

Global Pandemic

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The global pandemic Covid-19 coronavirus infection, first identified in December 2019 in China, disrupted the world. Its impacts have ranged from causing high death rates to other adverse physical and mental health effects. It has also created a considerable change in employment, income, travel, leisure, and socialising ability. As a result, the virus has posed a significant health risk to the entire world.

The pandemic had expected to end in 2020, but 2021 brought more infections, lockdowns, and restrictions.

I thought I gave myself a tailored guide to my psyche in 2019, when I had my tenth struggle with my biological instincts to keep pace with a sea of information and artificial stimulation that rose to cognitive issues and psychological distress disorders. But unfortunately, I cannot understand my mind; something went wrong again in my brain, causing another relapse two years ago to overcome the cognition crisis. So, in October 2021, the mental health service became involved in my 11th psychotic episode. On Tuesday, November 2nd, I was given Lorazepam tablets. In addition, I resumed a 10mg Aripiprazole tablet at home to help focus my attention and attempt to regulate my emotion, recognise my poor mental state, and try to control it.

Doctors advised my wife to conceal the medications in my food or drink. I was floating around the edges that tilted into psychosis and a cognition crisis without any awareness. However, it all seemed to provide me with insight into a natural supernormal brain that did not come across as could be faulting. Still, I saw myself as having abilities and forces that ordinary people can't reach and having unique insight that other folks are missing. The elite and the highly educated hypothesise that intuition and conscientiousness play a part in the richly humane rare people—the best of humankind's development that displays superpowers or extraordinary abilities. I seemed to have had special access to some transcendental reality hidden from others, and attribute, reward, punishment, and improbable, inexplicable experiences have divine significance.

Then the opposed energy crafted a delusion in my mind, involving the idea that my wife engaged in gross physical indecency with one of the mental health officials who regularly came to the house to assess me. They engaged in conversation in the living room, and I developed suspicions of a gross nature. Still, I refused to see any of them and spent my time upstairs in the bedroom. So, I had a personal tsunami of debilitating mental health issues affecting me, damaging, harmful news overloaded with widespread uncertainty, and pouring more gasoline on this crisis.

My mind could not seem to be aware of or control, its processes. It adds chronic stress, which saps my ability to regulate my emotions and think clearly. At 2:30 am on Saturday, November 13th 2021, my very worst symptoms of psychological distress, including anxiety, disturbing paranoia, obsession, and compulsion congruent with debilitating fear, became red flags. My personalised toolkit of mental habits and strategies could not master my physical systems or control my psychological states. I panicked as I began to have illogical worries about my home. My wife's normal day-to-day activities included seeing me get smart in my two minds and exercise a precise vital understanding of my conceptual reasons. Something, however, disrupted me psychologically, and I set up barriers to avoid her. I felt that my true self associated with avoidance would worsen our relationship. My

simple, secure, warm, supportive linear relationship with my wife, Euphemia, was threatened as I left in desperation over the delusional belief that her character had changed for the worst.

In the early hour of November 13th, I rushed and packed some essential clothing in a handheld luggage bag and searched for my passport, which my wife had an awareness I was looking for and cleverly hid. I vividly hallucinated that Black mental health officials assisted my wife as I engaged in physical combat to escape my home environment. I had a bizarre feeling that I had been involved in physically lashing out at her before frantically fleeing the house and dashing out in the gloom of the street lighting, which lifted the early morning's shade of darkness. At the same time, I was driving away excessively, heading towards the Passport Office, which was 30 miles away, before heading to Felixstowe to leave the country eventually.

About 10 miles into the journey, the police apprehended me and asked me to park the vehicle at the lay-by on a nearby industrial estate. At the time, I had no idea my wife had called the police to report a missing local community psychiatric psychotic person. The weirdest things were the deluded suspicion that God was dead and that the intellectuals had killed God.

Any events I think of don't really require a supernatural agent because humans produced more accurate models of how things worked, and God is disappearing. A substantial amount of reality might have blocked out to have any substance as I seemed to be beginning my departure from theism. Even though they were coincidences, sensations and life lessons that life had taught me, my explanation was flimsy and illustrated my ignorance and reinforced unjustified beliefs.

I believed that the medical practitioners and the police were devious and engaged in corrupt practices. I heard voices of intelligent people telepathically, elite people involved in a conspiracy with government officials to steal general information gathered at my expense. Then, I was detained in a Mental Hospital again under Section 2 for a week. This place had all the hallmarks of a prison for the criminally insane, and I endured having no peace of mind. I had social contact with inmates with hygiene issues and others I can only describe as 'oddballs'.

The doctors suggested I be relocated to a local psychiatric hospital acute unit, where my medical treatment would continue until I was fully discharged on Monday, December 20th 2021, and back under the community mental health team. I find it difficult to be more psychologically resilient to live a long and healthy life. It is because I engage with my thoughts and emotions and get trapped in former mental software that is ineffective in improving cognitive functioning and other mental welfare. Therefore, I agreed to have a 400 mg dose of Aripiprazole injected intramuscularly (depot in my upper left arm). Since beginning this intensive care, I have experienced physiological changes and trained myself to make psychological health investments to overcome chronic stress. In particular, time and my chronological age of sixty-five seemed to have shifted, and my epigenetic body clock accelerated. As a result, I have a full head of hair and an immense amount of facial hair that I groomed to a neat, nice-looking beard. The wife likes it, and so do the children and grandchildren.

