, and I've been there for a year. There are seven of us. My main companion is Nadia. Sometimes we fight, but we make up. Living together is hard. I'd love to rent a small studio apartment and live alone, but I don't have enough

money. I don't get along with Clara because she thinks she knows everything. I regret moving from Bermúdez.

I have a pension now. When I was in the hospital, I had nothing, but since getting the pension, I can buy what I want. If I feel like going to a café and buying pastries, or if I want to buy makeup, I can. Sometimes I go dancing on Sundays at a place with free entry. I dance with my friends and drink Pepsi or flavored water. I've also been seeing a lawyer, but I haven't seen him in two months. He's always making excuses.

My daily life now starts with waking up, taking a bath, and having breakfast—usually mate, coffee with milk, or yogurt. Then I make my bed. My wardrobe is a mess, and I can never find anything, so I need to fix it. After that, I put on makeup—it changes how you feel. I get ready, go outside to sunbathe, drink mate, and chat with Nadia. We also watch TV, but the channels are terrible now—I don't like them. At night, if I can't sleep, I get up and watch movies.

I go to Community Center Librementemente on Mondays, Thursdays, and Fridays. I take my pills there, but mostly I go to keep Nadia company. I used to take them at home.

This year, I had surgery. I had cancer, and they removed a breast, which I want to reconstruct. When I was operated on at the Gandulfo Hospital, all the girls from PREA came to visit me. The nurses took excellent care of me. Nurse Ailén [*] gave me such peace—there's something personal about her.

PREA changed my life. It helped me leave the hospital and have my own little home. I've never talked about my life before.

MARY

-60 years old-

Interviewed in February 2017



I was born in Colón, in the province of Entre Ríos, on November 3, though I don't remember the year. Both my parents have passed away. Back in Entre Ríos, I helped plant potatoes and pumpkins, milked cows with my mother, and we had little hens for eggs. I had twelve siblings. One still lives in Entre Ríos, another in Caballito, and another in Lomas—but that one never visits me. The one in Caballito said she'd bring me clothes, but I told her I didn't need that—I just wanted her to visit. I don't think she'll come; she's probably afraid I'll ask her for money. I also have a brother in Ubajay, but I don't even know where that is.

I didn't go to school because we lived in the countryside, and there weren't any schools there—there was nothing. I don't go to school now either because it's too dangerous. María keeps insisting I should go, but it's too risky. By seven in the evening, people start prowling around the house, and if I leave at nine, who's going to accompany me? Still, I want to learn to read and write.

When I was thirteen, I came to Buenos Aires with my older brother. I left because my father disrespected me, so I reported him. My brother said he would take care of me

and promised to build me a room. By then, I was already a young woman. But my sister-in-law treated me horribly—she didn't want me living there. She made my life miserable.

I had a very sad childhood. Eventually, I left and went to my cousin's house. She didn't recognize me at first because I was so dirty and poorly dressed from living with my sister-in-law. But when I told her who I was, she remembered me. I stayed with her and worked at a bakery in Ezeiza.

I spent a long time with my cousin because I was in and out of the hospital so often. I don't even remember the first time I was hospitalized. My sister-in-law accused me of trying to hurt her daughter, but that was a lie. The truth was that she locked me in a room without food while she went dancing. I defended myself. I explained everything to the doctors and in court—that I hit her with sticks because of how she treated me. My sister-in-law abandoned me, leaving me in the hospital, but my cousin always came to pick me up.

Later, I got married, though my husband wasn't the father of my children. We married at the civil registry because the priest refused. The priest told my husband, "Why would you marry that sick woman?" He said I wouldn't be of any help to him because of my condition. But my husband didn't listen and married me anyway. We went to the civil registry office in Monte Grande.

My husband was a good man. He took me out of the hospital and treated me with kindness. If he were still alive, I wouldn't be here now. Most men just want to use you, but he wasn't like that. We did everything together—errands, walks, sometimes even eating out. He also taught me things I didn't know, like the value of money.

He wasn't in good health—he had osteoarthritis and a heart condition. The doctors wanted to give him a pacemaker, but he refused and said it wasn't worth it. I respected his decision. Before he died, he told me, "Don't leave this house. It's yours." But since I don't have any papers to prove it, my sister-in-law gave everything—the house and all the documents—to my husband's son.

I met my husband when he came to pick up another girl from the hospital—a friend of mine. She was his girlfriend, but she didn't want to marry him. One day, I told her, "If you're not going to marry him, introduce me instead." And that's exactly what happened. He introduced himself to me, and that's how we got together. He worked in a brewery, though I can't remember which one. His job was preparing the beer.

We were married for many years, and I took care of him until he passed away. After his death, my stepson wanted to sell the house. He told me I had to leave and go live with my sister-in-law. He claimed I was fine, but my sister-in-law admitted me to the hospital instead.

They abandoned me like a dog, and stopped coming to the hospital. I didn't even have my ID back then. I only have it now because María Rosa[*] helped me get it. My sister-in-law had control of my pension as my legal guardian, so I couldn't retrieve my documents from her. She had that authority when she sent me to the hospital. My brother also went through hard times—he was hit by a car after my sister-in-law demanded money from him, even though he didn't have a job. Sometimes he borrowed money from my husband and couldn't pay it back.

My life in the hospital was miserable. They didn't give me soap for my clothes, so I had to wash everything in the laundry without any. A kind nurse once gave me a box of soap, and when my cousin came, I repaid her for it. I used a tiny piece of soap just to bathe and keep myself clean. I was in Ward Seven for about ten years.

I was discharged at one point, but no one came to pick me up. My cousin couldn't take me because she had a sick husband and child to care for. Still, she did what she could. Whenever I called her, she came. She was the only one who visited me. Every month, she or her husband brought me essentials like sugar, yerba, soap, and even a pack of cigarettes because they knew I smoked. My sister in Caballito told my cousin to take care of me, but how could she, when she was already overwhelmed with her own family?

I had a friend at the hospital named Vicky. Poor thing—now she's in a wheelchair, but I visit her when I can. She helped me a lot. If I didn't have something, she'd give it to me—jackets, clothes, whatever I needed. She became my friend because we were in the same ward, and we worked together. She asked me to help distribute food and milk to the tables because the buckets were too heavy for her. That's how we bonded. Vicky once gave me a silver ring, which I still keep safely. I only wear it when I go to see her. Eventually, I was discharged from the hospital, but still, no one came for me. Then I left through PREA. Two women, Viviana [*] and Silvina [*], whom I call “the twins,” came to get me. They saved me. I was in terrible shape—skinny, starving, and sick. I had a virus and had wasted away. I looked like a broomstick. Dr. María Rosa[*] also advocated for me.

During my time at PREA, I participated in all the workshops. I even did photography with Rodolfo [*], which I enjoyed for a while. We went around the hospital grounds, taking pictures. But I stopped going because the noises in my head made me feel unwell.

After being discharged, I moved into the PREA house with the other women, and we've been living there for five years. We take care of everything—paying taxes, electricity, and gas. I do my own laundry, clean, and run errands. I have a friend nearby who owns the house. She's kind and always happy when I check on her health. She says, "You're the only one who remembers me."

I don't talk much to the neighbors. I greet them, and if they talk to me, I reply. If they don't, I just greet them anyway, but I keep my distance. Since I left the hospital, everyone says I've changed—I look healthier now, even "fatter," as they say. My stepson noticed too. He told me I look much better now than before.

I have two children—a daughter and a son. I don't remember their ages or even my own very well; I rely on what's written in my ID. I had my children before I was admitted to the hospital. My husband met my daughter and became her father in his heart. We explained everything to her when she was little.

