**Psychotherapy vs. Psychotropic Medication: Fears, Fiction, and the Facts**

by Jill Crawford, LCSW

“I am hesitant to bring my child to therapy because I don’t want her to wind up on medication.”

“I am worried that once you evaluate my child, you will put him on medication.”

“I know my child needs help, but I don’t want to go the medication route.”

These concerns are frequently shared with me by parents calling to inquire about therapy for their children. Parents will often ask me right off the bat what my feelings are about psychotropic medications and the idea of medicating children. The immediacy of this question, and the anxiety it so clearly creates for many parents, reminds me over and over again how loaded an issue this is. And rightfully so. Of course, medicating any condition is a serious matter, and when the patient is a child and the condition in question is a mental health one, the stakes feel much higher. The questions are numerous, and the subject can be a highly emotional one. I wanted to write this article because, in my experience, a number of parents in need have shied away from seeking therapy for their children and families out of a misguided fear that medication must necessarily be a part of this process. They are uncomfortable with the idea of medicine, so they’d better forgo therapy too. Right? Wrong!

I am a big believer in talk therapy. I should be, since I am a psychotherapist. I witness on a daily basis how talking can bring great relief to individuals in distress and has the power to heal. And therapy is so much more than talking. It is the process of being listened to, of being respected, learning, challenging oneself, growing, and relating. The list could go on and on. Therapy is different for everyone, an extremely personal experience. It can have far-reaching benefits. In my role as a therapist, I find myself acting as a partner—a companion or a guide—along on a journey with my clients. I may serve as a coach, a teacher, a mirror that reflects the feelings and content clients bring into sessions, a listener, or an advocate. The therapy process is a complex one full of opportunity and potential. Most relevant to this discussion, I believe that great change can be effected through talk therapy. Behavioral interventions, cognitive strategies, and self-esteem work are among the therapeutic techniques that can have significant impact on the lives of young children and adolescents. Participation in this kind of therapy does not necessarily require pharmacological intervention. In fact, the vast majority of my clients do not take any medication at all.

In some cases, however, mood or behavioral symptoms pose such a significant barrier to therapy’s effectiveness that exploring the potential benefits of medication is a worthwhile endeavor. Certain mental health problems can be chemically based and thus initially unresponsive to talk therapy. In these cases, medication can be a valuable supplement to therapy, helping to improve symptoms sufficiently that the child can participate more fully in his or her therapy. If your child’s therapist feels that a medication evaluation would be valuable for your child, the therapist will make this recommendation and provide you with referrals to psychiatrists. If your anxiety is rising as you read this, here are some things to keep in mind as you consider heading down this path:
➢ As parents, whether or not you pursue a psychiatric evaluation for your child will always be your choice.
➢ If you choose to go for a psychiatric evaluation and the psychiatrist recommends a trial of medication for your child, it is still your choice.
➢ Most children who take medication will only do so for a short period of time (6-12 months). Psychotropic medication is intended to be a temporary intervention, not forever.
➢ Medication dosages can always be adjusted, and medication can be stopped (in consultation with the psychiatrist) if you observe side effects or if there is no significant improvement of symptoms over time.
➢ You know your child best—your observations are important data for the psychiatrist and therapist to be apprised of.
➢ You are your child’s best advocate. Do your own research, don’t be afraid to ask questions and assert your opinions.
➢ Partner with a psychiatrist with whom you and your child feel comfortable, and who is willing to collaborate with your child’s therapist.
➢ Partner with a psychiatrist who specializes in the treatment of children and adolescents.

Most importantly, if your child is in need of professional mental health treatment, do not avoid seeking therapy because of negative feelings or fears about medication. Help is available in many forms, and the choices are yours to make.

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