

PRINCIPLES OF A RECOVERY MODEL INCLUDING MEDICATIONS

by Patricia Deegan, Ph.D. (1995)

- Medications are one tool among many tools that a person may choose to use in their recovery process.
- People labeled with mental illness, including people diagnosed with psychotic disorders, can learn non-drug coping skills that control or eliminate distressing symptoms.
- People need opportunities to learn these skills.
- Mental health professionals and systems must insure that these skill-building opportunities exist and are accessible.
- People can move from just *taking* medications to *using* them as part of their own recovery process.
- People with psychiatric disabilities need to assume the dignity of risk and the right to failure and this must be understood and supported by mental health professionals and mental health systems.
- Compliance is not a desired outcome. It perpetuates learned helplessness and keeps us within an “external locus of control.”
- Self determination is a desired outcome. It shifts the locus of control to “internal” while also reinforcing personal efficacy, power and responsibility.
- We must never tell people that they will have to remain on medications for the rest of their lives.
- People’s reaction to and needs for medications change over time.
- People can learn to live with a wide variety of psychiatric symptoms and still live, work, love and participate in the community.
- Becoming independent does not mean becoming an “island unto yourself.” We do not take someone’s eyeglasses away because they have become “too dependent on them.” We understand they require this support in order to be independent.

- Becoming independent means learning what you can rely on and what supports you need. Reduction in support services is not an outcome measure of recovery.
- Using medications is not a moral issue. A person who uses medication is not “sicker” than a person who does not use medications. We must find what works for us at this time in our lives.
- People using psychiatric medications will ask themselves legitimate questions that any person using such powerful, mind-altering drugs might ask. These questions include:
 - ✓ What am I really like when I am off these meds?
 - ✓ What is the “real me” like now?
 - ✓ Is it worth taking these medications?
 - ✓ Are there non-drug methods I can learn to reduce my symptoms instead of using medications?
 - ✓ Will I always have to take medications?
 - ✓ Has my needs for medications changed over time?
 - ✓ Do I have tardive dyskinesia that is being caused by the neuroleptics I am taking?
 - ✓ Am I addicted to these medications?
 - ✓ There are no systematic long-term studies on the medications I use. Am I at risk? Do I want to take the risk of not knowing the long-term effects?
 - ✓ Am I addicted to these medications?
 - ✓ What symptoms am I willing to live with and what ones do I choose to target for pharmacological intervention?
 - ✓ Am I one of the small percentage of people whose psychosis is actually getting worse (exacerbated) by neuroleptics?

- ✓ I've been on these neuroleptics for a long time. Have these drugs created deficits in my cognitive skills and memory?

Mental health professionals can learn to listen to and support the explorations of such important questions.

Mental health systems can create special programs to support the safe exploration of such questions. Such supports might include:

- Detoxification centers
- Peer run medication reduction support groups
- Skills instructors who can teach non-drug coping strategies.
- Peer run self-help groups

These are the things to remember to ask your psychiatrist.

If your psychiatrist suggests a medication for you to use, don't forget to ask:

1. "Exactly how will I know if this medication is working for me?" and "How long before I should start to notice an effect from this medication?"

(space for your notes)

2. "What side effects are associated with this drug?" (space for your notes)

3. "If I should experience any of these side effects, what can I do about them?"

(space for your notes)

4. "How can I contact you if, during my medication trial, I have questions or concerns I want to check out with you?" (space for your notes)

5. "How long should my trial period on this on medication last?" and "When is my next appointment?" (space for you notes)

