

The importance of a proper classification of mental disorders providing a common ...

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It is difficult to specifically describe “ abnormal” behavior, but the DSM stands front and center as a guide for diagnosis and treatment of mental disorders, all while making the crucial distinction of regarding disorders as clinical entities. The classification of disorders carries pros and cons, as classification provides a common language and communication shorthand for treatment between clinicians, allowing for timely and well-organized relays of information. Conversely, classification may spark stereotyping, labeling and the facilitation of negative stigma associated with a diagnosis. The consideration of cultural perceptions of mental illness is extremely important to effective treatment, and abnormal behavior must be examined alongside the culture of its occurrence. Scientific research designs are imperative to proper psychological research, taking the form of case studies, self-report data studies, and observational approaches in almost any setting. These studies may even allow for correlational conclusions to be drawn in regards to a broad population, although correlation does not always equal causation. If a study involves clinician interference, the research becomes experimental and can be more effectively regulated by those conducting the study.

To clarify, classification is directly associated with stigma, a harmful practice of stereotyping based on mental illness in society (ie. disgrace, embarrassment at the concept of having a mental disorder, etc.) Prevalence, meanwhile, refers to the number of active cases in a population during any given period of time. Conversely, incidence refers to new cases that occur over a given period of time.

Conclusions regarding causality and directionality are not meant to be reached through positive or negative correlations between two variables—rather, the deductions we make must come from an experimental research approach, which instead utilizes dependent and independent variables. From here, treatment and observation can be performed through a variety of study types and methods depending on the sample or population being observed. These include the organizational processes of random assignment, single-case research designs, ABAB designs, single-blind studies and double-blind studies, along with the implementation of placebos and analogue studies. Analogue studies allow for a transfer of findings onto humans given an approximation, such as animal testing. Each variety of study type is best suited to a particular kind of research. ABAB designs, for example, offer an in-depth look at the individual segments of treatment, as well as their functionality given human interference and free reign, which allows for effective development of treatment plans and testing of established therapies for specific scenarios. Single-case research designs involve only a single subject repeatedly examined over time and are ideal for rare disorders or isolated reactions to a treatment. Double-blind studies and the implementation of placebos and random assignment virtually eradicates bias from both sides during testing to procure accurate, unblemished results.

The concepts of what does and does not define a mental disorder are debatable and the subject of hot debate, both in the modern world and throughout the development of assorted volumes of the DSM. Given the criteria in the DSM-5, it can be difficult to discern standard human behavior

from a true mental condition, a concept that sparked controversy with the addition of internet gaming disorder and caffeine use disorder to the most recent edition of the manual. However, the inclusivity of behavioral deviations in the DSM-5 carries financial significance, directly relating to insurance coverage of a patient's conditions and subsequent monetary reimbursement for treatments.