Before I met my husband, I was with a man who cheated on me. He got me pregnant, promised to marry me, and then said he had to leave for Paraguay because his father had cancer. He never came back. That's how I had my son. Years later, my son told me he didn't want me to look for his father, so I never did. I haven't seen or heard from my son in more than ten years. The last time we spoke, he said he was working in an illegal bakery, earning barely anything. He also knew my sister-in-law wanted to admit me to the hospital. Now, for the elections, I plan to ask María Rosa [*] to search for him through the voter registry.

My daughter's father deceived me as well. I met him through a woman, and when I was about to give birth, I discovered he was living with another woman. She told me, "I'm pregnant with my husband's baby." After that, I walked away. There was no point in lowering myself any further.

Afterward, I was left wandering the streets with my baby girl, homeless and jobless. For a while, I stayed near the Constitución train station, where I made a bed for her while I sat up to sleep. Eventually, I found my cousin, who took the baby in. I stayed with them for a while until my cousin asked me to leave because her son needed the space. I raised my daughter until she was two years old. Then my husband and I helped care for her. He provided for her as if she were his own child. After some time, she went to live with her godmother. My son, meanwhile, grew up with a woman I call Grandma. She isn't his real grandmother, but she cared for him when I couldn't. I'm at peace knowing she looked after him so well.

My sister-in-law once asked my son to take care of me, but he refused. He cut ties and didn't want anything more to do with me. I don't know much about his life now, though I imagine he has children, which means I must have grandchildren.

My daughter, on the other hand, keeps in touch occasionally. She called recently to say she'd come visit me. She works at a clothing stall in Monte Grande, I think. Sometimes she visits, and when she does, we share a Coke or something, but she's quiet—just like me. You must really coax her to talk.

I stay active by going to workshops like “Move Your Body,” where I do Pilates, and “Desayunate.” Mirta [*], who leads the Pilates sessions, is wonderful. We even dance during the sessions. Recently, I asked her for a photo because my cousin wants to see one of us exercising. Analía[*] also took a picture of me with her and her son.

I'm still close to my cousin and her family. I have a nephew, and I usually spend the holidays with them. This year, I split the celebrations—spending one with the my housemates and another with my cousin's family. My cousin and my nephew are the only family I have left.

PATRICIA

-43 years old-

Interviewed in October 2016

[Orlando]

I met Patricia in Temperley, when she was in the hospital. At the hospital, they invited inpatients from Cabred Colony to spend the holidays there and took us to visit the most lucid patients in the Colony. I was among them. I looked around and saw a girl running. Then I invited her to dance. "I'll come visit you," I told her. From the hospital, I wrote her letters and sent them by mail—hospital to hospital. I must have sent her seven or eight letters, but I only received three in return.

As they started organizing carnivals—first in Open Door and later in Esteves—we gradually got to know each other. On weekends, if I wasn't working, I went to visit her. At that time, I worked as a cleaner at the hospital, and later I moved to the kitchen. I saved up money and started building this little house. First, I gathered materials—bricks and sand—and then I worked with some guys from across the street to begin construction.

The suspenders I'm wearing are from the Colony. With the money I'd saved, I took a leave, and my aunt eventually arranged my discharge. I bought this land and started building the house bit by bit. President Kirchner gave us the roofing sheets, along with mattresses. This area used to flood when it rained—it was all water before we had the sheets. Later, Cristina Kirchner came with two or three trucks and brought supplies for everyone.

I was in the hospital for five years, from 1994 to 1999. I'm originally from Corrientes Province, from Mercedes—that's where I was born. I lived in San Martín, in Greater Buenos Aires, with my uncle, father, and mother, but my mother had to return to Corrientes after separating from my father. I stayed behind, and later my father passed away.

After that, I joined the army. During my service, I hit my head. They ran an EEG, but it came back normal. From there, they started treating me in different places. I went to a hospital in Corrientes Capital—it's named after a saint. Afterward, I returned to Buenos Aires, to my aunt's house. She spoke to a judge, who advised her to take me to the hospital, saying they would treat me well. That's how I ended up in Open Door.

I ran away from the hospital a few times, but eventually, I told them, “If you give me a job, I won’t escape anymore.” And I kept my word. They gave me work and everything I needed. I opened a bank account at the National Bank and saved my earnings there.

For a year, I worked in the hospital kitchen as a patient. It was good work, though heavy. I cooked for 2,600 people, using massive stainless-steel pots and pressure cookers. We filled the pots with ingredients, let them boil, and watched them carefully. Once the food was ready, we turned off the stoves, loaded the bins, and distributed the meals by truck to the different wards.

The first truck left at 8:30, the second at 11:30, and by 1:00, everything came back empty for cleaning. At 5:00, we started all over again. I considered it a hobby compared to the jobs I’d done before. I’d worked in construction and made crockery—both tougher than cooking.

One day, the social worker asked me, “Do you like working here?”
“Yes,” I told her. “It pays well.”

Every bit of money I earned went into building this house. I started with the foundation and worked my way up. Another guy helped me with the walls. Once we finished, I added the roof and plastered as much as I could. Back then, materials were cheaper. Now, money doesn’t go as far as it used to, and everything is so expensive.

[Patricia]

I was in the hospital a little longer than he was. I came from a youth institute. As you grow older, they transfer you—you can’t stay in the same institute forever. I don’t remember much about the institute, except that I was locked up. I was born in Córdoba and raised in the Quilmes area. When I was five, my mother left me. She didn’t have money, food, or anything else, so she decided to put me somewhere so I wouldn’t suffer. She thought it was better that way. Some people just abandon their children, and that’s what she did.

I ended up in the hospital after having a nervous breakdown. Like anyone, I had a breakdown because of personal problems. But because of that, they labeled me as crazy and transferred me from the youth institute to the hospital. Later, a good doctor evaluated me and said, “There’s nothing wrong with her.” He gradually reduced my medication until I didn’t need it anymore. I’ve been off medication for a long time now. I was in Ward Seven, and things went well for me there. They always treated me kindly—I was never mistreated. I made good friends. In the hospital, I helped the

elderly patients—feeding them, bathing them. The chief nurse loved me like a daughter. I was basically her right hand in the ward.

When I heard about the PREA program, I was eager to leave the hospital. The doctor in Ward Seven supported my discharge, but someone in the ward said, “She doesn’t know how to do anything. She won’t manage outside.” Later, that same person admitted, “I was wrong.”

I signed up for PREA and moved to Temperley with a group of women. At the time, my hair was short because in the ward they always cut it to prevent lice—we weren’t allowed to have long hair. I’d always wanted long hair, but they never let me. So, I told myself, “I’m going to make my own decisions now,” and that’s exactly what I did.

My first stop after discharge was a small house near the hospital. I lived there for two years with four other people. One of them eventually went back to the hospital—I expected it, but I kept quiet because I was afraid it might cause problems for me.

That’s when I met him. We got to know each other gradually, and after seven years of dating, we got married. He says I played hard to get, but eventually, I made up my mind. The wedding was beautiful, and so was the party—I’ll never forget it.

[Orlando]

We got married in 2004. I waited for her in my suit from six o’clock in the evening, standing like a statue. I thought to myself, “I want a partner. I don’t want to die alone.” I was older than her, but when I saw her, I thought, “She’s the one. She’ll be my partner.” And I wasn’t wrong.

María Rosa[*] asked me, “What are you going to do with this woman?” I replied, “We’re going to have a blessing and celebrate it at PREA.” We organized the wedding together and invited my colleagues from the hospital. Dr. Linero gave us a night in a hotel as a wedding gift. That night was amazing—the hotel room even had screens on the ceiling.

We waited a year before trying for a baby. She was on birth control at the time—receiving injections at the hospital—and even after moving to the PREA houses, she continued the treatment. After a year, I told her, “Let’s have a baby. One or two, depending on what life gives us.” She agreed, and we started trying. When she got pregnant, she told me, “I’m pregnant.” Our son was born in Luján.

