

oil

vinegar

Principles Evidence based medicine (Sackett)



Oil and Water or Oil and Vinegar? Evidence-Based Medicine Meets Recovery

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Abstract With the increasing prominence of the notions of “recovery” and “recovery-oriented practice,” practitioners, program managers, and system leaders are increasingly asking about the relationship between “evidence-based practices” and recovery. After reviewing the concepts of recovery from mental illness, being in recovery with a mental illness, recovery-oriented care, and evidence-based medicine, the authors argue for a complementary relationship between recovery and evidence-based practices. This relationship is neither simple nor straightforward, but results in a whole that is greater than the sum of its parts through which each element benefits from the influence of the other.

Keywords Evidence-based medicine · Evidence-based practice · Recovery · Self-determination · Choice

and recovery. It seems to some that just as they were beginning to get used to the notion of evidence-based practices in mental health, they began to be pressured to make the services they provide recovery-oriented as well. This has naturally led to such questions as: “Is recovery evidence-based?” or “What is the evidence for recovery-oriented practice?” At the other end of the spectrum, some mental health consumer advocates view the emphasis on evidence-based practices to place a further restriction on their ability to exercise choice in their care. They also are suspicious of scientific claims to offer a privileged access to truth, arguing instead for relying on first-hand experiences as at least an equally valid source of information about the utility of psychiatric interventions.

This article attempts to address these issues by examining several possible relationships that may exist between the emphasis on evidence-based practice and the intro-

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- the relationship between recovery and evidence-based medicine is neither contradictory nor mutually exclusive.
- It is neither straightforward nor one-directional.
- Both practices can benefit of each other
- we need both to listen to people in recovery about their needs, preferences, values, and choices and also to find out which interventions are most effective in helping them to achieve the kinds of lives they wish to lead.
- We need to involve people in recovery in research: User research centre