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Understanding mental illness through critical theory, postmodernism and the maori philosophical paradigm.

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Psychiatric nursing in New Zealand predominantly operates within the medical model. Significant emphasis is placed on diagnosis and psychopharmacology. Recovery and progress is assessed through treatment of symptoms. Although the medical model and its approaches assist clients to deal with distressing symptoms of mental illness, it does not allow nurses to fully understand the meaning of distress according to the clients' own point of view. Hallucinations and delusions that may have significance to the patient is easily dismissed as psychosis and not necessarily explored with the patient. This can bring about misunderstanding and discord between the nurse and the client, and can sever therapeutic relationship. The client becomes 'difficult' and such presentation are viewed as deterioration in mental state. Pharmacological intervention becomes more intensive and the use of seclusion and restraint may be necessitated. Drawing from my experience and practice, I argue the paradigms; critical theory, postmodernism and Maori worldview (the indigenous people of New Zealand) can provide frameworks in which nurses can understand the experiences of mental illness through varying perspectives. These paradigms offer nurses an alternative theoretical perspective alongside the medical model and perhaps bring into light the medical hegemony that operates within psychiatric nursing. I also used an abstract painting to conceptualize these paradigms as inspired by patients who use painting as part of their recovery program and meaningful occupation in the psychiatric unit.

Biography:

Francis Florencio. I graduated nursing in 2012 at AUT University in Auckland, New Zealand. I have completed post-graduate certificate in mental health and addictions in University of Auckland as part of the new nursing entry to practice program as supported by the district health board. Currently, I work as a clinical educator in AUT University and bureau nursing in forensic inpatient psychiatric nursing.