At that time, I was working in the hospital kitchen. They pulled some strings to get me into the kitchen, so I left my cleaning job. I worked in the kitchen for eight years and as a cleaner for five. I worked hard, like everyone else. I never complained to the nurses or caused problems.

Later, they canceled the kitchen contract, and all of us kitchen staff were reassigned under the Colony's management. Eventually, I retired because I had a relapse into depression and couldn't continue working. I stayed home after that.

[Patricia]

He had a problem last year. It all started with an issue involving a motorcycle, and I had to go through a whole process to get him admitted to the hospital because they didn't want to accept him. I went to the hospital entrance and explained the situation, but they told me, "No, you need to go to the police and get a document."

So, I went to the police station and spoke with the commissioner, asking if they could help me. He said, "But how can they make you bring him back? They should be the ones accompanying him." I told him, "Exactly." He agreed, and an ambulance came to pick him up. I rode in the back with the commissioner and the baby.

Luckily, there was a nurse at the hospital who really cares about him, and she helped me. His aunt also helped. He stayed hospitalized until recently, when he was discharged. Now, he gets his medication every fifteen days. PAMI provides him with a disability allowance, and they mentioned getting him a companion, but we're still thinking about it. I'm hesitant because I don't like people interfering in our lives.

For now, I'm the nurse for both of them. I make sure he takes his blood pressure medication and the others. Every morning at seven, I remind him to take them. The baby also has medication—he takes pills for seizures and his thyroid.

Our son goes to school, and a van comes to pick him up and drop him off. On Thursdays, he goes to a Public Rehabilitation Center in Luján (CERELU) for occupational therapy. During the week, if he has a doctor's appointment, we take him. If there are errands to run, we take care of them—whether it's going to the doctor, handling paperwork, or doing the shopping.

For me, being a mother is the best thing in the world. I don't even have the words to describe it.

NANCY

-43 years old-

Interviewed in January 2017



I was very sick, so my dad took me to the hospital. It was really bad. I must have been seventeen or eighteen. My son had to stay with my parents while I was admitted. I was in a terrible state—I broke things, shattered glass, everything. I was full of rage, maybe because I hadn't taken my pills. I've been on medication ever since I got sick and was taken to the hospital. Now I'm doing fine. I'm calm and get along well with my house companions.

My childhood was terrible—really bad—because my husband used to beat me. When I was pregnant, he kicked me in the stomach. I went through a horrible time. Eventually, I ran away from him and moved in with my parents. I never heard from him again.

I met him at school. I was attending night classes to finish seventh grade. I fell in love with him, not knowing how much he would hurt me and how badly he would treat me. We went out for a while, and then I moved in with him and his family. I must have been seventeen or eighteen. When I was about four months pregnant, he hit me in the stomach, and that's when I decided to leave. I couldn't stay with him. To me, he wasn't a father—he was violent, even while I was pregnant.

When I was taken to the hospital, my son was only three years old. He was so young. When I was doing well, I took care of him, bathed him, and took him to preschool. My dad helped me a lot—he gave me money to buy everything I needed for my son.

I was born in Capital Federal and lived in Monte Grande district before we moved to Fiorito in Lomas de Zamora city. Both of my parents are from the province. My dad is retired now, but he used to work at a factory that made car wheels and also cleaned offices. My mom stayed at home. I have five siblings, and I'm the oldest. The youngest is twenty-seven, and I'm forty-three.

My son works at a cardboard factory, loading boxes onto trucks. He comes home exhausted. He's twenty-one now and lives with his girlfriend at my parents' house. I saw him over the holidays, and it went really well. My daughter-in-law gave me a necklace and earrings. She was so happy to see me. I spent Saturday, Sunday, and Monday there with my two sisters, my son, and my daughter-in-law, and we all ate together. Then for New Year's Eve, I spent it quietly with just my mom and dad.

My siblings all work. The youngest doesn't because she stays home to care for her little girl, my niece. One of my sisters works in a shoe factory, her husband works at a pizzeria, and another brother-in-law is a bricklayer. My brother works in a big market, and his wife stays home to take care of the kids. I'm going to be an aunt again soon! My other sister lives in La Plata city with her husband and kids. Sometimes I see them for the holidays.

When I arrived at the hospital, my dad stayed with me while I was admitted. They restrained me, gave me an injection, and I fell asleep. The next day, they woke me up, gave me food, and after a few days, moved me to Ward Three. I stayed in that ward for seven years.

I liked Ward Three. The nurses were kind, and the food was good. Sometimes I helped wash the dishes and mop the floors. Afterwards, I would go for walks in the park with friends. I had two close friends there—we drank mate together, talked, and became really close. At first, I didn't know anyone, but over time we bonded. We would go to the grocery store to buy sandwiches and soda, often spending our entire salaries. They didn't have much money, so I would buy things for them too. We bought essentials like shampoo and other supplies ourselves.

I also participated in workshops, like the tapestry workshop, and I went to church. Before being admitted to the hospital, I wasn't on any medication, but I started taking pills there. I don't remember much about the hospital anymore—I just know I was in bad shape. They gave me injections and so many pills that I felt drugged all the time.

My parents visited me regularly. They would bring me cookies and sweetener, and we'd drink mate and chat. My mom or dad came every Sunday. Sometimes I even got to go home to spend the holidays with them.

I left the hospital through the PREA Program. Cecilia[*] asked me if I wanted to leave, and I said yes. I wanted to get out of the hospital and live in the houses like other people, like the other women. I attended all the workshops, and now I'm here. The workshops helped us prepare to leave—writing, talking about what the process was like, and deciding if we were ready. Then Cecilia told me, "You're leaving because you're a very good girl."

I left on January 13, 2014, with two others. We came to the house, where we were welcomed by Mabel and Adriana. There were supposed to be five of us, but in the end there were seven. We all got together and took a photo.

Life here is so much better. The hospital was so strict—you had to go to bed early, take your medication early, and get up early the next day. Everything had to be done on schedule. Some nurses were kind, but others were cruel. While they weren't mean to me, I saw how they treated others. They would force them to bathe, sometimes grabbing them by the hair. I was afraid that might happen to me, but thankfully, it didn't.

Since I started living in the house, I've joined workshops like Desayunate, where we learn how to prepare breakfast, enjoy cookies, drink tea or mate cocido, and talk about the radio. This year, we're planning to create an open radio program, and I'm excited about that. I also plan to sign up for the childcare workshop.

My family comes to visit me here, and they say I'm doing better. I don't travel to visit them because they don't let me go alone—they say I need someone to accompany me since I don't know how to travel. So, my mom or dad comes to pick me up. My mom came last Saturday with my daughter-in-law. I hadn't met her before. We sat with Mabel, drinking mate and eating cookies. Mabel said, "What a lovely daughter-in-law you have." She looked so tanned because my son bought a big inflatable pool, and I saw photos of her sunbathing in the water.

One of the most beautiful moments I've experienced here was when they celebrated my birthday. Ailén[*] made me pizza, and I bought cake and sandwiches. My birthday is March 22, and it was my first birthday after leaving the hospital. I hadn't celebrated my birthday in years—not once in the hospital. It brought me so much joy. I bought myself a long party dress in downtown Lomas for the occasion, as well as a turquoise dress and leggings with my own money. I get a disability pension, which I've had since

my time in the hospital, and Cecilia helps me manage it.

I enjoy cleaning, bathing, and watching TV. I like watching soap operas. One of my favorites was *Amor Prohibido*, though it had a sad ending because the girl didn't marry the boy she loved. At home, we talk about how we're doing, how we sleep, and whether we're taking our medication. I also help Mabel cook. She's taught me how to make salad, milanesa, mashed potatoes, and stew. I enjoy eating everything!

