Reflection: My Level I Mental Health Fieldwork Experience in PR

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It was March of 2014 in the old but beautiful city of San Juan, Puerto Rico. I was assigned to complete my level I mental health rotation at a public mental health institution named Dr. Ramón Fernandez Marina. This facility is one of the most famous public hospitals that treat patients with mental health disorders in the acute and sub-acute stage. My two weeks immersed in the Puerto Rican culture, as well as the mental health care system allowed me to learn very valuable lessons.

It was in the walls of the Hospital Dr. Ramón Fernandez Marina where for the first time I understood mental health disorders beyond the DSM 5, this time not only relevant to signs and symptoms but rather to the ability to carefully listen to the hearts of my patients. Soon I also learned that my patients were more than a group of twenty-one women in the acute phase of their psychiatric disorders. These were women who had lost a great portion of their identities, who
were often stigmatized by society and sometimes even by their own family members. This experience taught me to not define someone by a quick label (schizophrenic, bipolar, depressed, rather by his or her occupational identity (mother, sister, daughter, and wife). Furthermore, I learned that mental health disorders do not know about social class, political affiliations, educational or professional experience; they could affect anybody, including me.

In this particular setting, as an occupational therapist, one is responsible for waking up the patient early in the morning for a hygiene and grooming session, conduct a group therapy activity, assess a patient’s abilities and independence in ADL tasks, yet most importantly we are responsible for instilling hope. The hardest thing during this process is for the therapist to erase a patient’s past from their memories, yet the easiest thing to do for a good therapist is to provide a patient with the necessary tools to create a bright future beyond a world filled with hallucinations and delusions. It is paramount to remember that as an occupational therapist you might be the only support system this person might have inside the walls of that unit. It is our responsibility as professionals to honor and be receptive to our clients’ needs and wants, as well as to stop the mental health stigma. No matter in which part of the world we are in, the future of our profession and the future of our clients are in our hands.