

The Liedown

Here at The Liedown headquarters we've ironed the duvets and fluffed up the pillows to deliver you the best the world of lying down has to offer. We are back with our first issue of 2025, featuring an exclusive interview with Mr. B., a caretaker at a well known psychosomatic hospital. Never forget: **when in doubt, lie down.**

Frauke Fehlandt
Editor



Photo by [Jp Valery](#) on Unsplash



MR. B: BLURRING THE LINES IS PART OF MY JOB DESCRIPTION

The caretaker at a psychosomatic hospital tells all in an exclusive interview with The Liedown.

Interview by Frauke Fehlandt for The Liedown – February 26, 2025

Mister B. (name shortened) is no stranger to despair. As a caretaker at an unnamed psychosomatic hospital in Northern Germany, he is well accustomed in dealing with the limits of the human brain. Mr. B. has been working in psychological care for the better part of his life, having started his career a few days into his life. When I visit him on a misty February afternoon, he seems dreary, like something is weighing on his mind. He offers me a seat next to his workstation and motions to the coffee that he specifically chose for the duration of our interview, before apologizing for his dishevelled appearance.

MR B.: *It's hard sometimes, you know. This job. The people.*

THE LIEDOWN: *Has it been a particularly difficult week?*

MR B.: *[chuckles] You could say that. But let's start over, I'm so happy you made the time to see me. People are not usually very interested in the work my kind does.*

He shuffles his pillows at this and smoothes out a few wrinkles, before asking me for my first question.

THE LIEDOWN: *Let's start at the beginning. How did you come to be in*

this line of work?

MR B.: *I think your kind believes we don't have a choice, since we are what you call objects, furniture. But that's far from the truth. While we have limited career options, we get asked what direction to go in upon our creation. I didn't want to go into the store, you could say I was a bit nervous of going on an adventure: being picked by someone from the shelf and ending up in a random flat? No thank you. Funny, isn't it? [he laughs] How I feared the unknown and ended up helping out in a mental hospital, where the unknown is on the menu daily. But that was my choice, at the time. I wanted to be around people and I didn't want to be stuck in a place I didn't choose. So I chose to sign up as a caretaker and a few days later this very room is where the journey started.*

THE LIEDOWN: *Do you wish you could go back in time? And make a different decision?*

MR B.: *Sure, sometimes. Do you not also have days where you'd rather do anything but be a journalist?*

THE LIEDOWN: *Of course, but I imagine it's quite different when you are working 24 hours a day, 365 days a year. Do you get vacation days?*

MR B.: I have had a single one in my lifetime. But it was more of a coincidence because a patient had cancelled last minute. I don't mind, though: the work is the life. It's not like I have legs to walk out now, do I? [again, he laughs] It's what I chose and I like it here. I'm close to my coworkers and even made a few friends along the years – I wouldn't want it any other way.

THE LIEDOWN: What about the work makes it worth it to you?

MR B.: I like to think that I bring my clients comfort. Not everyone, of course. There was this elderly man a few years ago, who kept complaining about neck aches. I ordered three extra pillows just for him, but he couldn't find proper rest. If I remember correctly, he ended up upgrading to a premium room at the hospital. I hope it helped his aches – dealing with the brain can be difficult enough. In a regular month, I don't get many complaints. And obviously, I have gone with the times and gotten a few upgrades myself [he pauses] where was I... Ah, yes. Comfort. That's what it's all about, isn't it!? What do you get out of your at-home-caretaker?

THE LIEDOWN: Comfort is definitely a factor. But I also associate my bed with rest.

MR B.: I don't like when people refer to us as simply as "beds", like we're an afterthought. We are so much more, wouldn't you agree?

THE LIEDOWN: I see your point. Do you prefer the term caretaker?

MR B.: Personally, I do, yes. It's who I am at my core, after all. I think I understood this during my first month in this establishment. My first patient was a teenager, barely 18 years of age, and she had trouble sleeping. She would stay up until early morning and not even attempt to lie down onto my soft pillows and close her eyes. Only once she had nearly passed out would she crash into me and be asleep in a matter of minutes. In the early morning hours, she would have trouble disentangling herself from my warm embrace, frequently stumbling late into her first therapy session of the day. After a week of witnessing her despair, I asked for a fuzzy

blanket to be made available to her through me. It took some convincing to the humans in charge as "they don't do special treatment" but eventually I succeeded. Another week had to pass for that girl to warm up to me. By the end of her 9-week stay she slept like a baby by midnight on the dot. That's when I realized I could truly make a difference, just by adjusting to the patient. By making them realize the day wouldn't run away if they let me embrace them. That sleep was part of their life and a beautiful one.