Last year, I went to Mar del Plata for the first time, and it was amazing. I went with Cecilia, Cristina [*], and three others. We traveled by bus and stayed in a beautiful hotel. The food was incredible—everything was delicious. I shared a room with Petro, but she went her own way, so I had the room to myself. We walked around, and I bought sneakers and sunglasses. The beach was gorgeous—the sea so blue, and the weather sunny the whole time.

I hope anyone who reads this will think kindly of me and be happy for me—that I've left the hospital and am doing well now. The hospital was a terrible place. So many women there are overmedicated, like I used to be. It's sad to be so drugged, and you miss your parents but can't see them. Now, I only take a small amount of medication, thanks to Dr. Roxana[*]. It helps me stay calm, avoid fights with my companions, and do more around the house.

MARTA ESTHER

-54 years old-

Interviewed in July 2016



I left Esteves almost exactly a year ago. At first, I came here just for a day, then for two days, until I was finally fully discharged in September. I was ready to leave earlier, but I had to undergo surgery for rectal prolapse. It happened because some women lose muscle tone, and in my case, my rectum came out. Part of it was outside, and I couldn't sit or do anything. It happened while I was still in the hospital because I was always helping—pushing wheelchairs, assisting patients, bathing them. In the hospital, no one forces you to help, but I always volunteered, except last year when I became very sick. They took me to Gandulfo General Hospital for surgery, which is nearby. The operation was very risky—I was so close to “touching the sky.” I have HIV, which made everything more complicated.

I was born in 1962 and grew up with my parents and siblings. There are four of us, though one is adopted. I have two sisters and a son. I was born in Tigre and raised in San Fernando, both north of Buenos Aires city. My childhood was difficult. My mother was strict—she used to hit me with a belt, even with the buckle. My father, on the other hand, loved me. My parents fought constantly. My mother would throw plates of food at him. It was like living on a battlefield.

One day, my father couldn't take it anymore, so he left. I was nine years old at the time; my brother was eight, and my sister eleven. The next time I saw him was when I was finishing elementary school. He came with his new wife and took us to a pizzeria. My mother was furious. After that, I never saw him again. I don't know whether he's alive or dead.

My mother devoted herself to work and made sure we got through school. She barely slept—only two hours a night—before waking up at two in the morning. She sewed at home, worked in a bar as a kitchen and cleaning assistant, and did housework in private homes. She lived about fifteen blocks from her jobs and always walked to save on bus fare. She was very neat and meticulous. She worked for one family for many years, but when we checked her retirement papers, we discovered they had never made any social security contributions for her.

I finished primary school at thirteen and started secondary studies in a commercial school. I paid for it myself, but I was so tired that I kept falling asleep. The truth is, I didn't finish. I worked and couldn't stay awake to study. For six years, I worked at the printing press of Adolfo Pérez Esquivel, the Nobel Peace Prize winner, assembling magazines. At fourteen, I graduated as a catechist, and the parish I attended was very poor. At that time, Adolfo was friends with the priest and often visited. I lived modestly and needed to work, so Adolfo chose me. He said, "I like this girl for the bookstore." Since I had extra time, I also helped in the printing press.

Because I was still a minor, my salary was deposited into a savings account. Later, when I was older, I kept working for Adolfo. But I made a foolish decision. I didn't enjoy the job—I felt I was being paid too much for doing too little, and I didn't think I deserved the money. So, I quit. Looking back, if I had stayed, I would have had a good salary by now. Instead, I went home and started doing odd jobs—running errands like paying electricity bills, cleaning houses, and doing whatever I could to get by.

I got sick when I was nineteen, in the town of Pinamar²⁰. I had been going there as a catechist for about five years without any problems, but that last time, I fell ill. I stayed with a group of young people at a hostel, but I don't really know what happened. They noticed I wasn't sleeping, wasn't eating, and that I was deeply depressed. After that, I don't remember anything.

²⁰ *Pinamar is a popular town near the sea, for summer vacations.*

The priests spoke among themselves and said, “You have to go back to Buenos Aires and see a psychologist or psychiatrist to find out what’s going on.” They sent me back by bus with another catechist.

What had happened was that I was about to marry a boy who was studying law, and I had been raped when I was five years old. At that moment, telling him I wasn’t a virgin was unbearable. I think that’s what triggered everything, although I don’t remember it all clearly.

I spent five years seeing a psychiatrist in the San Martín de Tours community—and the psychiatrist seemed crazier than me. He prescribed so many medications. I would go to his office, and he would make me take them right there. I was on teracide, haloperidol, and many others. My diagnosis was “paranoid schizophrenia,” but I always doubted it. When I was nineteen, I had my daughter. She wasn’t well. I started looking for a job and eventually found one in a bar. That’s where I met her father. After six months, we started dating and had sex. My father-in-law wanted me to have an abortion, but I refused.

At that time, I was living with a close friend. I have two close friends: my sister Alicia and my friend Concepción. I met Concepción through catechism. She had a brother who was a priest in San Fernando. Her family was large—eleven siblings—and they lived in San Isidro district. Concepción took care of me for five years. She let me live in her home, gave me my injections, and made sure I took my medication. She cared for me as if I were her sister. When I was deeply depressed, she even helped me bathe, because my own family couldn’t take care of me much.

I lived with her in Quilmes for five years. On weekends, we would go to San Isidro to visit her parents, who were quite well-off. When we visited, I liked to help by cleaning and assisting the maid, but they would scold me, saying, “You’re not here to clean; you’re here to feel at home.” Concepción had two boys, one of whom was my godson. Including me, there were five of us living together.

Both Concepción and her husband had old Citroën cars. At one point, I told them, “You can’t keep spending your money on me—you have your kids. Why don’t we find a hospital?” So, we started looking. We drove all over, visiting hospitals in Claypole, Campana, and Melchor Romero towns. After seeing about five psychiatric hospitals, we arrived at Esteves. I chose that hospital because, back then, it was beautiful. There were flowers, it was comfortable, and the care was good. Dr. Linero, the director, genuinely cared about the patients. But over time, the hospital changed a lot.

My goal was to recover and return to my life. I did get better and was discharged, but I was stubborn. I went back to work and stopped taking my medication. This happened several times—I was discharged about seven times, only to stop my treatment again.

During that time, my daughter was being cared for by another couple. But when they separated, the case went to court. The judge came to Esteves Hospital to decide whether to change her guardianship or put her up for adoption. That devastated me because I had never agreed to adoption—only to guardianship. But the judge didn't respect that. Looking back, I realize it may have been for the best, as I was in a very bad place then.

Later, during Menem's presidency, my daughter searched the records and found me. When we reunited after many years, she was studying. I had suffered terribly because of losing her, but eventually, I saw that it was better for her. If I hadn't recovered, what kind of life would she have had? I haven't seen her in ten years.

I was hospitalized for about two years. At one point, I had permission to leave, but my mother didn't come to get me because she didn't have the money. One day, a doctor asked, "Do you want to go home?" and I said yes. That Friday, the doctor gave me money for a sandwich, the bus, and the train—everything I needed to get home. I went, but on Monday, my mother brought me back. The doctor told her, "Do you want me to hospitalize you or your daughter? Because your daughter doesn't need to be hospitalized anymore." That doctor was very kind; she's passed away now—may God rest her soul.

While I was at the hospital, I often ran errands for her. She'd send me to buy ingredients—potatoes, carrots—for the doctors' meals. Eventually, I went back to live with my mother again. We had a large ranch where five of us lived together. I worked several jobs—paying bills for a bicycle shop and a warehouse, cleaning a hardware store, and working as a kitchen assistant.

But even then, I had trouble sticking to my treatment. I would get caught up in work, spend hours out on the street, and forget to take my medication.

That's when I met José, the father of one of my children, who has since come back into my life. I have three children: the oldest is thirty-four, the boy is twenty-seven, and the youngest, my daughter, is twenty-one. She's made me a grandmother. I lived with José as a couple, even though he was married.

