

## A Short Note on Mental Illness

Anna Borghi\*

Department of Psychiatry, Sapienza University of Rome, Rome, Italy

### DESCRIPTION

Three major assumptions regarding the nature of mental diseases and the function of biological data in understanding them appear to underpin the RDoC's implementation and the goals that have driven this pivotal change. First, the RDoC postulate that mental diseases are natural types that can be identified and described using a value-neutral blend of genetics, imaging, and neuroscience. Second, the RDoC argue that a classification system based primarily on genetics, brain circuitry, or other biomarkers, as opposed to a classification system based primarily on traditional forms of clinical examination, clinical symptoms, patient history, phenomenology, or patient narrative, could claim more validity than a classification system based primarily on traditional forms of clinical examination, clinical symptoms, patient history, phenomenology, or patient narrative. Finally, the RDoC believes that biomarkers can serve as both predictors of mental disorder risk and diagnostic tests for the existence or absence of a mental disorder, meaning that any valid mental disorder has a biosignature or direct biological correlations. These assumptions are based on a deeper philosophical belief that values and objectivity are mutually exclusive.

Because decisions about classification have significant financial, social, legal, and medical implications, and because many critics inside and outside the field of mental health continue to argue that definitions of mental health, disorder, or disease are untrustworthy because they are based on subjective value judgments or lack biological foundations, the release of DSM-5 has sparked controversy. What's astonishing is the persistence of the viewpoint that any classification scheme that isn't primarily based on "objective laboratory measure" has "lack of validity."

This viewpoint implies acceptance of the premise that the only way to validity in psychiatric nosology is through reference to ostensibly "objective" (i.e., value-neutral) laboratory measures or biological facts. This notion is intertwined with a broader disease-naturalism explanation of mental disorders, according to which psychopathology is defined entirely by dysfunctional neurobiological mechanisms and value-free events that occur within the human body. We'd think that by now, most

researchers recognise science and medicine as a social enterprise infused with values, whether it's through molecular achievements or clinical breakthroughs.

Medical categories are infused with values in a variety of ways. Values might influence practical decisions regarding where and how to break up clusters of symptoms that have previously been agreed upon. Alternatively, they could operate at a deeper level, influencing what is called dysfunctional or disordered conduct in the first place. Feminist philosophers, for example, have suggested that political and gender-based ideas about "correct" feminine behaviour have influenced specific illness categories like histrionic and borderline personality disorders, as well as premenstrual dysphoric disorder. Finally, values invariably impact the therapeutic encounter; making diagnosis a medical hermeneutics exercise for doctors who must evaluate patients' self-reported symptoms.

Many proponents of a strict biological model recognise these characteristics and aim to reduce the involvement of values in psychiatric disease classification in order to achieve what they believe is a more valid classification system that "carves nature at the joints." Scientific classification systems, whether for astronomical objects, insect species, tumour types, geological formations, or meteorological phenomena, should, in this naturalist's opinion, reflect the observer-independent structure of the external world. To accomplish this accurate representation of reality, individuals developing categorization methods should try to avoid using or relying on values as much as possible. Values, according to this viewpoint, sabotage objectivity.

The goal of classification for naturalists is to capture what's 'out there,' value-neutral truths about the world that exist independently of people who create it. Naturalism expresses the view that a Platonic universe exists in which species, classes, and kinds may be objectively identified by recognising their pure, essential features without regard to values. A true DSM-5, free of values and based on a solid biological foundation, would be accurate in all periods and locations, according to this viewpoint. To put it another way, whether or not there are any people interested in reading, hearing, or using a sound classification system of disease and condition, a strict value-free, objectivist interpretation of it should be valid.

**Correspondence to:** Anna Borghi, Department of Psychiatry, Sapienza University of Rome, Rome, Italy, E-mail: Anna@borghi.it

**Received:** December 1, 2021; **Accepted:** December 15, 2021; **Published:** December 22, 2021

**Citation:** Borghi A (2021) A Short Note on Mental Illness. *J Psychol Psychother.* S5:003.

**Copyright:** © 2021 Borghi A. This is an open access article distributed under the terms of the creative commons attribution license which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.