Psychiatric Medications:
a Harm Reduction Approach

Disease-Centered vs Drug-Centered View of Medications

	Disease Centered View	*Drug Centered View*
What are medications?	Treatments for mental illness/ disorders	Mind-altering psychoactive substances that can be useful along with risks
How do they work?	Drugs *correct* an abnormal, chemical imbalance disease process in brain	Drugs *create* an abnormal chemical process in brain, like all psychoactive substances, *plus* placebo and expectation
When to use them?	When a particular *mental disorder* is present	When particular *experiences of drug effects* are useful in context
Why are they useful?	Therapeutic effects arise from drug action on underlying disease process	Therapeutic effects arise from being in a psychoactive drug-induced altered state
Target?	Symptoms of the disease	Body + mind of anyone who takes them
What about risks?	Drug risks are necessary to treat disease	Drug risks can be severe and may be worse than experience prescribed for
Paradigm?	"Like insulin for diabetes."	"Like alcohol for social anxiety."
Key question?	Do **you have** a mental disorder?	Is this drug **useful to you** relative to risks?

adapted from Moncrieff & Cohen, "How Do Psychiatric Drugs Work?" British Medical Journal, May 2009
"Harm Reduction Guide to Coming Off Psychiatric Drugs"- free download online at www.willhall.net/comingoffmeds

A New Way To Collaborate: Harm Reduction Model
- Meet people where they are at: support choice and subjective goals.
- Create a supportive and nurturing connection: "I'm on your side, I'm with you."
- Provide information and resources for making wiser choices with less harm.
- Think beyond either/or. No judgement or 'one size fits all.' Curiosity, creativity.
- Accept possibility to live with "symptoms." Change relationship to __, not get rid of___.
- Respect mental diversity, normalize experience. "Many people live with ___."
- Work step by step to reduce harms: costs/benefits, explore options, long term view:
  - harms and risks from life in general, consequences of action/inaction
  - harms and risks from psychosis / extreme states and emotional distress
  - harms and risks from medications, withdrawal, and *manner* of withdrawal
  - harms and risks from treatment (hospitals, force, diagnosis, dependency, stigma)
- Allow freedom to take risks: each step is a learning process, not failure. Dignity of risk.