

## DIRECTIONS FOR COMMUNITY PSYCHIATRY IN THE U.S.: A PILOT QUALITATIVE STUDY

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Community psychiatry is at a crossroads in the U.S. This crisis can be characterized by the discipline's relationship to: tension between social and biological psychiatry; and the Recovery Movement. Confronted with the strong presence of biological psychiatry, with social conditions that are not a core focus of their training, and with a strong push from patients, advocates, and some policy makers to create recovery-oriented care that, often, seems to minimize the importance of psychiatrists, the question - "What is community psychiatry in the U.S. - must be posed.

**Method:** This research, conducted at Yale University with IRB approval, involved 12 in-depth qualitative interviews with community psychiatrists at a public mental health center. The main interview question - "What is a psychiatrist? - was followed by questions involving the themes noted above.

**Result:** For the psychiatrists, psychiatry seems deeply embedded in medicine. If the biological model has been able to improve some parts of psychiatric practice, many psychiatrists will identify the limits of this model and feel frustration from its tendency to marginalize their role into one of medication management.

**Conclusion:** Regarding this lack of knowledge and understanding of mental illnesses, regarding the crisis that the health system is undergoing, it seems necessary to go above a simple definition of a psychiatrist as someone with skills for treating mental illness. With which skills can psychiatrists improve symptoms, the life context that contributes to patients' symptoms, and the mental health delivery system that often misses people's needs? Or going further, how can psychiatrists best advocate for their clients?