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Decriminalizing Mental Disorder Concepts — Pedophilia as an Example

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“Vice” is the term I have used in prior work as a technical term to refer to morally wrongful and/or criminal conduct. In prior work, I have argued that particular categories in DSM-IV-TR and draft DSM-5 categories and criteria are “vice-laden”, which means that wrongful/criminal conduct is intrinsic to the meaning of some diagnostic criteria. In my view, vice-laden diagnostic categories are problematic for several reasons: they cast psychiatry/mental health care into police-like social roles, wrongful conduct as diagnostic criterion institutionalizes and perpetuates stigma for all mental disorders, and vice-laden disorders confound public policy about the respective roles of mental health, religious and educational institutions, and criminal justice institutions in the regulation of individual conduct. Of the subgroup of DSM categories that are vice-laden, the paraphilias, especially those that involve transgression behavior with others, are deeply vice-laden as currently described in DSM categories. I present a nosological procedure that, if implemented, would minimize vice-laden diagnostic criteria and the consequent vice/mental disorder confounds in research, practice, and policy. The procedure is based upon key distinctions in moral philosophy, which separate two kinds of values: moral values, whose meanings involve concepts of good/evil and right/wrong. The other kind of value relevant here, nonmoral values, include a range of meanings relevant to illness and disorder concepts: incapacity, pain, suffering, impairment, to name a few examples. Most cases of disorder criteria are easily identified as involving moral or non-moral values. Disease and injury in physical medicine (myocardial infarctions, pneumonia, fractured femurs) universally involve nonmoral values in their defining concepts. Most mental disorder concepts in the DSM are based upon nonmoral values as well. However, some categories, including transgressive paraphilias, involve moral values in their diagnostic criteria. My basic prescription for the DSMs is that all DSM disorders should be PRIMARILY based upon nonmoral negative values: pain, suffering, disability, impairments, and incapacities of various kinds, consistent with the rest of medicine. Categories such as Pedophilia are problematic because the diagnostic criteria describe little in the way of nonmoral negative values; once transgressive molestation of minors (in fantasy or action) is removed from Pedophilia diagnostic criteria, there is almost nothing left of the disorder phenomenology in the current diagnostic criteria. Such impoverishment of the Pedophilia phenomenology raises at least two questions:

(1) Should Pedophilia be considered a mental disorder at all, if it is based primarily upon fantasied or actual criminal conduct? (2) If Pedophilia and related categories are to be preserved as legitimate, nonmorally value-laden disorders, then they require a preponderance of nonmorally-value-laden diagnostic descriptors in their diagnostic criteria. I will illustrate these concepts with concrete examples from DSMIV-TR and current DSM-5 proposals, and describe in more detail how vice-laden disorders may be “rehabilitated” within a scientific psychiatric nosology.

References

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