

RYAN PARRY
SIZE 10

Audio Producer: Rose de Larrabeiti

The way that Londoners drive is not like anywhere else in the world. You ask any Australian here, if we drove, the way we drive here, if we did that back home, we would lose our licences. So I was pressing imaginary brake pedals a lot for the first month I was here. Contrary to popular belief, we don't like to use the siren until we have to - which will probably happen in a second. The deep end, and I arrived and I was thrown into the deep end. I, I started the job pretty quickly when I got here. Up until then I'd never lived or worked outside of Melbourne. I got off the plane. And it was snowing, so that was my first impression of London, there I am in my, in my thongs and my shorts and my T-Shirt and I'm absolutely freezing.

My name is Ryan Parry. I'm a paramedic with the London ambulance service. I'm originally from Melbourne, Australia. I've been living in London for about a year and a half now. It's such a different way of operating to how we worked back home, there was the different equipment. I went to put some things together and I was just thinking "Geez, what am I doing here like this? How does this work? How does that happen?" And coming from where I was, quite well established, you know, all your equipment, you've been using it for a year and a half, you get very comfortable with it and now everything was alien to me - it was almost worse than being new, because I had established routines, I had habits. It was only a couple of days in, I was thinking "What have I done?" Like, you know, I had given up a much, much, much higher paying job. A job with much better leave, a job where I do half the work. And, you know, it's a cheaper city to live in. To come here, be overworked and underpaid, I just - what have I done with myself?

I first saw London Ambulance Service recruiting for paramedics on Facebook - an advertisement came up and I thought "I'm going to have to do this." Fear of missing out. That's the biggest problem with, you know, Generation Y. If I don't go in a year's time, I'm going to see a bunch of Aussies that went over and had the time of their life and did these great things. I thought "No, I'm going to have to do this." There's a lot of people here and it's so busy here. But you cannot let that make you think it's not an isolating city. There are so many very lonely and isolated people here, people that we see. At times it's just nothing medical, it's somebody that just can't cope. You know a lot of our work, unorthodox as it may be, is trying to be a problem fixer of any kind. There are things that my crewmate Dom and I have done. We have gone completely outside the call of duty. We have worked overtime doing a social, fixing a social issue that no-one will know, no-one will understand, but you have to be happy with the job you do, you know, and I think that is an easy way to make it, everything, a bit more bearable. You have to be proud of yourself.

My first clinical instructor said "This job is too serious to be taken seriously." We're all pretty dark and sinister people. We have a lot of laughs, you know, it takes about six to nine months to really start to find your groove and start to laugh at things, because you see, you see people when they're at their most, they're in the most pain, you know, you see people in their worst day of their lives. Yeah, I mean, sometimes it's really bad in this job. Well if you rely on the good outweighing the bad, because that's not going to happen, that's not going to happen and if you rely on that you're not going to do well, you know... There was a study released about three weeks ago, it was saying how paramedics have a higher chance of getting post-traumatic stress disorder than soldiers returning from Afghanistan. In Victoria, the suicide rate for paramedics is twenty times higher than the average - it's the highest in the country. So, that is, there is a lot of stress involved in the job.

I was working back home, probably my eighth or ninth month in the job. And we got called to a cardiac arrest. We were sort of close to it, we're thinking "Great, if this has just happened, we have a really good shot. And you know, we got there and the wife was outside hysterical. This is at

midnight. So she's in her dressing gown. And we go into the house. It's a very small cramped house. We turned on the light, went in and this guy is pale, he's dead. This guy was probably about, in his, you know, late thirties and he had a shockable rhythm, so straight away put the pads on, our defibrillation pads, shocked the patient. And then you got to start CPR. But he was on a very bad futon. It's like trying to push the patient into, just like a ball pit. You're not going to be effective, and there was something weird about this house, there were just stacks of books everywhere, just everywhere, and there was no room to walk around at all, this place was small enough as it is. And we're thinking "Alright, do we kick the mattress up on to the side and just do it here?" We're thinking "No, there's not enough room." We ended up kicking over books to try to make room and we realise we're making it worse because they're just these books everywhere now, and we've sort of got him into the living room, and getting ready to try and get started. Started resuscitation properly and we opened up this door and I saw two young boys asleep in bed and maybe a five year old and a seven year old. I already wished I didn't know that, because I got so personally invested in this case. We worked for a very, very long time, for a very long time, we really only had to do thirty minutes' worth to call, but it, my crewmate could see I was personally invested in it, and he just wanted probably for me, you know. Long story short we didn't get him back. And yeah, I, you know sometimes you think, like, their life's been turned upside down. And, you know, I know, I know medically like, you know, there was nothing I could really do, but sometimes you just wonder, when it's your choices that you're making. And I think, maybe if I did that differently, you know, maybe we kicked the mattress up and, and even though I couldn't do anything else, I just did tiny bits of CPR while straddling him. Maybe he just could've been shockable for a bit longer, you know, maybe, you know.

You know, in terms of outlets for me, sport is a big one, blaring your lungs out to a song on the way home even if you've had a sad day and it's a sad song, and I'm just, you know, screaming along to a song will make you feel happy. You know, at one point in my first six month period, I had had no sleep, because of where I was living though, so much noise, couldn't sleep between my night shifts. I had finished late every single shift. When you are leaving work and you do the maths and you have to be at work in seven hours' time. Counting on your fingers how much sleep you might get. And I did the maths of "How much money would I have to repay if I left right now?" My first month's rent, they'd paid for my airfares, they put us up in a hotel for the first three weeks. The digits were getting into the five digits I'd have to repay. And I was on the fence of actually doing it, we were working that hard.

I think I would miss it. I think I will miss the craziness. You hate it when you're doing it, but going back to a service back home, where I have less responsibility. There will be always units when I need it. Everything is always well stocked and well kept. You know, coming from, you know, working where everything's, you know, broken down or maybe missing. You know, there's something even more special to that as well. It's a very special job. It's a really special job. You know, it's a front seat on mankind, you get to witness what goes on in the world, you know you're on the inside of a very special group of people. As a paramedic, you're completely altruistic. I don't care what you did, I don't care what you're going to do, my one aim is to preserve life.