At one point, I asked one of his sisters to look after my child because I wasn't feeling well and needed to be hospitalized. She agreed but didn't keep her word; instead, she took him to José and his wife. They raised and educated him well. His stepmother treated me

kindly and taught me good manners, but they never let me take him out alone.

Later, I was hospitalized again for five years. I was moved to Ward Four, and everything was worse there. That hospitalization was awful—someone always seemed to pick on me. I never fought back, but two women were especially cruel. They pulled my hair, stole my cigarettes, and harassed me. Concepción still visited me, bringing me clothes and checking in on me.

Eventually, I went back to live with my mother. That's when I met my youngest daughter's father. I worked late hours and came home at dawn, and he was a security guard in the neighborhood. He was kind, gentle, and we became friends for almost a year before dating. We were together for another year and then got married, but I didn't get pregnant right away.

His mother, who was very harsh, accused me of taking precautions, but I wasn't. We both went to the hospital to check if one of us was sterile. It turned out that I wasn't—it was just fear after losing two children. Eventually, I became pregnant and gave birth to my daughter.

We lived in my mother's house for a year before moving into his family's home, and that's when everything fell apart. He became violent, hitting me, and his mother treated me terribly. His father had passed away, and his mother depended on him financially. I became a burden. One day, he pointed his gun at my head—he had one because of his job as a guard. His mother told him to kick me out and leave the child with her.

He packed all my things—my books, my Bible, everything—into his Falcon and dropped me off at the corner of my mother's house in the rain. Thankfully, my neighbors helped me carry everything inside. But they wouldn't let me see my daughter. I went to their house and begged at the door, but they still refused.

Eventually, I ended up back in the hospital. That's when I lost the small apartment I had in front of my mother's house. When my mother passed away, I was left alone. My brother, who was my legal guardian, hospitalized me and sold my apartment.

I stayed in the hospital for nine years because I had nowhere else to go. Although I was ready for discharge after the first month, I couldn't leave without a home. To pass the time, I joined the rehabilitation workshops at the CREAR service, where I learned sewing and painting. My mother had been a seamstress, but I had never learned. At first, it was hard because the medication made me drool and my hands tremble. Things improved when Dr. Castelao adjusted my treatment. But over time, it became harder to stay motivated.

My sister visited me every month, bringing me clothes and some money for the grocery store. She worked hard to support me, and I'll always be grateful.

The HIV diagnosis came after I'd had my children. It was one of the darkest times in my life. I turned to prostitution because I had no job or income. My mother-in-law demanded money from me, so I felt I had no choice. At one point, someone even told me I wasn't fit to be a prostitute.

I found out I had AIDS seventeen years ago while I was at Esteves Hospital. It was very hard to accept. I had been sick—vomiting, diarrhea, unable to eat or sleep—and they ran tests. That's when the diagnosis came.

The news broke me. Even now, I struggle to tell myself it's just another illness like any other. Back then, it was much harder. I didn't mind helping people with HIV, but living with it myself felt unbearable. Even now, I'm scared—scared of cutting myself, of accidentally infecting my daughters. It's something I still wrestle with every day.

Since I wasn't hospitalized for treatment but because I had nowhere to go, a social worker at the hospital connected me with an HIV shelter in José C. Paz. It didn't go well. They said I would be able to visit my sister after the first month, but then they wouldn't let me leave. Living there was very hard—many of the residents were difficult to get along with. Eventually, I lied and said I was hearing voices so the hospital would admit me again.

Thanks to the PREA program and my companion Mariel [*], I finally managed to leave the hospital for good. I spent two years in the program. Mariel was a wonderful companion who helped me through the process. While I was in the hospital, she supported me with everyday tasks—shopping, combing my hair, and even taking me to the doctor to expedite my surgery. I also received a pension through Analía Monchetti [*] about a year ago, in February.

My psychiatrist, María Rosa [*], advocated for me during a meeting and said, "She's ready to leave." A year later, I finally left. I moved into Cecilia's home, which was an adjustment for both of us. She welcomed me and taught me a lot. I owe her so much. Even now, though, I struggle with how unproductive I feel. I sit here and don't do much. My closet is tidy, thanks to the PREA nurses, who taught me how to organize and do my laundry again. I used to know how to do all this, but in the hospital, you forget—there, you don't make your own decisions. They choose your medications, your bed, your food, everything. It makes you feel like an automaton. I've told María Rosa how hard this adjustment has been, but I understand it's all part of the process.

For example, one Sunday, my housemates Cecilia, Luna, and I visited the Cathedral in Buenos Aires. It was a beautiful but challenging experience. I hadn't taken public transportation in years, so taking the train and subway felt overwhelming. I even got lost once after stepping away to smoke, but I trusted Cecilia to find me. When we got to the Cathedral, we attended the noon Mass. Cecilia and I often talk about religion—she's more devout than I am, but we both believe that Christ died for us and that life always offers second chances.

My sister has visited me twice here, and she's happy with where I'm living now. She said, "At least here, if you have issues, it's with one or two people, not in a ward with 130 others." She's right. In the hospital, even bathing meant standing in a long line, naked, often with only cold water.

I've recently started taking a computer course to relearn basic skills. I had taken a similar one while hospitalized, but I forgot how to even turn a computer on. Things were hard back then—I had my glasses, wallet, money, and bus pass stolen at Esteves. That theft, along with the discomfort of traveling with diapers before my surgery, made it difficult to continue. I eventually had surgery at Gandulfo Hospital, thanks to a wonderful medical team. My son, José (his father), and my sister were all there to support me. My sister has always been there for me, and I'll never forget that.

I turned fifty-four in January. José, my son's father, wants to reconcile, but I'm not sure. So much has happened in twenty years. I wonder if we could ever get back together, but I'm taking my time to decide. Life has changed for both of us—he's now a cabinetmaker, working with pine and cedar. Like me, he lost his house and gets by with odd jobs, helped by his children.

My son works at a computer company. I don't see him often since he has his own life now. I wrote him a letter recently but haven't sent it yet. I don't know much about my oldest child. The last time I heard anything was ten years ago, when my mother passed away. My sister had her contact information, but her phone was stolen, and we lost touch. At the time, he was working in Entre Ríos Province, but I can't even remember his last name.

As for my youngest daughter, she's a mother now. I saw her when I was still hospitalized—she visited me with her partner and my grandson, who was two months old. We took the 549 bus to Temperley and had ice cream in the square. That's when she found out about my illness. She wrote me a beautiful letter, which stayed at Esteves, saying, "Mom, I love you very much." Despite everything, her father raised her well and now helps her care for her child.

Here, they give me daily pillboxes with my medication already prepared. When I first arrived, I was taking many more pills, but María Rosa gradually reduced them, which was a huge relief. Tomorrow, I have an appointment with the infectious disease specialist at Gandulfo Hospital, arranged with the help of my companion. They're planning to adjust my treatment because, while I was at Esteves, I wasn't properly monitored. The clinicians there conducted tests but falsely recorded that I had seen an infectious disease specialist. As a result, I was given the wrong medication.

When I transferred to Gandulfo—which is my jurisdiction—the doctor was shocked after reviewing my file and realizing how long it had been since I had received proper treatment. Now, things are finally being addressed, and I feel like I'm regaining some control over my health.

I've been getting involved in activities again. On Wednesday afternoons, I attend a literature workshop. Recently, we read a story about Alice and talked about the sunrise—it was beautiful. I used to enjoy writing, though I didn't do it often, and now I'm starting to explore that interest again. I've also been reading works by Alfonsina Storni, the Argentine poet who tragically took her life in the sea.

I've also made a friend who lives a few blocks away and attends the Community Center nearby. We often meet for tea, and she brings a lot of positive energy into my life. She was never hospitalized, but we met in a singing class. When I feel like going out for a bit, I visit her, and we talk about books, life, or her children.

