

Confluence and Divergence of Emancipatory Healthcare Ideals and Psychiatric Contextual Challenges

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Abstract

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Person-centered care (PCC) is generally understood to involve shaping healthcare processes, decisions, and plans according to the individual values, preferences, or goals of each patient. This is in contrast to more traditional approaches which provide care to patients based on standard clinical guidelines. In healthcare and bioethical literature, PCC is often praised as an ideal approach of healthcare provision because it is thought to empower patients and improve their adherence, satisfaction, and overall health outcomes. However, the notion has been defined in different ways, and it is unclear how and whether it can be implemented in all healthcare settings.

This dissertation aims to elucidate the concept of PCC and explore the implications of its intersection with psychiatry. The work contextualizes the concept within larger healthcare and social movements, and in that light, analyzes its values, decision-making process, and ambitions. The unique and complex challenges that psychiatric care settings engender are further used to examine how PCC commitments fare when faced with the limitations of mental illness and restrictive conditions of psychiatric facilities.