

16 Critiques of Psychiatric Diagnosis

1. 'Symptoms' of mental illnesses do not cluster together (in the way they do for physical illnesses) – people present in very unique ways with symptoms of lots of different mental illnesses.
2. When they do cluster, it is not because of an underlying physiological cause (cf the hearing voices exercise); any clustering may be the result of medication and other iatrogenic damage e.g. institutionalisation.
3. People can have the same diagnosis but have nothing in common.
4. Psychiatric diagnoses are not predicative of outcome – we can not predict 'prognosis' with similar degrees of confidence as for many physical illnesses (e.g. 30% of people diagnosed as schizophrenic recover after one breakdown, 30% have periods of being 'well' and being 'ill', and 30% get steadily worse i.e. prognosis is random not predictable).
5. Diagnosis has not led to the uncovering of underlying processes that 'cause' the symptoms/problems.
6. There are no consistent differences found post-mortem that cannot be explained by iatrogenic damage.
7. There are no physical tests for psychiatric diagnoses.
8. There are no biological or behavioural markers.
9. Diagnoses as explanations of people's behaviour are tautological (*Q. Why does he hear voices? A. Because he is schizophrenic. Q. How do you know he is schizophrenic? A. Because he hears voices.*)
10. Diagnoses are solely based on clinical interview which is notoriously prone to bias and reliability problems.
11. There is a large body of research showing low reliability. Attempts to improve inter-rater reliability can improve reliability without addressing problems of validity (e.g. It's possible to get people to agree to call a table a chair, but the fact remains that it is still a table).
12. Diagnoses lend (false) hope of quick-fix solutions.
13. Diagnoses stick and are stigmatising.
14. Diagnoses legitimise the widespread drugging and sedating of people.
15. Diagnoses medicalise and individualise distress, and pathologise behaviour that is different from 'acceptable social norms' (which change over time e.g. homosexuality).
16. Diagnoses suit powerful vested interests and let governments and people 'off the hook' regarding addressing social causes of distress.