Living with Luna was challenging. She's very young and saw Cecilia as her mother, which created tension. I often talked about it with my psychologist and psychiatrist. Eventually, María Rosa and my psychologist, Mariana [*], decided it was best for me to move—for everyone's well-being. Cecilia was undergoing chemotherapy, and they felt this change would allow her to focus on her health. It wasn't a decision based on any misbehavior on my part—it was made for my safety and for Cecilia's peace of mind. It's been three weeks since I moved into the new house, and I already feel at home here.

LIFE STORIES BEYOND MEDICAL RECORDS

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At the conclusion of our task, we have reached a point of maturity—both to reaffirm what has already been said and to open the door to what remains unwritten. This epilogue was designed to remain closely connected to the rest of the book. It reflects the voices of PREA workers and the impact that reading these life stories—the living material of this book— had on them. These reflections come from first-person testimonies expressed spontaneously during a monthly plenary meeting at PREA. These meetings offer a space for the entire team to review practices, share achievements and challenges, and plan collaboratively—a moment of collective evaluation. Before the meeting, the stories were shared with the team, who were simply invited to reflect: What did the stories stir in them? What resonated? What connections emerged? This chapter captures the outcome of that meeting.

READING THE STORIES: THE EFFECTS OF CLOSENESS

Each of these stories touched us deeply. While many of us have not worked inside the hospital, we are familiar with its practices and know the people behind these narratives. Reading about certain normalized practices moved us profoundly, as they exposed what is often accepted as routine within institutional settings.

Reading about the pasts of the individuals—the weight of what they endured—was particularly moving. It gave us a deeper perspective on their lives and an even stronger sense of purpose in our work. Some biographies revealed details we had not known, offering insight into why someone was hospitalized. For instance, we learned how the death of a loved one, financial difficulties, or another life crisis caused a rupture so profound that someone could say, “I never thought I’d end up here.”

We were especially moved by the stories of women we know and see every day—women who now seem whole and capable. Knowing parts of their past made us realize that their struggles could happen to anyone. How could someone not “go mad” after confronting such circumstances? How could anyone avoid that outcome without support or resources?

For those of us who have worked at PREA for nearly twenty years, these stories took us back to the early days, to the first discharges. At the time, we often thought: “This could be my mother. This could be my aunt. This could be me.” Over time, we became desensitized. Reading these stories brought those feelings back.

UNIQUE STORIES

When writing about lives marked by suffering or trauma, it can be difficult to avoid clichés. Yet, these stories stand out because they do not focus solely on shared experiences—hospitalization, illness. Instead, they are rich with the details of individual lives: where they were born, what their parents did, what they ate, or what music they listened to. These details shift our perspective on their lives, steering us away from the fascination with madness or the morbid curiosity often associated with psychiatric hospitals.

The personal details shared in these stories rarely appear in medical records or come up in our daily conversations with them. No matter how much we try to broaden our understanding as a health team, our view is limited. This distinct space—with its unique purpose and style of listening—allowed aspects of their lives to emerge that we had never known.

For some of these women, whom we've known for twenty years, there were parts of their biographies we heard for the first time. These details surfaced because of the trust built throughout the storytelling process.

Many of the stories reflect lives marked by suffering from a very young age. Others reveal how the onset of illness was triggered by events such as a separation or the loss of a loved one. What also stood out to us was how much the social environment shaped their experiences and behavior. Some women described themselves during hospitalization as being “like a sergeant” or “a bouncer.” These defensive personas were necessary for survival in the hospital environment. However, in shared living spaces, they were able to shed those defenses and relate to others in new, healthier ways.

THE BREAKDOWN OF NETWORKS

A recurring theme in these stories is the breakdown of social and family networks. In many cases, the death of parents leaves individuals adrift in a hostile, violent, world—circumstances that ultimately led them to the hospital. Another recurring factor is the lack of financial resources. Many arrive at the asylum not only because of mental illness but also because of poverty.

Another significant barrier is the absence of labor opportunities. Often, it is a social situation—not merely pathology—that determines hospitalization. In one story, a woman who had held multiple meaningful jobs lost her stability after becoming

unemployed during the 1990s. She said: “In the 90s, there was no work.” Her story is a stark reminder of the many people excluded from the labor market, with devastating consequences.

When someone loses their job, they lose more than income: they lose access to healthcare, the places they used to go, and the social connections tied to those routines. They lose their network. This collapse was a reality in Argentina in 2001 and remains relevant today, nearly two decades later. In this woman’s case, losing her last job in a context of widespread unemployment led to her final hospitalization.

A crucial part of our work is rebuilding and strengthening networks. Networks sustain us all. When someone falls outside that web of support, this is what happens. Our work in community care is to promote the creation of a network that includes everyone. We, as a team, are part of that network, but it must grow broader and stronger to support those who need it most.

THE LOSSES

The stories also highlight the profound losses that accompany hospitalization. First, the loss of loved ones and affection. One woman says, “If the walls could talk, they would tell of everything I screamed and cried.” This sentiment could be echoed by nearly every woman who has passed through the hospital—none have likely escaped without tears.

There is also the loss of material belongings. One woman expressed deep pain over losing her photographs—pictures from her fifteenth birthday, photos with her mother, images from childhood. For some, the absence of such photos is one of their greatest sorrows.

Another profound loss is the separation from their children. Some women have had their children taken away; some do not know where their children are or how they grew up. These children grow up without a sense of identity, disconnected from their mothers.

Hospitalization also strips individuals of privacy. One woman recalled how, upon admission, her underwear was taken away and replaced with hospital clothes. When she was discharged, the first thing she wanted to buy was a pair of panties—a symbol of her humanity and dignity.

Similarly, another woman, during an outing while still participating in in-hospital workshops, bought a spoon as her first purchase. These small gestures reveal how deeply hospitalization erodes personal dignity—and how meaningful it is to reclaim it.

PREA: A LIFELINE

In several stories, the invitation to join PREA is described as transformative. Some women admitted they were afraid; others said, “I tried, I gave it a shot, and now I’ve been here for years.” Reading these accounts, we were struck by how often PREA appeared as a light in the darkness.

What would have happened to these women without PREA? After years of confinement and abandonment, what paths would their lives have taken? Many described PREA as a beacon of hope, and we, as a team, felt humbled by that.

Our work, which centers on supporting individuals in the community, calls for ongoing reflection and self-questioning. For example, during a Coexistence Assembly, while discussing household organization, one user interrupted: “Enough about these issues—aren’t you a psychologist? Why don’t we talk about something else? Dreams, the unconscious—anything else.” Comments like this challenge us and reveal the delicate balance between supporting daily life and respecting deeper needs.

Before reading these stories, some of us expected to find reflections primarily about PREA itself. Instead, we found something subtler. For many women, PREA became part of the fabric of their everyday lives—present, supportive, but not intrusive.

In some stories, women simply mentioned going places with PREA workers as part of their daily life: “I went here with so-and-so.” These small, unremarkable notes felt enormous in their normality. After everything these women had endured, perhaps the greatest achievement is that now, “nothing happens”—that life can unfold quietly, with structure, companionship, and dignity.

Sometimes we read a story and notice that a woman currently accompanied by PREA did not mention the program at all. For us, this is a sign of success: she does not perceive PREA as an imposition. We found that deeply meaningful.

Our work requires constant reflection because the program’s effectiveness lies in the smallest details: everyday support, bodie-to-bodie accompaniment, slow 192

rebuilding of lives. Not grand gestures, but the accumulation of ordinary moments that make the difference.

THE SUPPORT OF COMPANIONS

The presence of companions, alongside professionals, is highlighted throughout the stories. Some women said, “I joined PREA because a classmate told me, ‘You should try it,’” or, “I saw other girls doing it, so I gave it a shot.” Often, the word of a peer carries more weight than a professional’s proposal.

