Presentation Abstract

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Abstract: The development of a nosological system has been a central driving force in the history of psychopathology. Most therapeutic approaches in Western medicine, as well as neuroscience research approaches, continue to be fundamentally based on the aims of identifying pathology, its categorization and modeling. However, the theoretical foundations and resulting practices of these taxonomic approaches have been fraught with deep conceptual, methodological, and ethical problems. On the empirical front, multiple studies have described the limitations and instability of these categorical boundaries. On the theoretical front, issues of demarcation, complexity and ontology have long been identified and debated. From an ethical perspective multiple sources of bias have been reported including: ethno-cultural, gender, financial interests as well as broader pressures aimed at maintaining social and political status quo. Together these factors have often resulted in medicalization, stigmatization and the tragic loss of autonomy to diagnosed individuals. The continued attempt to unify all psychopathological classifications has only served to amplify the pitfalls and dangers despite its evolving complexity. In response to many of these issues, recent trends have turned to molecular-biology and neuro-genetics. The hope is that bio-markers may circumvent the ambiguity of the categorical classification system and offer more definitive boundaries. However, the turn to these reductionist classifications, in many ways, is merely repeating the nosological conundrum in a different form. Moreover, these new approaches may exacerbate the situation by entrenching already fatalistic tendencies while further distancing the subject from the social and environmental context. In this presentation we review some of the history of the failings in nosology-based approaches including recent developments. We suggest that it is critical to understand and reassess nosology with these historical references in order to disect social issues regarding the label of being mentally ill and the stigmatization that follows. In response to this historical context we also identify new approaches to care and mental health that may avoid the hazards of classification systems altogether by focusing instead on principles inspired by traditional, non-Western, health practices and contemporary approaches to physical accessibility.

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