

PRACTICING RECOVERY: Medication as a Tool for Recovery

The Role of Medication in Mental Health Recovery

Medication is a powerful tool that can help individuals reach their goals and work toward recovery. Combined with therapeutic interventions, community and family connections, and other recovery supports, medication can help individuals manage symptoms of serious mental illness and focus on achieving the lives they want.

This issue of *Practicing Recovery* explores how programs and providers can support overall health, improve outcomes, and empower individuals when prescribing and managing medication. It features an overview of a multidimensional program in the Midwest that keeps recovery at the core of its services, as well as an interview with a thought leader on what it means to use recovery-oriented practices when prescribing medication. As always, readers will get tips on what you can do now in your practice to approach medication management from a recovery orientation.

To learn more, see some of the following resources.

Recovery to Practice Clinical Decision Support Online Courses

RTP offers a wealth of online [webinars](#) and courses to help the behavioral health workforce apply principles of recovery to their clinical practice. The [clinical decision support courses](#) offer tools and strategies for prescribers who serve people with serious mental illness and co-occurring disorders. These courses come with free CME for eligible professionals.

American Psychiatric Association RTP Curriculum

This [nine-module set](#) of training tools provides psychiatrists and other interested professionals with a basic understanding of recovery from mental illness and substance use disorders and recovery-oriented psychiatric practice.

SAMHSA Behavioral Health Treatments and Services

This section of [SAMHSA's website](#) offers an overview of the many evidence-based and supportive treatments and services available for people with serious mental illness. These include resources on [co-occurring disorders](#) and [cultural competency](#) in behavioral health treatment.

The Hogg Foundation for Mental Health

The [Hogg Foundation](#) is a Texas-based organization that provides funding to programs that promote mental health recovery, resiliency, and choice. The Hogg Foundation provides podcasts, reports, and other resources on recovery-oriented approaches to mental health care.

Patient-centered Outcomes Research Institute (PCORI)

[PCORI](#) is a research organization focused on improving healthcare delivery and outcomes through research guided by the people who use services, their families, and their providers. PCORI has conducted more than 100 mental and behavioral health studies, with a focus on [outcomes](#) that are meaningful to consumers, including medication-related outcomes.

The National Council for Behavioral Health

The National Council is a nonprofit committed to comprehensive, high-quality mental health care and addiction treatment across the U.S. The National Council developed the popular [Mental Health First Aid](#) course, and it has myriad resources for mental health practitioners, including a section of the website focused on [practice improvement](#).



PROGRAM SPOTLIGHT

Journey Mental Health Center

On an individual's path to recovery, medication is just one strategy that may help them move forward with achieving their goals and living a full life. Journey Mental Health Center (or "Journey") presents a real-world example of how this principle can be put into practice.

Journey is community-based mental health provider in Madison, Wisconsin, that serves nearly 12,000 people through 28 programs each year. Journey serves people with complex social as well as behavioral and physical healthcare needs across three divisions—emergency services, community-based services, and clinic-based services.

Journey approaches each individual with the belief that they direct their personal recovery journey. The Journey team's role is to be responsive to individuals' wants and needs and to help them gain and use the tools to succeed according to their personal definition of success.

This begins with a comprehensive initial assessment that includes a recovery needs assessment with the individual and family that looks at social strengths and needs, meaningful daily living activities, housing, safety, and other domains. Journey also conducts a physical health review, and through a SAMHSA-funded grant, refers individuals who do not have a regular doctor to onsite primary care providers. This helps ensure that all health needs—behavioral and physical—are being met. Combined, these factors are a critical part of a person's "journey to health and wellness" and are at the heart of Journey's mission, says Chief Executive Officer Lynn Brady.

Medication as a Support, Not a Solution

When it comes to prescribing medication, Journey continues this approach of supporting individuals in their personal journey to recovery. When people enter Journey programming with self-identified issues, says Chief Medical Officer Karen Milner, M.D., the team works with them to identify the constellation of symptoms and factors that may be affecting their ability to achieve their goals. Through a shared decision-making process, clinicians help each person consider options and select medications that may best "fit" the individual's needs and preferences.

