

Introduction

I have a close family member, let's call them Avery, whose erratic behavior has frequently caused upheaval within the family. Seemingly unprompted, Avery would scream, throw things, and punch walls in fits of rage. Much of my family, holding traditional Chinese views, dismissed this behavior as Avery simply being a violent, short-tempered person. I, however, having been born in America in a generation better-versed in issues of mental health, and motivated by my care for Avery, gave more consideration to the possible causes of their anger, and how those causes should shape my view and responses to Avery's actions. I wanted to believe that Avery was the good person I knew in my heart they were at their core, and this desire motivated my inquiry.

When does poor behavior become the fault of mental instability rather than a lack of strong moral character? What is the precise distinction between a character flaw and a psychiatric illness? Was Avery a morally lacking person, or did Avery suffer from some psychiatric condition that produced behavior that appeared morally lacking?

As long as people have existed and performed misconduct, society has debated the source of that behavior, with the two main camps being poor character and faulty psychiatric wiring, with some in the bad behavior camp outright denying the existence of psychiatric illness altogether. Yet despite the strides that have been made in our understanding of psychiatry over the last few centuries, to date, there exists no absolutely foolproof or consistent, measurable biological signs of psychiatric illnesses (National Institutes of Health (US), 2007), making it impossible to objectively distinguish between the two and creating a murky gray area whenever the question arises.

Defining Terms

To start, it will be helpful to establish common definitions for what exactly character flaws and psychiatric illnesses are under the current consensus. Psychiatric illness is a term that refers to a range of conditions, characterized by cognitive or emotional disturbances, abnormal behaviors, and clinically significant syndromes or patterns that cause marked impaired functioning, disability, or distress (APA Dictionary of Psychology, 2018) . Yet within these general parameters, the American Psychological Association acknowledges that the term “lacks a consistent operational definition that covers all situations,” conceding the inherent imprecision of the term. (Stein et al, 2010)

In contrast, a character flaw is often broadly defined as an undesirable trait or quality. When looking at the term separately, character can be taken with a wide variety of meanings. It can mean the mental and moral qualities distinctive to an individual, the traits that distinguish and make up a person, or moral excellence. In combining these definitions with “flaw,” it becomes the absence of such qualities or excellence. This can materialize in various ways, such as selfishness, greed, a lack of empathy, and so on.

While a psychiatric illness is an impairment of function from cognitive or emotional disturbances, a flaw comes from a deficit in a quality.

Development and Diagnosis

The first major discrepancy between a psychiatric illness and character flaw can be seen in the development of the flaw or illness. The development of a psychiatric illness is complex, being a product of dozens of influences, and is still the center of many discussions among researchers. One key influence upon which the majority of research agrees, however, is biological (Sachdev, P., 2023). As some psychologists argue, "[all] mental processes are brain processes, and therefore all disorders of mental functioning are biological diseases" (Weir, K., 2012). When analyzing the brains of patients with

antisocial personality disorder in comparison with a healthy control group, researchers observed several differences in brain anatomy (Jiang et al, 2017). For example, patients with antisocial personality disorder consistently had either reduced or heightened levels of Fractional Anisotropy in major white matter tracts. This shows a clear example of something measurable and detectable physically that's associated with a mental illness.

On the other hand, character flaws have been theorized to connect more with cognitive and social development, and require more insight into the psychology behind morals, an influential theory being Koelberg's theory in which moral development is broken into three main stages: preconventional level (based upon punishment and award), the conventional level (external ethics), and the postconventional level (personal ethics) (APA DIctionary of Psychology., n. d.). In this case, a character flaw would arise from an environmental disturbance in one's experience whilst going through these stages, rather than an internal, neurological disturbance in the subject's brain.

When it comes to diagnosis, there are clear distinctions. For one, a mental illness can be medically and professionally diagnosed, while a character flaw can not be. There are official methodologies and procedures in place to try and ensure proper diagnosis of every respective psychiatric illness. The general process is to first gather information, including timeline of symptoms and family history, then narrow down the options, and finally form a diagnostic impression (Susman, D., 2018, April 17). One important guide for mental health professionals in America is the DSM-5—used to classify and diagnose individuals with mental illnesses. Conversely, the medical establishment has no system for diagnosing character flaws, which are instead identified interpersonally, in the social realm.

Some might object that the medical establishment does diagnose character flaws, but under a different name: psychiatric illness. Phil Hickey is a licensed psychologist who runs a blog dedicated to challenging the very existence of what he terms “so-called mental disorders.” (Hickey, P. (n.d.))

