Being in place: Citizenship in long-term mental healthcare

Ootes, S.T.C.

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EPILOGUE

Rita, a nurse working with long-term clients, has taken me to the psychiatric outpatient clinic where clients receive their depot medication. She says it is an excellent place to meet long-term clients. She introduces me to Maureen, because to Rita’s mind, Maureen’s case is such a good example of how a long-term client can successfully enact citizenship. I tell Maureen about my research and its focus on relationships and after the lukewarm response of other clients, I am surprised when Maureen immediately starts telling me about her life and relational network and activities. Maureen uses the gym and swims in the pool at the mental health centre. She also takes computer classes. Actually, that is where she was just now, before coming to receive her depot medication, and she is doing quite well at it. She has been living on her own for a year and a half and has had her own computer for a couple of months now. She tells me her son moved to England with his father, but apparently this all happened decades ago. It has been a year or two since her daughter-in-law gave birth to her grandson and she says it is nice to be able to keep in closer contact with them all through the internet. Maureen also tells me that she used to live at this mental health centre and – for some fifteen years – at the rehabilitation home I previously studied. She is still friends with some of the clients and professionals she met during that period. In fact, she’s going out dancing with one of them this Thursday. However, she is very happy to have her own place in the city now. Her family helped her decorate and furnish her apartment: they put in the floor, put up wallpaper and helped her buy furniture. Her family also helps her with her meals. In the afternoons, Maureen often eats at the lunchroom for clients and in the evenings, often at one of her sisters’. Cooking for herself doesn’t work for her: she doesn’t like to eat alone.