An important part of the process is a discussion of what medication can and cannot do. Real recovery emerges through meaningful relationships and activities, says Dr. Milner. She tells people that medication can help

reduce the symptoms that may be limiting their ability to engage in these relationships or activities, allowing them to get out and live a fulfilling life.

Journey providers also work with individuals to set reasonable expectations around medications. For example, medications may reduce voices but not eliminate them, or medications may control physical cravings for drugs, but peer support is more helpful for learning how to say "no" to peers that are still using.

Journey offers a number of programs and activities to complement psychopharmacology, including

- Individual, group, and family therapy
- Evidence-based therapies, like cognitive behavioral therapy
- Peer support services
- Targeted and team case management
- Supported employment or education
- Clubhouse
- Crisis stabilization
- Wellness activities, such as education about diet or exercise
- Light therapy and other alternative treatments

Putting Principle into Practice

A prime example of how Journey puts these ideas into practice is their early psychosis program, PROPS (Promoting Recovery from Onset of Psychosis). This coordinated specialty care program helps teens and young adults through a variety of interventions, including using small doses of antipsychotic medication to control psychotic symptoms and stay on a positive developmental path. Team members work with the young person to develop a care plan that is centered on their goals, dreams, and ambitions. Included in this care plan are non-medication tools such as individual and group psychotherapy, coordinated case management, educational and vocational rehabilitation, peer support services, and family education and support. This meaningful early intervention can make all the difference in a young person's ability to successfully transition into adulthood, says Chief Clinical Officer Tanya Lettman-Shue.

THOUGHT LEADER

Irene Hurford, M.D.



Special thanks to Lynn Brady, Karen Milner, and Tanya Lettman-Shue for their assistance in writing this article.

Dr. Hurford is an assistant professor of psychiatry at the Perelman School of Medicine at the University of Pennsylvania and the director of the Psychosis, Education, Assessment, Care, and Empowerment (PEACE) Program at Horizon House in Philadelphia. Dr. Hurford received a 2017 exemplary psychiatrist award from the National Alliance on Mental Illness (NAMI).

When it comes to talking about medication with the people she serves, Dr. Irene Hurford focuses squarely on improving a person's ability to lead a meaningful life, rather than the remission of disease. "In practical terms, medication is the basement floor on which the house of recovery can be built," says Hurford. "In my experience, medication alone rarely leads to recovery."

Dr. Hurford works with young people diagnosed with early onset psychosis through the PEACE program, a community-based early intervention service for Medicaid recipients. She sees medication as an important tool in helping these young people move forward with their lives, but she says it's not by any means the most important tool.

“The power to get better lies not in a bottle of pills but in relationships and activities that matter.”

At its best, medication can help alleviate the distress caused by psychiatric symptoms and allow young people to get back to the things that will help them in their recovery, she says. Along with family psychoeducation, supported education, and individual therapy—recovery-oriented cognitive therapy (CT-R) in particular—medication is one of a set of strategies to help improve functioning and quality of life.

Hurford and the people she serves often have conversations that include discussing individual and family perspectives on side effects, such as which side effects might the person tolerate and which side effects are not acceptable or would interfere with what is important to the person's recovery goals.

Dr. Hurford tells an anecdote of two young people who were in her program. One, a young woman who was on a high dose of medications, experienced many impairing side effects and had a strong self-identity as

a person who was "sick." With therapy, she changed her view of herself to that of a successful college student and subsequently greatly reduced her medications as she set her goals on graduate school. Although she still experienced voices on lower doses of medications, she no longer found the voices distressing, was free of impairing medication side effects, and was able to go to school and pursue her dreams.

On the other hand, a young man in the program was prescribed medication that fully eliminated his symptoms. However, the medications caused such intense sedation that he was no longer able to attend school outside his home and was falling asleep during scheduled online classes. Without the responsibility of school, his sleep/wake cycle became even more inconsistent and he rarely, if ever, left the house for activities. Although this young man had fully resolved symptoms—often a measure of "success" in treatment—his quality of life was far below that of the young woman who continued to hear voices.

