

BOOK REVIEW

Applied Ethics in Mental Health Care: An Interdisciplinary Reader

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2013 The MIT Press

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As mental health care continues to transition from a paternalistic medical model to patient centered recovery focused care, this book has beautifully outlined many of the 'grey' areas in mental health ethics. From the first page to the last, the editors remain true to the title they have chosen to represent this diverse yet complimentary compilation of articles, many of which outline pragmatic clinical application of ethics principles, and several guided by virtue ethics.

In the forward, Paul S. Appelbaum, a psychiatrist, outlines three main areas where ethics issues in mental health originate: the nature of mental health disorders or conditions; the treatments used in mental health care; and the setting in which mental health care is currently practiced. This provides the premise of what is to follow. The book is divided into six parts: foundational questions; capacity, coercion, and consent; violence, trauma, and treatment; addiction; mental illness and the courts; and therapeutic boundaries. It is composed of 25 articles previously published in a variety of reputable sources with original publication dates ranging from 1956 to 2011. It skillfully combines modern day ethics issues, such as professional boundaries when using social media, with some timeless and persistent challenges such as the mental health clinicians' ongoing struggle with dual relationships, categorizing addiction, and predicting violence.

The book starts off appropriately by outlining "foundation questions" of psychiatric ethics prior to attempting to discuss particular subject matters. This section of the book questions: the right of the individual versus the rights of society; the guidance of practice by rules or virtue; the ethics responsibility of health care professionals; the line between illness and health, intention and impulse, morality and pathology, disease and deviance; and the list goes on and on. However, unlike many other bioethics texts, many of the articles selected attempt answers to these complex questions while still allowing room for further interpretation.

Capacity assessment has always been and will continue to be a very controversial issue in the medical ethics literature and, more specifically, the mental health ethics literature. This section provides an overview of the ethics issues associated with consent and capacity by analyzing specific topics such as psychiatric advance directives, addiction, anorexia, and personality disorders. The case scenarios within this section do not shy away from more complex scenarios, but instead tackle them head on (i.e. the treatment refractory patient).

The next section reflects on how violent acts and resulting trauma can potentially breed mental illness. The authors continue to discuss not only how diagnosis and treatment may be value laden, but may actually contribute to victimization as opposed to alleviation of symptoms. The editors focus on three particular groups: victims of war, gangs and rape. The authors appeal to mental health providers to ensure they are providing compassionate, reflective, ethical care to stop this self-perpetuating cycle.

The controversy in defining addiction as a disease or a behaviour based on moral judgment is fleshed out in part four of this book. Here, both sides of the debate are articulated, including, if addiction is a disease, is it chronic or acute? Regardless of perspective, underlying ethics issues relevant for the care of addiction are offered along with potential steps for ethical decision making.

No mental health ethics book would be complete without a section on the ethics issues that arise at the intersection of mental health and the law. This section focuses on the nature and limits of duty to warn, ethical problems of dual roles, the limitations of the recovery model in forensic psychiatry, and the persistence of stigmatization of the mentally ill at all levels. The author's grapple with the question of how to, "address moral agency and legal responsibility".

The final section on therapeutic boundaries contains two more articles than any of the other sections. It offers a variety of ways to tackle boundary violations from a rules or ethical guideline approach, to a more case based approach that values “humane interventions”. I appreciate the editors’ choice not to focus on sexual boundary violation but other more nuanced and contentious aspects of potential boundary violation (this choice being another of several strengths of this book).

Another strength is that the discussions throughout this book are grounded in real cases in mental health care and in many cases provide pragmatic tools, resources, and guiding questions to work through the ethics issues from a variety of professional perspectives (which may contribute to a paradigm shift).

Unfortunately, a few shortcomings were also noticed. While the editors were mindful of some of the more contemporary ethics issues (i.e. gang culture and social media), a few topics I hoped to see were not included. With the ongoing drive to eliminate restraint and seclusion use in North America, I felt there should have been mention of this topic. Further, within the consent and capacity section, the topics of intimacy and sexual relationship while undergoing treatment, as well as progression of dementia and decision making, were not addressed. Finally, child or adolescent mental health was excluded. These topics may be an opportunity for the next edition.

Overall, this book provides a careful selection of articles which will resonate with a variety of mental health care professionals as well as students in the field. The reference lists found at the end of each article are excellent resources for those interested in further exploration of a particular topic. The complimentary and opposing perspectives provided on many of the same topics expand the reader’s ethical considerations and the practical application of ethics principles and frameworks and help guide the average clinician down the path of ethical decision making.

Acknowledgements: none

Competing Interests: none

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Date of Publication: December 6, 2013