The distorted perceptions that the psychological trauma triggered in my mind never happened. Instead, I had made up this experiential falsely believed event of hitting my wife in my rush to escape our home. My wife categorically said I did not lay any physical thumps or blows at her, and she is sure - of absolute confidence - that I had not attempted to hit her. But I was verbally insulting, using foul and abusive language at her, and carrying an angry tone in my voice. I discovered a dazed feeling of mental stupor, not realising I was physically hitting myself firmly on my posterior.

I am safe, comfortable, and happy in my therapeutic environment, namely, my home. I currently am experiencing higher levels of happiness and soft positive outcomes. I enjoy my home and the freedom and independence maintained in it.

It's fair to say that it has been a tough time for my brain, a learning journey to learn how to survive and thrive. Mastering my good mental habits and strategies has never been more critical, especially during the pandemic's more difficult lifestyle days. So, it is a vicious circle living with this long-term health condition (schizophrenia). I feel that some agency (the overall hypothesis of God, the divine) controls my fate when chronic stresses exhibit physiological changes during a cognition crisis.

As we enter 2022, and after two years of living with Covid-19, the shock of the pandemic and having attachment to God, my mental well-being sometimes still shows symptoms of psychological distress. That can come from connecting to God and living with the Covid-19 pandemic impact. I often worry about financial matters and the welfare of my family, relatives, and the rest of humanity, animals, and the environment.

People's attitudes toward work and family have dramatically changed over these last two years due to travel restrictions, remote work and schooling, and having little socialisation with others outside the immediate family.

In these two years, it seems, in part, that my ability to adapt well in the face of adversity, trauma, tragedy, and threats was a significant source of stress and challenging experiences that involved "bouncing back and personal growth. At the onset, we lost friends to Covid, and my wife and loved relatives had a strike down with the illness despite being vaccinated. Luckily, they recovered in the self-isolation period.

Strategy to control Covid-19 has led to the reliance on an electronic booking system for testing and vaccination and a National Health Service's Test and Trace programme. The Government of the UK hopes that mass vaccination (with safe and effective vaccines) will end the most acute and challenging problems of the pandemic. Therefore, there is great hope that vaccinations will allow a total return to normal everyday life. However, some people suffer long from Covid-19, as the coronavirus symptoms can persist for weeks or even months after the infection is gone.

In my advance decision resuscitation order, the family, as well as my GP, were involved. I had no mental incapacity; I discussed it and declared a DNR (Do Not Resuscitate). I consented to be an organ donor and allowed medical science to dissect my brain as part of the anatomy study before my cremation. It's dated January 16th 2020, and 11 months later, on December 13th 2020, a solicitor drew up my last will testament, and I had assumed it would take care of my property rights, the fate of my body parts, and my specialness as a person. However, it seems deeply problematic to think of ownership of our body parts during life or organ donation after death. A body gift must remain a gift and never be bought or sold, and a corpse itself cannot, or should not at least, be a property.

My DNA has information about my predisposition toward diseases and whether I am a carrier of any genetic mutations that may cause infections in my familiar relationships (which is valuable for humanity). I focused on DNA research as transplant use can reveal much information about me, but I hope it remains illegal when used for commercial profits. My whole deceased body can be a remaining symbol of my death as the ritual surrounding my dead body is treated with care and respect.

I have found that writing has a way of helping me make sense of my experiences. I am pleased that my essay focuses on me, a severely mentally ill person who can voice in re-mission or say things we often feel are silenced about our experiences. I find it complex, dynamic, and therapeutic as I develop my expressive writing.

Cognitive symptoms of schizophrenia are present at the onset of psychosis, and I confused them with the side effects of antipsychotic medication. Although I did not feel it at the time (or think it so), changes in cognitive domains, in part, can be related to changes in the brain that then contribute to changes in thinking and memory. That resulted in capabilities across different areas of mental functioning that have always been dysfunctional regardless of whether I am experiencing psychosis. The main six symptoms in cognition that affect thought processes in schizophrenia are (i) reduced concentration and vigilance, (ii) speed up processing transmission, (iii) working memory, (iv) verbal learning, (v) reason and problem-solving, and (vi) social cognition. See below for a detailed explanation:

