

# HOW DO MENTAL HEALTH PROFESSIONALS USE THE *DSM* IN THEIR RESEARCH, CLINICAL, AND INSTITUTIONAL WORK?

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### JHSB Policy Brief

Michael Halpin<sup>1</sup>

#### RESEARCH PROBLEM & DATA

Nearly one in five Americans live with mental illness. The *Diagnostic And Statistical Manual of Mental Disorders (DSM)* defines and legitimates what counts as mental disorder, while informing reimbursement practices for treatment. Understanding how mental health professionals use the *DSM* is crucial given the economic, social and individual repercussions of mental illness. To understand the impact of the *DSM*, I document how mental health professionals use the *DSM* in their research and clinical work, while also detailing how the *DSM* operates as an institutional tool.

I conducted ethnographic observations at a large neuroscientific laboratory, documenting the data collection and analysis practices of researchers engaged in a longitudinal study on psychiatric symptoms and mental disorders. I also observed *DSM-5* workshops, webinars, and the annual meetings of both the American Psychiatric Association and Society for Biological Psychiatry. Additionally, in-depth interviews were completed with 27 mental health professionals (psychologists and psychiatrists) who were engaged in both clinical and research work. Participants were institutionally based, working in public hospitals, veterans' administration hospitals, academic medical centers, or outpatient mental health clinics. Analysis was informed by both grounded theory and actor-network theory.

#### KEY FINDINGS

- The *DSM* influences research by informing how mental disorders are operationalized and how research participants are selected. The *DSM* influences clinical work by impacting how disorders are conceptualized, how disorders are formally diagnosed, and how diagnoses evolve throughout treatment.
- The *DSM* connects professionals to insurance interests through reimbursement pressures and bureaucratic policies. The *DSM* connects professionals to pharmaceutical companies through companies' influence on research and diagnostic categories.
- Professionals critiqued the *DSM's* impact on treatment and research. Participants endorsed numerous social scientific and popular critiques of the *DSM* (e.g., the *DSM* defines some normal behaviors as psychiatric disorder).

#### POLICY IMPLICATIONS

Policy makers, clinicians, and patient advocacy groups should attend to the influence of pharmaceutical companies on research practices, particularly in relation to Research and Domain Criteria (RDoC) and attempts to substantially revise the *DSM*. While proposed revisions might improve quality of care, suggests that revisions are also intertwined with pharmaceutical interests.

Insurance and billing policies create pressures for professionals to apply diagnoses that maximize institutional revenues and to diagnose healthy individuals to ensure reimbursement for clinical visits. Policy makers and patient advocacy groups should attend to the connection between institutional policies and increases in psychiatric diagnoses.

Many concerns with the mental health system are endorsed by frontline professionals, who should be engaged as shareholders in initiatives aiming to improve diagnosis and patient care.

Figure 1. *DSM* Influence on Research and Clinical Work.

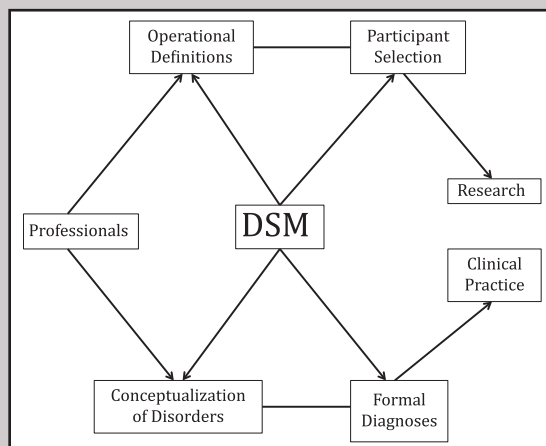


Figure 2. *DSM* Linking Insurance and Pharmaceutical Companies to Professionals.

