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EMBARGOED UNTIL February 10, 2010 12:01 AM EST***DSM-5 Development Process Includes Emphasis on Gender and Cultural Sensitivity
Consideration of How Gender, Race and Ethnicity May Affect Diagnosis of Mental Illness***

ARLINGTON, Va. (Feb. 10, 2010) – The process for developing the American Psychiatric Association’s proposed diagnostic criteria for the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* has included careful consideration of how gender, race and ethnicity may affect the diagnosis of mental illness, according to the team responsible for *DSM-5* development.

DSM is the standard classification of mental disorders used by mental health and other health professionals for diagnostic and research purposes. The APA today released the proposed diagnostic criteria, which will be available for public comment until April 20. The proposed criteria will be reviewed and refined over the next two years. During this time, the APA will conduct three phases of field trials to test some of the proposed diagnostic criteria in real-world clinical settings.

“The APA recognizes that *DSM-5* will be used in many different settings and must recognize differences in mental illness that may occur across gender, race and ethnic groups,” said David Kupfer, M.D., chair of the *DSM-5* Task Force. “Towards that end, each stage of the *DSM-5* development process has sought significant involvement of women, members of diverse racial and ethnic groups, and international researchers and clinicians. We also designated a specific study group to review and research these issues, and ensure they were taken into account in the development of diagnostic criteria.”

The Gender and Cross-Cultural Study Group used a number of methods to review and incorporate cultural considerations into the *DSM-5* proposed criteria. They reviewed epidemiological data sets from the United States and other countries to determine if there were significant differences in incidence of mental illness among different subgroups (e.g., gender, race and ethnicity) that might indicate a bias in currently used diagnostic criteria, including conducting meta-analyses (additional analyses combining data from different studies). Group members also reviewed the literature from a broad range of international researchers who had explored issues of gender, ethnic and racial differences for specific diagnostic categories of mental illness.

In this process, the Gender and Cross-Cultural Study Group has tried to determine whether the diagnostic categories of mental illness in *DSM* need changes in order to be sensitive to the various ways in which gender, races and culture affect the expression of symptoms. “We are carefully assessing the role of culture in mental disorders, to determine syndromes that may be found in some cultures, but not others,” said Kimberly Yonkers, M.D., chair of the Gender and Cross-Cultural Study Group. “We wanted to take these cultural syndromes into account to include cultural variations in diagnostic criteria whenever they were necessary.”

As an example, Dr. Yonkers noted the work of researchers such as Roberto Lewis-Fernandez, M.D., director of the New York State Cultural Competence Center of Excellence and the Hispanic Treatment Program at New York State Psychiatric Institute, who has described different cultural expressions – how individuals experience and describe symptoms – in panic disorder among some Hispanic and Asian cultures. The study group subsequently recommended some changes to diagnostic criteria for panic disorder being considered for *DSM-5*, based on these differences.

“It is important to emphasize that we have received information and feedback from colleagues around the globe as we have reviewed this research and recommended changes to diagnostic criteria,” said Dr. Yonkers.

The study group also considered whether there was widespread cultural bias in criteria for specific diagnoses. An analysis of major depressive disorder, for example, did not find a compelling case for bias in the diagnostic criteria. However, the study group did find that some elements of post-traumatic stress disorder (PTSD) were constructed in a way that may have contributed to estimated differences in the rates of illness among men and women, so they recommended some changes to the diagnostic criteria in *DSM-5* to increase gender sensitivity.

All proposed draft changes to *DSM* are being posted on the Web site www.DSM5.org for public review and comment until April 20. More information on the process for developing *DSM-5* is also available on the Web site. Final publication of *DSM-5* is planned for May 2013.

The American Psychiatric Association is a national medical specialty society whose physician members specialize in the diagnosis, treatment, prevention and research of mental illnesses, including substance use disorders. Visit the APA at www.psych.org and www.healthyminds.org.

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