Support within PREA is not limited to professionals; it includes companions—peers who share lived experience. These compañeras form bonds, offering one another solidarity and new possibilities for connection in new and meaningful ways.

LEARNING FROM THE STORIES

These stories taught us valuable lessons. They reminded us that these situations could happen to anyone. Perhaps because they are told in the first person, they take on a different weight, making us to think: “This woman, after everything she has been through...”

Some stories describe illnesses that began very early and under harsh conditions. Others describe crises triggered by devastating losses—sometimes something small, symbolically charged, leading to a profound breakdown. These stories remind us of the importance of support and accompaniment—the essence of our daily work—which helps reverse trauma and allows individuals to reclaim their humanity.

These personal histories illuminate the social determinants of health and illness. They push us to reassess our clinical approaches and reflect on how much suffering stems from the absence of support. They challenge us to ask: How resilient would our own physical and mental health be without the networks of care we rely on?

For us as a team, reading these stories feels almost imperative—to deepen our understanding of clinical work, of the people we accompany, and the roots of their behaviors. One story recounts how a woman’s mother used to hit her with a belt buckle.

Later, when a classmate hit her, she did not react. Reading this helps us understand the patterns of suffering across her life.

Another striking theme is the need to reclaim dignity within one's family after being labeled "mad" and excluded from the family nucleus. One woman described how, after her crises, her children abandoned her. Years later, she rebuilt a connection with her son, who had a seizure and required psychiatric care. He asked her, "Mom, why did this happen to me?" She responded, "Do you remember when something similar happened to me, and you left me alone?" In caring for him—medicating him, supported him—she repaired the bond and reclaimed her role in the family.

These narratives reveal details and perspectives we had not considered, deepening our understanding of the lives behind the stories.

THE VALUE OF TELLING ONE'S OWN STORY

Collecting these testimonies is a powerful act of destigmatization. Simply giving someone the opportunity to speak is inherently therapeutic. It restores dignity—something often lost during hospitalization.

Moreover, these testimonies, preserved in writing, become lasting records. A first-person narrative carries unique weight: it is a voice that resonates, echoing off the walls that seem to hold stories of their own—if we only know how to listen.

For many women, sharing their stories was an enjoyable experience. They appreciated being heard, having someone listen without judgment. Some shared painful episodes; others recalled moments of beauty or joy—details rarely found in medical records, which focus on symptoms and suffering.

These stories also reflect the women's own interpretation of their lives—how they explain what they endured and how moments of devastation and opportunity intersect. We see PREA as one such opportunity: something that emerged in the lives of people destined for long-term institutionalization and continues to offer hope and support throughout their journeys.

EPILOGUE

25, 35, WHATEVER IT TAKES.

THE RIGHT TO LIVE AND TO DIE IN THE COMMUNITY

Six years ago, when this book was first published, I sent it to Itzhak Levav, an almost mythical figure in psychiatry and mental health in Latin America, who passed away last year. Born in Argentina, he worked at the Pan American Health Organization, from where he helped lead the reform of psychiatric care throughout Latin America and the Caribbean, playing an active role in everything surrounding the 1990 Caracas Declaration. One section of that Declaration clearly captures what Dr. Levav represented to me: that resources, care, and treatments provided should (a) safeguard the dignity and rights of individuals; (b) be based on adequate rational and technical criteria; and (c) promote people's permanence in the community (PAHO/WHO, 1990). I often tell my students that progressive mental health tends to emphasize points (a) and (c), while (b) is often overlooked or downplayed.

Levav embodied all three. He strongly defended the dignity and rights of people with mental health conditions. He was a tireless advocate for the development of community-based care. And he always did so with exemplary scientific rigor. One of the most fascinating pieces I have read on community mental health was his study in Panama, where hairdressers acted as community mental health agents (Moreno, Levav, Saravanan, De Almeida, 2003). I also remember an interview in which, when asked whether the Río Negro Province reform (Argentina) could truly be called a reform—given that some patients had been transferred and institutionalized elsewhere—he replied: “Show me the data.” For him, research in epidemiology and mental health was essential for providing rational and technical criteria to guide discussions and decisions that, although necessarily political, could—and should—also be technically grounded. As he said in another interview: “in the darkness of reality, research produces light” (Lipovich, 2008).

I sent him the book, and a few days later I found an email reply from him. It read (in all caps):

**FIRST AND SECOND REACTION, YOUR BOOK IS WONDERFUL DEAR COLLEAGUE (perhaps you don't like me calling you that—you, a psychologist, and I, a psychiatrist. But on this matter, we are firm allies. SO PLEASE ALLOW ME).

I AM INFINITELY GRATEFUL FOR THIS BEAUTIFUL GIFT. IT CONVEYS A SAD REALITY, UNFORTUNATELY IDENTICAL WHEREVER THE HOSPITAL IS JUST AS YOU DESCRIBE IT. BUT YOU DO NOT STOP THERE: YOU ALLOW THE READER (PROFESSIONAL, USER, OR FAMILY MEMBER, AMONG OTHERS) TO BE CONVINCED THAT LIFE CAN IMPROVE, THAT IT IS POSSIBLE TO OVERCOME THE TRAUMA OF HOSPITALIZATION IN AN ASYLUM, AND TO BUILD A MEANING —LOST OR NEVER ACCESSED.

YOUR EFFORT IS THE MOST ACCURATE TRANSLATION OF THE PROBLEM THAT LED TO THE CONCEPTION OF THE CARACAS CONFERENCE AND THEN THE SUBSEQUENT DECLARATION. AND TO ENVISION A DIFFERENT SCHEME OF PSYCHIATRIC CARE—MORE EFFECTIVE AND MORE RESPECTFUL OF HUMAN RIGHTS.

PLEASE, TELL ME ABOUT YOUR PLANS FOR DISTRIBUTING THE BOOK AND FOR YOUR WORK.

ONCE AGAIN, MANY THANKS

ITZHAK LEVAV (TUNCHO LEVAV, IN ARGENTINA)**

From then on, we began an exchange. I would share what I was working on and ask for his guidance; he, with his firm and honest style, would offer opinions, suggestions, and questions that opened new perspectives for me. Through that dialogue, I embarked on certain crusades and gradually defined my research field—something that could be summed up as insisting and persisting on technical matters while trying not to become a technocrat. I used to joke with my husband that I had “adopted” Dr. Levav, though he never knew it.

His passing was deeply painful. I felt orphaned, deprived of a fundamental interlocutor. Today, as I prepare this new edition of *En Nombre Propio* (In Their Own Voices), the best way I can explain why a second edition exists is by framing it as what I would have wanted to discuss with him.

Doctor Levav,

This year marks the 35th anniversary of the Caracas Declaration. I don't know whether that anniversary still holds much meaning for many people. Perhaps the lack of reference among younger generations is, in part, a sign that what was set forth there has already been absorbed into practice and common sense. But thinking about "the data," as you liked to say: at the most recent Congress of the Latin American Psychiatric Association, we conducted a quick survey with 90 participants. We asked about progress on the three Caracas principles regarding care and treatment: (a) dignity and rights; (b) rational and technical foundations; and (c) permanence in the community. While participants acknowledged progress in all three, they identified the third as the most lagging.

The fact is that I have taken the celebration of the 35th anniversary of Caracas quite seriously. Anniversaries are moments that allow us to take stock, reflect, and gather new momentum—or to bring things to a close. I have decided that this anniversary is an opportunity to reflect on and assess what has been achieved, and also what remains undone. Besides the brief survey I just mentioned, carried out at the APAL Congress (which I intend to expand and improve), my team and I are also working on a book on psychiatric hospitalization in general hospitals, attempting to assess what has happened in this regard, given that it was one of the central pillars of the Caracas Declaration.

