

## Ethical Challenges of a Good Mental Health Patient

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### ABSTRACT

This essay is about the ethical and existential challenges that I face as a patient with a mental illness. I illustrate my struggle to balance the power differential between myself and my health care provider. I reveal my feverish ambition to be a “good” mental health patient, and the resulting inner turmoil and frustration. My journey to form my own self-identity is turbulent and hectic but there is hope in accepting myself and my illness.

**Key Words:** ethics, patient perspective, power differential, psychiatry

Thirty minutes goes by. I still sit in the familiar waiting room of the outpatient psychiatric ward. Today, I am not well. I grind my teeth and feverishly pick at the hangnail on my index finger. My foot shakes vigorously and my mind races with uncontrollable thoughts and visions. My brain is about to explode. I shake my head and rest it in the palms of my hands. I pull my hair with force. I want to hit something. I want to scream. But I do not complain one bit about the lengthy waiting time. I do not argue, raise my voice or pace around the waiting room. Instead, I pick at my hangnail until blood runs onto the linoleum floor. I am a good mental health patient. I choose to endure the pain and suffering because I am certain that good patients receive better care. I sit in silence and submit to the expert's power. I pretend that waiting for thirty minutes is acceptable and fair. I only pray that an expert will help me in the right way, sooner rather than later.

I wake to the sound of my name. I lift my head abruptly with extreme agitation. The expert sees my intense eyes and knows something is not right. He motions to the examination room, looking back to see if I follow. We enter the room, and I must sit again. I open my mouth and vomit my words. He looks at me intently. I am out of control. I take a breath and remind myself that I am a good mental health patient. Even when I am mentally unstable, I must clearly articulate my worries and troubles in a way that I can be taken seriously. In kindness, I must provide him with clear and succinct information, being forthright to avoid wasting his time. I must listen carefully to his pitch and tone of voice, and respond in the most appropriate way that does not ignite disgust. I cannot make him dislike me because I urgently need his help. Still, I disclose only as much information as I can handle as I am aware that there are consequences, positive or negative, to every leak of sensitive information. I overemphasize certain complaints to receive the care that I think is most appropriate. In fact, I regain control in the most deceitful way, perhaps a rebellion against the prolonged submission to the expert's power.

The expert offers me several solutions. I stare at him blankly. I am fatigued and overwhelmed. I want him to tell me what to do. But I realize that I cannot simply be compliant to care. No matter how sick I am, I must have the motivation to actively participate in the decision-making process. I opt to a combination of solutions. He seems pleased. But he is not God. He will not cure me. And so, I know this is not the end of my job. There is no hiatus in being a good mental health patient. The greatest treatment takes place out of the examination room. I must share the responsibility for my health and be accountable for my actions and inactions. I must trust myself that I can take on massive lifestyle changes to control my mind and body. I must stay motivated. I must persevere.

I sit on the overly sterile toilet in the psychiatric ward and swallow a handful of pills. Breathe in. Breathe out. I count my blessings. One in 19 people with my illness successfully commit suicide. Things could be much worse. At least, I have survived thirty tumultuous years. Day after day, I am forced to re-evaluate my morals, values and the meaning of life. Who is the real me: the one with pills or without? I fight against myself, my family, colleagues and societal stigma of having a mental illness. Yet, after years of being a patient and receiving ethics education, I have developed the skills, strength and insight into how the health care system functions. I have learned ways to protect my fragile dignity so that I can go on with my life. I open the hospital exit door and stare at my reflection. I look like death. My hair is wiry and the darkness under my eyes is deep. I recall what the expert told me. Nothing in life is permanent. Things will always flow from good to bad, and bad to good. People die and people are born. One day, my hair will become healthy and my skin will shine. And I will always fluctuate between mental stability and instability. Today is instability...

But tomorrow, I hope to be better. I hope I can eat. I hope I take my medication. I hope I remember that all bad things will eventually go away. I hope to stay motivated and not let anyone bring me down. I hope I remember that this is my life and that I am in control of me. I hope I remember to accept who I am. I hope I persevere.

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