THE LIEDOWN: Do the lines ever blur? You are a professional caretaker but also work much closer with your patients than even a therapist would.

MR B.: Of course they do. But you forget that I'm not human. I don't have to draw the same professional lines that you do among each other. "Blurring the lines" as you call it, is actually *part* of my job description. That's where the work begins.

THE LIEDOWN: Let's circle back to the beginning of our interview: what about challenges? I'm sure some cases are more difficult than others.

MR B.: The ones who deal with suicidal ideations. Those are the people who really get to me. And the ones that do not want to leave. And I don't mean just leaving the hospital – but leaving my embrace. Just last week I said goodbye to a patient that had trouble getting out, even in a controlled environment such as this psychological programme. I knew she also had this problem with her at-home-caretaker and she quickly grew attached to me. This is where comfort is the opposite of the goal. My supervisor and I had to come up with a scheme on how to make myself uncomfortable to her. and I had to hold back from embracing her. The first thing we tried was hardening my pillows. Then came lighter blankets, scratchy duvets. As a final measure I had to gather all the food crumbs she had left behind, and push them around to where they would annoy her the most at every toss and turn. Still she embraced me. I must have dried a lot of tears with that one.



Photo by [Priscilla Du Preez](#) on Unsplash



And it's challenging not only on a mental level, as in: going against my own grain by refusing comfort. It's also challenging because my mattress starts aching, my pillows get stains, my frame doesn't catch a break.

THE LIEDOWN: So, you experience discomfort. Does that not happen during normal work hours?

MR B.: Rarely. I can handle 8 hours without blinking, 12 if it doesn't happen every day. But anything beyond gets itchy after a while. The job is 24/7 but I, too, need rest. As does everyone else.

THE LIEDOWN: You briefly mentioned suicidal ideation as one of the difficulties you face. Would you be willing to go deeper on that topic? I understand it's not an easy one.

MR B.: This might surprise you, but it doesn't happen as often as you'd think at a mental hospital. I think the patients need to sign an agreement before they get admitted here. A signature cannot influence the brain, however. Many of my patients have voiced suicidal thoughts or struggled with them. But I could count the number of actual attempts on the slats of my frame. They clean you really well after it happens. But you never forget the feel of the red liquid that your people call blood. Or the feel of a weakening body sinking deeper and deeper into your warmth, getting heavier but lighter all at once. It changes you. Thankfully I have never lost anyone. I might need therapy myself if that ever happens [chuckles].

THE LIEDOWN: Do you get supervision? I know human therapists have someone they can voice their doubts and challenges to. Do you have someone like that?

MR B.: Of course I do. It took some time though, I know it wasn't common before I started working. But the caretakers unionized shortly before I took this job. I'm glad we have rights these days, and don't just get treated as mere objects.

THE LIEDOWN: I fear our time is almost over.

Allow me one more question. Despite all the hardships. What happy memories do you have?

MR B.: There is the girl that jumped on me after having a breakthrough in a session with her therapist. There was the middle-aged man who started a pillow fight when his husband and children came for a visit. The grandma who would neatly "make the bed", as you call it, without fail every morning, even if she was running late. She sometimes whispered "thank you for tonight" as she did so. There is Burt, the cleaner, who always makes sure I get the linen with the nicest smell. And sometimes I hear dreams. That's where the life goes on.

THE LIEDOWN: What do you dream of?

MR B.: [laughs] Of sleeping. Maybe someday I will.

Mr. B has been working in caretaking for the past 12 years and has no wish to change employers or even rooms. As I leave room 23, I hear him calling to his clothing 'coworkers' (we humans would call them wardrobes), clearly in a lighter mood than at the beginning of our session: "Now you try getting a cover story."

If you or a loved one are struggling with mental health or suicidal thoughts, please call the TelefonSeelsorge® at 0800 111 0 111 or 0800 111 0 222.