1. Reduced attention and vigilance: Patients may experience a reduction in attention and vigilance concerning focusing on tasks or something happening or watching for something that might happen.
2. Speed up processing transmissions: Disruptions in speed up processing transmission – i.e., signals impact how quickly one thinks, learns, and responds to one's environment. For example, one may require extra time to answer or repeat information. In addition, these questions may feel overwhelming with too much information presented at once.
3. Working memory: If one has trouble repeating something they just heard or remembering directions, their working memory is impaired. Such impairment causes mathematics to be complex or creates difficulties remembering short shopping lists. Other tasks like memorising a new phone number, including multistep instructions, are complicated to retain.
4. Verbal learning: Dysfunction in remembering what one heard or read and added difficulty expressing oneself using language. It results in the diminishment of verbal learning skills with words, syllables, letters, and digits.
5. Reasoning and problem-solving: The higher level of cognitive abilities, namely, reasoning and problem-solving, known as executive functioning, identifies, analyse and ultimately finds a solution to solve a problem, have trouble during psychosis in distinguishing truth from delusions or hallucinations, as reasoning stems from perception.
6. Social cognition: This process, which occurs when we interact with others and try to understand their beliefs and attitudes about us (and the world), is vital. It is essential because it helps determine how to interact with them to let others know about our emotions and communicate our feelings. But unfortunately, the information that the brain processes and stores about them can be faulty, thus making understanding others or interacting with people nearly impossible. Social cognitive impairment can also cause issues with daily functioning.

While schizophrenia is a complex mental health condition, I have found my rhythm with treatment after all. The best regime that works for me is antipsychotic medication integrated with a psychological method in self-teaching self-care, relieving stress to live with minimal symptoms again. I now know I have benefited from using antipsychotic medication continuously, which has helped

control symptoms and prevented frequent relapse, even if it is not curative. These writings aim to help empower me and others about wellness and recovery. If only they, the researchers, were able to target neurostimulation that affected brain regions. It could open the way to entirely new therapeutic perspectives to treat this devastating brain disease, and I probably would not have tried coming off my medication.

Discontinuation of my medication led to a return of symptoms and deterioration in life functioning and status, and the cycle repeated because of an inconsistent medication regimen. I must stop doing this, that is, hitting a brick wall and trying to self-regulate. I can't control it without the aid of medicine with minimal diverse effects. The act is the kindest in my self-care rather than plough ahead, concerned with everyone's survival and things that I can't change.

I had done this to myself and now accept the long-acting injections. It doesn't require the daily effort needed to take medication regularly. A nurse administers the drug once every four weeks, and I remain in a constant monthly eye-view with the mental health care system.

I hope now there's a low chance that I will continue to have episodes of psychosis relapse, although the view of the illness is that it is progressive. It is my 11th hit, and I feel the deterioration each time. My brain is not passive but a plastic organ, and I try to combat the trauma and stress inflicted by my condition. I am staying on this treatment with an antipsychotic drug that correlates to a better outcome. The paranoia, anxieties, and episode of psychosis are the illness's contract with me to understand it. So, it can leave me alone and ignore me when I know it is a logical cover of madness for health and truth masquerading as an illness to understand paradoxical messages in my lifetime. Then, normality will not be upset when a malfunction in emotional learning in a bid for excellent health has embedded sickness. When the emotional self tells the self to make decisions, it can't make up its mind and panic— "don't do it or do it but be patient".

As I observed people and species, the world is full of primarily human animals and few real humane human Beings. It's a truth.

I feel I have been placed to birth truths and untangle the perverse position that compels my illness, to act between my two consciences which would not let up until I have figured out the truth. Yet, it cannot tell itself the truth by itself and seem to urge me to continue trying to find it out. As a result, I may be closer to the paranormal and telepathic sanity than any person has ever dared to be.

The boundary between sanity and madness is thin. My brain makes robust but inaccurate assumptions(illusions) beset with hallucinations and delusions. To understand factors that lead one to the other is to appreciate the frailty of rational thought because psychotic thinking is commonplace in everyday life. After all, I seem unaware of my default mental state. Yet, we are all psychotic by default because we are all in a dynamic, delicate equilibrium that keeps us balanced between psychosis and rationality. I perceive weird things or things that have no basis in rational thought but are held with absolute conviction without objective. However, fundamental to my makeup is the capacity to believe in something beyond reason. And in the absence of external signals, I gained insights into my default brain's existence of a neurobiological progression in the diseased brain when my mind loses the natural assumptions and experiences a world approximated to clinical psychosis.

I also think I suffered from a reduced capacity to process auditory information. The tinnitus disturbance in my brain causes the wave oscillation noises that may have activated the severity of psychotic symptoms again.

Scientists think they know the range of human abilities and can measure them only if they see the coronet. So, people closer to the paranormal and telepathic (ESP) experiences outside that range, which most of us don't have, are thought to be clinically sick.

I would argue that that is not the case because something supernormal gave us homo sapiens brains with biological systems. Every thought, experience, and perception are instantiated in our brain to provide us with life; without it, there is no life, and we would not even beware of our existence.

It seems like only western thinkers have culture, thereby making our upbringing the prime pro to be psychotic, and those are the contents that usually form our experiences. People are primarily emotional human beings. So, we all perceive things differently and relatively consistent across ethnicities; according to the World Health Organization (WHO), the capacity for psychosis cuts across all cultures. Disfunction appeared during my childhood development that gave rise to a pathological shift. Just read my essay, Experience my Development & Game Changer, for insight into the story of my psychosis from childhood to adulthood. This narrative further provides insights into my developmental abnormalities.