I also set myself the task of preparing an English version of *En Nombre Propio*, as an attempt to make known—and perhaps also to learn from—the stories of these women and from the program that supported their discharge from the hospital. To make this English edition possible, I have had the help of some generous young people from the United States, who were once my students, and in that sense, part of my motivation for making the book available in English was the opportunity to share it with them as well. In reviewing the book for publication in English, I realized that six years had passed since the original edition—with a pandemic in between—and that some things had changed in the program supporting the women whose stories appear in the book. I felt it was necessary to update the picture. So, I thought that, since I was already in the middle of the dance floor, I might as well also update and revise the Spanish edition, as part of this celebratory impulse around Caracas. For this, I met with Viviana Irachet, who is currently the coordinator of the Assisted Rehabilitation and Discharge Program (PREA) of the José A. Estéves Hospital, and she brought me up to date on the program and on the women.

Let me tell you what became of the twenty-one women in the book, and also of PREA itself. I'll start with the women:

- Ten are still living in group homes, together with other women who were also once hospitalized. In some cases, they have new housemates or have moved to different houses, but overall their way of living has remained the same.
- One returned to the hospital, but once PREA opened 24-hour care homes, she was discharged again and now lives in one of those homes with a group of women who also require permanent care.
- One lives in a nursing home. Before that, she moved with her friend into the friend's recovered house. They lived together for a while, but when it became clear she needed more support and the kind of care typical of old age, she moved to the nursing home where she now resides.
- One lives alone, after her housemate passed away. She chose to remain in the same house, even if on her own.
- One became widowed and continues living in her home with her son.
- One lives with her partner.
- One recovered her house and moved back into it, in a neighborhood far from both the hospital and the community center. She continued treatment with a psychiatrist near her home.
- One lives with her family and, during the pandemic, began treatment nearby, which she continues today.
- Four have passed away.

As you can see, a heterogeneous panorama. Some women still require the same support as they did ten years ago (remember that the original accounts are from 2015–2016). Others achieved greater autonomy, some to the point of no longer having contact with the program. Still others needed higher levels of care, which highlighted the need for the program itself to evolve to meet the changing—and often increasing—needs of an aging population with more physical health problems. You once described this as “the care gap”: years of comorbid physical health conditions likely less attended to than in the general population.

And finally, there are the women who are no longer here—the ones who have passed away. I've thought a lot about them. A few weeks ago, I attended the celebration of PREA's 25th anniversary, and as part of the event, they showed a video with photos of program participants who had died—both women users and staff members. They said the women had died, but that they had died outside the hospital. It struck me that programs like PREA accompany not only living in the community, but also dying in the community, and that is no small thing. They supported the women—and those who remained to remember them—in having what anthropologists call “a good death.” For a time, when women died in their homes, their bodies were taken back to the hospital. That simplified paperwork but erased the difference between a hospital death and a death at home. More recently, these women not only live in the community like so many others but can also reach the cemetery like anyone else. For some, that may be a minor detail, but it means the world to me.

PREA itself has also changed over these years. Because of internal program changes, changes within Esteves Hospital, and also, I must say, political decisions by the government of Buenos Aires Province—since late 2019, one of its management priorities has been the transformation of provincial psychiatric hospitals. I can't tell you everything that has changed in this already long letter, but I do want to highlight what I consider to be very important developments.

The hospital came to be directed by PREA's former coordinator. I had never seen patients be the ones applauding the loudest when a new director was appointed. Beyond the paradox that someone who had worked in a program promoting discharge and life in the community would then be appointed head of the hospital itself (not the first time this has happened), what makes it unique is the director's bond with the women. She was the first person I ever heard call them “ladies.” Not patients, or users, or people with lived experience, or girls. Ladies. They respect each other, and they also love each other.

In addition, as I mentioned, there has been political will—and action—to transform the psychiatric hospitals of Buenos Aires Province. As part of this, the Provincial Ministry of Health, through its Subsecretariat of Mental Health, created a program called “Buenos Aires Free of Asylums.” That program has made many advances, among which I would highlight its work in fostering coordination: coordination among hospitals, between the Ministry of Health and other ministries and sectors; and between the province and municipalities. Coordination for the exchange and creation of information, for the investment and use of resources; for seeking solutions to recurring problems. We know it sounds simple, but in practice it is complex, and much is lost in the cracks of disconnection.

For example, one such coordination was with the Provincial Public Bank Foundation (Fundación Banco Provincia), through which rental insurance was provided for the houses where many people discharged from psychiatric hospitals now live. As one hospital director told me: “the problem of securing a rental guarantee no longer exists—it’s been solved.” Believe me, it used to be a serious headache, often leading workers themselves to act as guarantors. I don’t know if this happens elsewhere, but it is a clear example of how, for many staff members, ensuring that people can live in the community is much more than just a job.

So, in recent years, there has been a strong push for discharges from the hospital. Some inpatient wards have closed. And although PREA is no longer the only team responsible for supporting people after discharge, it has expanded its work. From the two community support teams that existed a few years ago, there are now five: three daily support teams following the model of the first two; one for supporting people returning to their families; and another for working in high-support houses staffed 24/7. The program supported 71 people in October 2018, and by June 2025 that number had grown to 109. The staff has also expanded, mainly with nurses and companions. And as you can see, the growth has also been qualitative: more work with people living with their families, supporting those families, and supporting those living in houses with higher levels of care.

These are, as you can see, very interesting developments that deserve analysis and reflection. From my perspective, PREA and similar programs face the challenge of a changing population, within a changing context. The people who remain hospitalized from those long-term admissions of the past are increasingly older, with more disabilities and health problems. It is not clear, at least to me, whether all that demand can—or should—be absorbed by a program like PREA, even if more 24-hour support houses are added. Or whether, instead, what is needed is sustained and planned work with other institutions such as PAMI, which, as you know, is responsible for the care of older adults in Argentina, whether they have mental health conditions or not.

Also, the population at large—and the vulnerable in particular—is experiencing increasing impoverishment in Argentina. I believe (though I would need to build the data) that the personal resources we used to see in some of the women’s stories—like inheriting a grandparent’s house or receiving a pension from a deceased parent—are becoming less common. Today, people discharged from hospitals often have fewer, or no, resources of their own. If a few years ago it seemed they left with nothing or almost nothing, now that is even more pronounced—especially as they return to a community also more battered.

I wonder how you would assess what has been achieved, and what remains to be done, in the reform process you and others promoted thirty-five years ago in Caracas. I know that the Declaration was not the beginning of psychiatric reform initiatives in our region, but it was an organizing milestone that helped us, as the Declaration itself states, to commit ourselves jointly and in solidarity to making those principles a reality. Please know that the best reward for your efforts, and those of so many others who worked to reform psychiatric care in Latin America, is to hear, see, or read the countless people who, like the women in these stories, have regained the right to live—and to die—in the community.

Know that it has been worth it.

With my affection, as always, and my deepest gratitude,

Sara.

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This book tells, in first person, the stories of women who—after long periods of hospitalization in a psychiatric hospital in Argentina—were able to rebuild their lives in the community thanks to their own efforts and the support of community-based mental health care and accompaniment programs.

Through their accounts, the book shows how people's rights, dignity, and autonomy can be restored, and how public policy, professional commitment, and collective action can bring about real change in people's lives.

More than a chronicle of hospitalization or rehabilitation, *In Their Own Voices* is a testament to the persistence of life, the power of community care, and the transformation of the mental health system.

It is an essential read for health professionals, students, researchers, and anyone interested in mental health, social inclusion, and human rights. The book invites readers to reflect on the past, understand the present, and envision a more just future for those who experience prolonged psychiatric hospitalization.

ISBN 978-631-01-2899-3