An approach to psychopharmacology that focuses on improving day-to-day living and resiliency changes the tone of a clinical interaction for the better, says Dr. Hurford, and often helps engage families and young people using services.



LEARN MORE: Resources to Help You Dive Deeper

Check out these resources to learn more about how medication plays a role in recovery

- [Enhancing Clients' Communication Regarding Goals for Using Psychiatric Medications](#)
- [Shared Decision Making and Medication Management in the Recovery Process](#)
- [Medicines adherence: involving patients in decisions about prescribed medicines and supporting adherence](#) (National Institute for Healthcare Excellence Clinical guideline)
- [Recovery-oriented psychopharmacology: redefining the goals of antipsychotic treatment](#)
- [The Shared Care Plan Personal Health Record](#)

WHAT YOU CAN DO

EDUCATE YOURSELF

Concepts such as shared decision-making and recovery are not part of the standard curriculum in many education programs. If you want to learn more about how medication fits into a recovery orientation, visit the resources mentioned in this newsletter and also check out the rest of the [Recovery to Practice](#) website and SAMHSA's shared [decision-making tools](#).

CHALLENGE YOUR ASSUMPTIONS

Traditional medical approaches focus on the reduction or elimination of psychiatric symptoms as the key measure of treatment success. Yet, medication side effects such as weight gain, metabolic syndrome, or muscle pain may be considered worse than psychotic symptoms by some people. Do not assume you know what “[successful treatment](#)” means to each individual; ask them about their ideal outcomes.

BE UPFRONT ABOUT MEDICATION

Having open and honest conversations with individuals about what medication can and cannot do for them can strengthen your relationship and partnership for their recovery. Being fully knowledgeable about possible side effects and results can help them make informed and empowered decisions about their personal treatment and services.

HIGHLIGHT NON-MEDICATION STRATEGIES

Recovery-oriented services, school, employment, and housing, along with family and community supports, should be a part of every discussion about medication as a treatment option. Be clear that medication is one of [many tools](#) that can help people feel better.

CONFERENCES & EVENTS

Medication in Recovery Webinar Series

RTP will host a series of two webinars on psychopharmacology in the context of recovery in Summer 2018.

- **June 27, 2018:** Medication Optimization in a Recovery Framework
- **July 11, 2018:** The Role of Medication in Recovery

For more information, visit the RTP website at <https://www.samhsa.gov/recovery-to-practice>.

National Association for Rural Mental Health (NARMH) Conference

August 23-26, 2018, New Orleans, Louisiana

This year's conference on [rural resilience](#) will bring together professionals across the behavioral health field to learn and network on issues concerning mental health practice, research, policy, and advocacy for rural and remote populations.

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SAMHSA Voice Awards

August 8, 2018, UCLA Royce Hall, Los Angeles, California

The SAMHSA Voice Awards are held each year to honor consumer/peer/family leaders and television and film professionals who educate the public about behavioral health. [Learn more...](#)

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FREE ON-DEMAND CME!

Clinical Decision Support: Clozapine as a Tool in Mental Health Recovery.

This continuing education course offers information and resources for physicians, clinicians, and other practitioners serving people with psychotic symptoms who may be considering taking clozapine. [Learn more!](#)

Also check out our other CME courses: *Clinical Decision Support for Providers Serving Individuals with Co-occurring Disorders* [Course 1](#) and [Course 2](#). These courses are eligible for physician CME and NAADAC CEH.

FREE

ALL NEW SAMHSA TRAINING FOR PEER SPECIALISTS!

[Information for Peer Specialists Serving People with Mental Health Conditions Experiencing Homelessness.](#)

This six-module online course explores the intersection of homelessness and mental illness. Peer specialists and other learners will get practical, real-life tools and tips for helping people access services and housing for those who have been diagnosed with serious mental illness who are also experiencing homelessness. [Watch it now!](#)

FREE