

NeuroFaith, LLC

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Psychiatrist, Dr. Mena Mirhom, MD, posted a strongly critical response to my blog published in *CMDA*, titled *Psychiatry's Dirty Secret: How Big Pharma Hijacked Mental Healthcare*. Please see his critique, along with my rebuttal as noted below:

Christian Medical & Dental Associations, as a Christian psychiatrist who's been active in CMDA since medical school & have been actively involved in the the CMDA Psychiatry Section – Limited Access, I find this article disappointing and surprising. I have not seen you publish something that is neither spiritually edifying nor clinically accurate.

Written by a person who has never prescribed a medication, & does not have the medical training necessary to evaluate how these medications work or their efficacy.

To raise awareness about side effects and call for human-centered care, would make sense. The inflammatory & hyperbolic statements such as “modern psychiatry has sold out to Big Pharma” is not only untrue but I don't understand how that can possibly represent the views of a Christian medical organization.

Please consider reviewing this again.

Mena Mirhom

My response to Dr. Mirhom:

Dear Dr. Mirhom,

Thank you for taking the time to engage with my work. I recognize that discussions surrounding psychiatry, psychotropic medications, and the broader field of mental health care can evoke strong emotions, particularly for those who have been personally affected—whether as patients, clinicians, or loved ones.

First and foremost, I want to acknowledge that you are clearly highly respected in your field. Your dedication to psychiatry and your commitment to helping those struggling with mental health challenges are evident, and I deeply respect the work you do. This conversation is not about questioning the sincerity or expertise of individual psychiatrists but rather about addressing systemic issues within the profession.

While I am not a prescriber, as a PhD in clinical psychology, I am well-equipped to analyze and interpret research, particularly regarding the effects of psychotropic medications. My perspective is not formed in isolation but rather through years of working with patients, many of whom have suffered significant harm from these treatments. This is not to dismiss the potential benefits that some individuals experience, but rather to highlight a pressing issue: the psychiatric profession, as a whole, is facing a crisis of credibility. Far too often, the risks and limitations of these medications are downplayed, while alternative approaches to mental health care are ignored or dismissed outright.

As Christians, we are called to humility, self-reflection, and a commitment to truth. This applies not only to our personal lives but also to the professional fields in which we operate. It is not an act of hostility to critically examine the practices of psychiatry or psychology—it is an act of responsibility. When we see harm being done, we have an ethical obligation to speak out, even when doing so is uncomfortable or unpopular.

Moreover, it is not just psychiatry that is in crisis. The field of psychology, once rooted in scientific inquiry and clinical practice, has increasingly become ideologically driven, prioritizing prevailing cultural narratives over rigorous, evidence-based care. This ideological capture undermines trust in the profession and, more importantly, compromises the well-being of the very individuals it claims to serve. My intent is not to vilify psychiatry or psychology but to encourage honest reflection and reform. We cannot afford to turn a blind eye to the growing number of individuals who have suffered under a model of care that often prioritizes pharmacological intervention over holistic healing. My hope is that, as a profession and as individuals, we will have the courage to question, to learn, and ultimately, to do better.

Again, I appreciate your engagement with these difficult but necessary conversations. Truth and accountability are not enemies of healing—they are its foundation.

Respectfully,

Jeff