

Information Handout

Professional Version | US English

Recognizing Specific Phobia



Description

Psychiatric diagnostic frameworks serve multiple purposes. Classification of mental disorders enables clinicians and researchers to speak a common language when describing patterns of experience and behavior, guides appropriate treatment interventions, and acts as a coding system for insurance purposes. The success of these classification frameworks has varied across diagnoses but in the best cases has led to improved understanding and treatment of conditions, and has helped many service users who find such classification helpful (Perkins et al, 2018).

Diagnostic frameworks are not without controversy. They have been criticized on grounds of reliability, validity, and distortions due to commercial interests (Zigler & Phillips, 1961; Frances & Widiger, 2012; Bell, 2017). Perhaps most importantly there are instances where they have had, and continue to have, extremely negative effects upon service users (Perkins et al, 2018). Diagnosis is not the only way of understanding people and their experiences. Many clinicians and their clients find that attending to our personal stories and narratives is a helpful approach, and psychological formulation is one technique for bringing together information about what has happened to an individual and the sense that they have made of it (British Psychological Society, 2018).

Notwithstanding the above caveats, the '*Recognizing...*' series from Psychology Tools is designed to aid clinicians' understanding of the similarities and differences in the way that the two primary psychiatric diagnostic systems classify mental health problems. Their formatting for aid of comparison means that some detail has been purposefully excluded, and clinicians are encouraged to refer to the original source material for formal diagnostic purposes.

Specific phobia is characterized by marked fear or anxiety regarding a particular object or situation. *Recognizing Specific Phobia* compares the DSM-5 and ICD-10 criteria for specific phobia and the *Specific Phobia Checklist* is an assessment tool for clinicians.

Instructions

The 'Recognizing...' series from Psychology Tools is designed to aid clinicians' understanding of the similarities and differences in the way that the two primary psychiatric diagnostic systems classify mental health problems. Their formatting for aid of comparison means that some detail has been purposefully excluded, and clinicians are encouraged to refer to the original source material for formal diagnostic purposes. In particular it has been assumed that symptoms cause clinically significant distress or impairment unless otherwise stated.

Information for the 'Recognizing ...' series was drawn from:

- The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*.
- The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10)*. The ICD-10 is available in two versions: (1) The Clinical Descriptions and Diagnostic Guidelines (CDDG) or 'blue book' is intended for general clinical, educational and service use; (2) The Diagnostic Criteria for Research (DCR) or 'green book' was designed to facilitate research.

References

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Frances, A. J., & Widiger, T. (2012). Psychiatric diagnosis: lessons from the DSM-IV past and cautions for the DSM-5 future. *Annual Review of Clinical Psychology*, 8, 109-130.

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Recognizing Specific Phobia

The DSM-5 and ICD-10 criteria for specific phobia are largely similar. The most common phobic stimuli include: animals, blood, heights, flying, natural forces (e.g. storms).

	DSM-5	ICD-10
Specific object or situation	2 of:	3 of:
Provokes marked fear / anxiety.	✓	✓
Is actively avoided whenever possible or endured with intense fear.	✓	✓
Provokes psychological / autonomic symptoms that are primarily caused by anxiety.		✓
The fear, anxiety, or avoidance	2 of:	2 of:
Is disproportionate to the actual dangers involved.	✓	
Consistently occurs in the presence of the phobic object / situation.	✓	
Is restricted to the phobic object / situation.		✓
Is recognized by the patient as excessive or unreasonable.		✓
Duration		
Symptoms are persistent (typically at least 6 months).	✓	

Specific Phobia Checklist

	DSM-5	ICD-10
Specific object or situation	2 of:	3 of:
Provokes marked fear / anxiety.	<input type="checkbox"/>	<input type="checkbox"/>
Is actively avoided whenever possible or endured with intense fear.	<input type="checkbox"/>	<input type="checkbox"/>
Provokes psychological / autonomic symptoms that are primarily caused by anxiety.		<input type="checkbox"/>

The fear, anxiety, or avoidance	2 of:	2 of:
Is disproportionate to the actual dangers involved.	<input type="checkbox"/>	
Consistently occurs in the presence of the phobic object / situation.	<input type="checkbox"/>	
Is restricted to the phobic object / situation.		<input type="checkbox"/>
Is recognized by the patient as excessive or unreasonable.		<input type="checkbox"/>

Duration		
Symptoms are persistent (typically at least 6 months).	<input type="checkbox"/>	

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