“Now when I say there are no mental illnesses,” Hickey writes. “I’m not saying that people don’t have behavioral/emotional problems. But they are best conceptualized – not as some kind of poorly-defined illness – but simply as dysfunctional, counter-productive habits.” For Hickey, the term “mental illness” is a miscategorization that hinders effective treatment for people with behavioral and emotional problems, a diagnosis that becomes a self-fulfilling prophecy for patients who believe their minds to be broken (Hickey, P., 2012).

Hickey’s idea may well be useful for patients on the milder end of the spectrum of dysfunction, but it finds its limits in more moderate to severe cases of disordered behavior that require both talk therapy as treatment along with medication. (NAMI, 2020) Indeed, the efficacy of psychiatric medication may well be an important key in distinguishing between mental illness and mere bad behavior — an idea that will be explored further in this essay.

Impacts and Treatment

Another factor to consider when addressing the differences between psychiatric illness and flawed character is the impact it may have on one’s life and how it is treated or alleviated. Psychiatric illnesses will lead to significant changes in the way the brain processes stimuli and makes decisions based upon the given information (Bhandari, S., 2023). Character flaws don’t impact how the brain functions, rather being a product of poor decision making or judgment.

The severity of the influence of a symptom or flaw is also relevant. Many mental illnesses range in severity, and often can become debilitating to one's life (Work Health Organization, 2022). Once a character flaw reaches a point to which it is causing significant distress or impairment upon someone's life, it then likely falls under the criteria of a mental illness. One common aspect of the diagnostic criteria for several mental illnesses is the impact and longevity of symptoms one experiences. As seen in the DSM-5, where a diagnosis for depression is based upon the presence of 5 or more symptoms over a 2 week period, as well as a change from previous functioning (Truschel, J. 2018). Character flaws reaching severe levels can be seen in several instances. Most severely, in crimes such as murder. A growing assumption is that the majority, if not all, of murderers or people capable of such violence are not well of the mind (Pescosolido, B. A. et al, 2019). However, while the percentage of psychotic or delusional mass murders is much higher than the general population, a database of 350 mass murderers found that as many as 4 out of 5 weren't found to have a severe diagnosable disorder (Psychology Today, 2019). The existence of NGRI (not guilty by reason of insanity) also shows that the crime itself is not indicative of mental illness, rather the sanity of the person at the time being the debated and defining factor (Chiacchia, K., n. d.). One can show a great flaw in morality--taking another's life--without the presence of an identifiable mental illness. Pleading insanity means pleading that you were not in your right mind, and therefore unable to distinguish reality from delusion. Mental illness comes into play by stopping the function of moral judgment. Poor moral behavior without the influence of mental illnesses would mean someone is unable to plead NGRI. In this case, the difference between mental illness and a character flaw would be how much control you have over your perception of

reality.

Although some symptoms of mental illness can come across as or be perceived as a character flaw, some symptoms are more difficult to be labeled as a shortcoming in one's moral excellence or quality. Take for example schizophrenia or any schizoaffective disorder. A major symptom of these disorders are hallucinations, ranging from auditory to textile (Mayo Clinic, 2024). Although the exact cause of hallucinations requires further research as of now, psychologists have found connections between reduced bottom-up sensory drive and misinterpretations of sensory information, or hallucinations (Nichaiel, A. et al, 2019). Symptoms like these are difficult to attribute to a shortcoming in someone's moral character, rather being a product of biological disturbances, like in this case with neuron firing.

Usage of medication varies between a psychiatric illness and character flaw as well. Medication is not widely used to treat a character flaw, nor can it be prescribed to do so, while medication is a common route of treatment or method of symptom reduction in many mental illnesses (Mayo Clinic, 2022). For example, buspirone is a common medication implemented to help treat general anxiety disorder (Pietrangelo, A., 2014) working to balance dopamine and serotonin levels in the brain (Du, Y. et al, 2024).

Conclusion

The differences between a psychiatric illness and a character flaw are in the development, diagnosis, severity, and treatment. Although the lack of direct testing and subjectivity around mental illness and character flaws leave room for further debate, distinctions in the biochemistry and definitions are clear. I am not sure whether Avery truly was simply a flawed person. However, I am sure that there is a possibility that they

were suffering from and exhibiting symptoms of a psychiatric illness, and that there is a definite difference between one who is struggling with a mental disorder and one who is solely character flawed.

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