



AMERICAN  
SPEECH-LANGUAGE-  
HEARING  
ASSOCIATION

June 15, 2012

Dilip V. Jeste, MD  
President, American Psychiatric Association  
1000 Wilson Boulevard, Suite 1825  
Arlington, VA 22209

Dear Dr. Jeste,

The American Speech-Language-Hearing Association (ASHA) is the professional, scientific, and credentialing association for more than 150,000 members and affiliates who are audiologists, speech-language pathologists, and speech, language, and hearing scientists. ASHA values the opportunity to comment for the third time on the proposed content of the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, and collaboration with APA is most welcome as the revision process continues.

Although we appreciate that some of our proposed changes have been incorporated into the *DSM-5*, we maintain that key areas are in need of fundamental revision. One such consideration pertains to the inclusion of communication disorders in a manual of mental disorders. ASHA, along with other organizations including the Canadian Alliance of Audiology and Speech-Language Pathology Regulators, Canadian Association for Speech-Language Pathologists and Audiologists, Comité Permanent de Liaison des Orthophonistes-Logopèdes de l'Union Européenne, and Speech Pathology Australia, asserts that although psychological responses to communication disorders may indeed occur, caution must be exercised when making assumptions that communication disorders have a psychological origin.

Because of the foundational nature of this concern, ASHA's official position is that the *DSM* should acknowledge that communication disorders are not mental (psychiatric/psychological) conditions.

Further, *DSM-IV-TR* refers to "clinicians" but does not indicate which professionals should be involved in diagnosis of particular disorders. ASHA requests that speech-language pathologists be added to the list of professionals who may use the revised manual. Please add *speech-language pathologists* to the introductory section about the *DSM-5*, as well as to any listing of professionals.

DSM is used by professionals in a wide array of contexts, including psychiatrists and other physicians, psychologists, social workers, nurses, **speech-language pathologists**, occupational and rehabilitation therapists, and counselors, as well as by clinicians and researchers of many different orientations (e.g., biological, psychodynamic, cognitive, behavioral, interpersonal, family/systems).

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As practicing professionals, members of both ASHA and APA have an ethical responsibility to continuing professional development and evidence-based practice. The failure to acknowledge the role of speech-language pathologists in the *DSM-5*, and the inclusion of communication disorders under the rubric of mental disorders is a disservice to ASHA members and those we serve. Ensuring that individuals with communication disorders have access to the services they need from those professionals who have the education and credentials to provide such services is intrinsic to our mission.

ASHA advocates strongly that speech-language pathologists and audiologists are the professionals with the appropriate education and expertise to provide the services specified in our scopes of practice in [speech-language pathology](#) and [audiology](#). ASHA professionals are on the front lines of diagnosis, intervention, and research in communication sciences and its disorders.

Accompanying this letter is a detailed report of ASHA's concerns about content in the proposed *DSM-5*, along with recommendations for resolution. Our comments are in the areas of Specific Learning Disorder, Intellectual Developmental Disorder, Autism Spectrum Disorder, Language Disorder, Speech Disorder, Social Communication Disorder, Mild and Major Neurocognitive Disorder, and Neurocognitive Disorder Due to Traumatic Brain Injury. We also are including our specific responses to your feedback request regarding the content of the Cultural Formulation Interview and the definition of mental disorders.

My hope, on behalf of the more than 150,000 professionals represented by ASHA, is that APA will rightly acknowledge the role of those professionals in the assessment and diagnosis of communication disorders and will take into consideration the accompanying analyses and recommendations.

Importantly, although this is the final opportunity to request revisions to the *DSM-5*, we have noted that many sections remain incomplete. We believe that it would be of value to allow the public to have the opportunity to comment on the final, completed draft even if this additional peer review would delay publication.

Thank you for the opportunity to provide these comments. Please feel free to contact me if you have any questions about the content of the report.

Respectfully,



Shelly Chabon, PhD, CCC-SLP  
ASHA President

cc. David J. Kupfer, MD, *DSM-5* Task Force Chair