



Attention to Culture, Racism, and Discrimination in DSM-5-TR

The APA, in response to concerns from members and others in the mental health field that race, ethnoracial differences, racism and discrimination be handled appropriately in the Diagnostic and Statistical Manual of Mental Disorders (DSM), adopted multiple strategies to address these factors that impact psychiatric diagnosis in DSM-5-TR. These strategies include:

- A Cross-Cutting Review Committee on Cultural Issues, composed of 19 U.S. and international based experts in cultural psychiatry, psychology, and anthropology. Those experts reviewed the texts for cultural influences on disorder characteristics.
- An Ethnoracial Equity and Inclusion Work Group, composed of 10 mental health practitioners from diverse ethnic and racialized backgrounds with expertise in disparity-reduction practices, reviewed references to race, ethnicity, nationality, and related concepts throughout DSM-5-TR to avoid perpetuating stereotypes or including discriminatory clinical information.

As part of the changes implemented in DSM-5-TR is the use of language that challenges the view that races are discrete and natural entities:

- The term “racialized” is used instead of “race/racial” to highlight the socially constructed nature of race.
- The term “ethnoracial” is used in the text to denote the U.S. Census categories, such as Hispanic, White, or African American, that combine ethnic and racialized identifiers.
- The terms “minority” and “non-White” are avoided because they describe social groups in relation to a racialized “majority,” a practice that tends to perpetuate social hierarchies.
- The emerging term “Latinx” is used in place of Latino/Latina to promote gender-inclusive terminology.
- The term Caucasian is not used because it is based on obsolete and erroneous views about the geographic origin of a prototypical pan-European ethnicity.
- Prevalence data on specific ethnoracial groups were included when existing research documented reliable estimates based on representative samples.

In addition, information is provided on variations in symptom expression, attributions for disorder causes or precipitants, and factors associated with differential prevalence across demographic groups. Cultural norms that may affect the level of perceived pathology are also reported. Attention was paid to the risk of misdiagnosis when evaluating individuals from socially oppressed ethnoracial groups.

DSM is the manual used by clinicians and researchers to diagnose and classify mental disorders. The American Psychiatric Association (APA) will publish DSM-5-TR in 2022.

APA is a national medical specialty society whose more than 37,400 physician members specialize in the diagnosis, treatment, prevention, and research of mental illnesses, including substance use disorders. Visit the APA at www.psychiatry.org. For more information, please contact APA Communications at 202-459-9732 or press@psych.org.

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