



Problems of Thinking, Feeling, and Behaving are Not Medical Diseases

The notion that psychological problems are medical diseases caused by biogenetic defects is scientifically unsupported, disempowering, and stigmatising. People dealing with psychological issues are not sick with a "chemical imbalance" in their brain, their experiences are not "symptoms" caused by a medical disease, and they are not fundamentally different from anyone else because psychological struggles are part of the human condition. This reality is empowering to those who accept it, including both clients and therapists.

I reject the idea that problems of thinking, feeling, and behaving are valid medical illnesses or diseases. Although biological factors like genes and brain structure and function play an important role in our psychological experience, there is no reliable scientific evidence that biological *abnormalities* are a major cause of "mental disorders" like major depression, schizophrenia, bipolar disorder, anxiety disorders, ADHD, eating disorders, or addictions. There are many biological correlates of psychiatric diagnoses, which is not surprising because all psychological phenomena are associated with biological processes (i.e., the mind and brain are connected). However, no disorder of body structure or function has been shown to cause any "mental disorder," or to even be specifically correlated with any psychological problem to a degree that is useful in making a diagnosis. That is why "mental disorders" are diagnosed with questions and subjective judgment rather than objective tests as with medical diseases.

On occasion, a psychological problem turns out to be caused by physical pathology such as a bacterial infection or genetic mutation. In such cases, the problem is understood to be a medical disease and is no longer classified as a "mental disorder" or treated by "mental health" professionals. It makes no sense to diagnose a person suffering from a bona fide medical disease with a "mental disorder."

Popular pronouncements that "mental disorders" are caused by brain pathology, such as the claim depression is caused by a "chemical imbalance in the brain" and the claim that psychiatric drugs "work by rebalancing chemicals in the brain," are scientific myths that can harm those who believe them. It is important for clients to understand this so they can make informed choices about their care based on accurate information. This reality was nicely summarised by Professor Patrick McGorry, prominent Australian psychiatrist and former Australian of the Year, in a 2018 interview with the Australian Broadcasting Corporation. When asked his opinion about the idea that depression is caused by a chemical imbalance in the brain, he answered:

"Strategically, it's good to challenge how the drug companies, and the DSM, and the FDA oversimplify not just depression but all mental disorders actually. They try to reduce them, and American psychiatry is really responsible for that, I think. They turned away from

psychoanalysis, which is obviously not that great, to something which is equally reductionistic, biological psychiatry in its sort of very narrow form and regarded everything as just a brain disease. And that led to...very simplistic models. Now, no one believes that anymore...if you talk to any modern researcher in neuroscience or psychiatry, no one would say that is the explanation. But when you go to see a GP, or even some psychiatrists, they will still trot out that very simplistic explanation to people, and that's why it's important to challenge that."

Unfortunately, the scientifically discredited claim that psychological problems are medical diseases caused by a chemical imbalance remains popular, not just among healthcare providers, but even from leading experts, professional organisations, and government agencies. Indeed, such misinformation is often promoted in high-profile "mental health literacy" and "anti-stigma" campaigns. A 10-year study of 3000 people in South Australia found that those with high "mental health literacy," in other words who believed Beyondblue's message that depression is a medical illness caused by a chemical imbalance, were much more likely to become clinically depressed during the study than those who did not believe this message. Apparently, rejecting the idea that depression is a medical disease is protective against depression.

If "mental disorders" are not medical diseases, what are they? In reality, diagnoses like "obsessive-compulsive disorder" and "major depressive disorder" are simply *descriptive labels* for types of psychological problems. They do not *explain* the cause of such problems, unlike medical diseases caused by physical pathology which by definition explain why people experience symptoms. Psychiatric diagnoses like "social anxiety disorder" are *concepts*, whereas diseases of the body can be directly observed and diagnosed with medical tests. It is thus a mistake to think of "mental disorders" as real biological entities ("things" that people "have," like a cancerous tumour), no different than medical diseases like diabetes, that cause symptoms. Psychiatric diagnoses don't cause psychological problems, they *are* psychological problems; what causes them is a different matter entirely. A diagnosis of "major depressive disorder" does not explain why a person feels depressed, it simply describes the fact the person feels depressed. This is very different from a diagnosis of diabetes which explains, through a well-understood pathological biological process, why a person has symptoms like weakness and fatigue. Thus, it is easy to see that the popular claim "mental illness is a disease like any other" is both misleading and harmful.

There is no scientific justification for assuming, in the absence of direct medical evidence, that people who are diagnosed with a "mental disorder" are medically ill, have a malfunctioning brain, or that their thoughts, feelings, and behaviours are "symptoms" of a literal disease from which they suffer. This is important to understand because people who believe their psychological problems are medical diseases are more pessimistic about improvement, feel like they have less control over their own lives, make less effort to control their behaviour, and believe therapy will be less effective than psychiatric drugs even in cases where science-based therapies are the best available approach. And psychologists and psychiatrists who believe psychological problems are medical diseases have less empathy for their clients, view them in less human terms, and are more pessimistic about the benefits of psychological therapy.

The notion that psychological problems are medical diseases caused by biogenetic defects is scientifically unsupported, disempowering, and stigmatising. People dealing with psychological issues are not sick with a "chemical imbalance" in their brain, their experiences are not symptoms caused by a medical disease, and they are not fundamentally different from anyone else because psychological struggles are part of the human condition. This reality is empowering to those who accept it, including both clients and therapists.

If people who experience psychological problems do not have a "broken brain" or "chemical imbalance," they do not necessarily need to take psychiatric drugs to fix it. Drugs can be helpful for some clients, but they do not correct brain pathology (because none exists) and are therefore not necessary in the way insulin is for a person with diabetes. The choice to take a psychiatric drug, as with any intervention, should be based on fully informed consent about its risks and benefits, both alone and relative to alternative evidence-based interventions. Individuals who have been misled by their healthcare provider to believe they need to take psychiatric drugs to correct a chemical imbalance in the brain are unable to provide informed consent, cannot engage in shared decision-making about their care, and are at risk for undergoing treatment that may not be in their best interests.

I do not use language, causal explanations, or therapeutic approaches that might cause clients to view themselves as abnormal or defective, reduce agency, lower self-efficacy, and cause pessimism about improvement. I have met many people whose experience in the mental health system tragically transformed what might have been a temporary stress-related period of distress into a chronic and disabling psychological struggle. Often, such individuals were told they have a chemical imbalance in their brain, were taught to view their unwanted thoughts and feelings as "symptoms" of "mental illness" that must be controlled or eliminated, were given diagnoses that altered their identity and invited stigma and discrimination, and were prescribed experimental psychiatric drug cocktails that worsened their psychological wellbeing and physical health. Although such practices are common in the mental health system, a compelling body of scientific research demonstrates that they routinely make clients worse in the longer-term. The Illawarra Anxiety Clinic strives to protect clients from the potential harms of this pseudoscientific biomedical approach. In doing so, we strive to follow the most important ethical principle for healthcare providers: "First, do no harm."

To learn more, check out this special issue of *the Behavior Therapist* I commissioned on this topic.

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