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RECOVERY - A MODEL FOR COMMON MENTAL DISORDERS?

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Context: Recovery-concepts have travelled from margin movements into mainstream mental health policy rapidly in recent years.

Objectives: Implications of a Recovery model in comparison to a medical model or chronic disease model will be presented and discussed.

Key messages: The course of common mental disorders is variable. Remissions are possible as are recurrences and long-term disabilities. Research struggles with problems of definitions of types of courses and methodological problems of long-term studies. The clinical use of prognostic indicators and determinants of remission and recurrence and long-term courses for individual patients is limited. Many patients hesitate to understand their mental health problems within a model of medical care for chronic conditions. As a result a considerable proportion of their efforts towards coping and finding meaning in their struggle for recovery occur outside the patient-clinician relationship. A collaborative approach allowing for individualized interventions and accommodating hopes, fears, and subjective evidence in a personalized context might be better suited to bundle the resources of patients, their families and friends and professional helpers of different professional background.

Conclusions: The Recovery model with its emphasize on mental health promotion, subjective quality of life, patient-self-determination and choice has a lot to offer in terms of collaborative management of disorders with highly variable courses and little prognostic certainties.