

Narcissism, Autism, and Psychopathy: Do We Truly Understand Narcissism, Autism, and Psychopathy? Revisiting Classification Systems and Their Relevance in Contemporary Times.

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Abstract

The constructs of narcissism, autism, and psychopathy occupy significant space in clinical research, public discourse, and societal understanding. However, questions remain about whether current classification systems—such as the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and the International Classification of Diseases (ICD-11)—adequately reflect the complexity and overlap of these phenomena. Traditional categorical approaches may fail to capture the spectrum-like nature of traits such as empathy deficits, theory of mind impairments, and social cognition, leading to potential misdiagnoses and fragmented research efforts. Moreover, cultural biases and evolving societal norms influence how these constructs are perceived, contributing to stigma and misunderstanding.

This article examines whether narcissism, autism, and psychopathy represent distinct phenomena or interconnected points along broader neurobiological and psychological dimensions. Drawing upon current evidence from neuroimaging, genetic research, and social theories, it explores shared and divergent mechanisms underlying these conditions. It further evaluates the relevance of dimensional models that assess traits such as empathy, impulsivity, and emotional regulation across continua rather than discrete categories. A paradigm shift toward integrated, spectrum-based approaches is urgently needed to reduce stigma, improve diagnosis, and enhance therapeutic interventions.

Key Issues Addressed

1. **Empathy Deficits:** Are empathy deficits in these conditions driven by shared or unique neural mechanisms?
2. **Cultural and Gender Biases:** How do cultural and gender biases influence the diagnosis and perception of these traits?
3. **Dimensional Models:** Can spectrum-based models provide a more precise and inclusive framework for understanding overlapping and co-occurring traits?

Consensus and Current Thinking

Among experts, there is a growing consensus on several points:

1. **Spectrum Models Over Categories:** Researchers increasingly advocate for dimensional frameworks, such as the Hierarchical Taxonomy of Psychopathology (HiTOP), to replace rigid categorical models (Kotov et al., 2017). Dimensional models emphasize assessing individual traits like empathy, impulsivity, and emotional

regulation along a continuum rather than discrete categories, capturing subclinical and overlapping presentations that are often overlooked in categorical systems.

2. **Shared Neural and Genetic Mechanisms:** Studies have revealed that neural networks such as the prefrontal cortex, amygdala, and insula show overlapping dysfunctions across narcissism, autism, and psychopathy. For instance, the anterior insula, linked to emotional empathy, is underactive in individuals with narcissistic traits. In psychopathy, the amygdala, responsible for processing fear and emotion, exhibits reduced volume and activity. Meanwhile, in autism, atypical activity in the medial prefrontal cortex and posterior superior temporal sulcus impairs theory of mind and social cognition (Bird & Viding, 2014).
3. **Cultural Sensitivity and Bias:** Diagnostic systems must account for cultural and gender differences. Research shows that women with autism are often underdiagnosed due to masking behaviours that align with societal expectations, while traits like ambition in men may be celebrated but labelled as problematic in women. Cultural norms also shape perceptions of psychopathy and narcissism, where behaviours considered pathological in one culture may be normalized or even rewarded in another.
4. **Evolving Social Contexts:** Increasing public interest in mental health and neurodiversity has exposed the limitations of traditional diagnostic models. Social media and advocacy movements have highlighted the need for diagnostic criteria and public understanding to reflect contemporary scientific advancements and lived experiences.

Exploring the Constructs

Narcissism

Narcissism exists along a spectrum, ranging from adaptive traits like self-confidence to pathological expressions such as Narcissistic Personality Disorder (NPD). This variability underscores the complexity of understanding narcissism:

- **Core Features:** Grandiosity, a need for admiration, and a lack of emotional empathy are central to narcissism. Emotional empathy deficits mean that individuals struggle to resonate with others' feelings, even if they understand them cognitively.
- **Subtypes of Narcissism:**
 - **Grandiose Narcissism:** This subtype is characterized by overt arrogance, entitlement, and a preoccupation with success or admiration. While they may exude confidence, individuals with grandiose narcissism often rely on external validation to bolster fragile self-esteem.
 - **Vulnerable Narcissism:** This subtype manifests as hypersensitivity to criticism, insecurity, and social withdrawal. Unlike grandiose narcissists, they may present as shy or introverted but harbour a deep need for validation.
- **Neurobiological Evidence:** Functional MRI studies show reduced activity in the anterior insula, a region associated with empathy and emotional regulation. Dysregulation in the reward-processing systems, such as the ventral striatum, further explains their excessive need for admiration.

Autism

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterized by diverse presentations, including differences in social communication and repetitive behaviours:

- **Empathy in Autism:**
 - **Cognitive Empathy:** Challenges in cognitive empathy (understanding others' perspectives) can lead to difficulties in navigating social interactions. Autistic individuals may struggle with interpreting nonverbal cues, sarcasm, or implied meanings.
 - **Emotional Empathy:** Contrary to stereotypes, autistic individuals often experience heightened emotional empathy, feeling profound concern for others' suffering but may struggle to express it in socially typical ways.
- **Theory of Mind (ToM):**
 - Autistic individuals often exhibit delays or differences in ToM development, which refers to the ability to infer others' beliefs, thoughts, and emotions. This difference is not a lack of concern but reflects neurodevelopmental atypicalities.
- **Neurobiological Insights:** Differences in brain regions such as the fusiform face area, medial prefrontal cortex, and posterior superior temporal sulcus contribute to atypical social cognition. These neurological differences underline the importance of recognizing autism as a distinct neurodevelopmental condition rather than a deficit.

Psychopathy

Psychopathy is a personality construct defined by emotional detachment, superficial charm, impulsivity, and a disregard for others' rights. Unlike narcissism and autism, psychopathy is often characterized by intentional harm or exploitation:

- **Core Features:**
 - Emotional detachment and a profound lack of remorse or guilt.
 - Superficial charm and manipulateness, often enabled by intact cognitive empathy.
- **Empathy Deficits:**
 - Both emotional and cognitive empathy are impaired, though individuals with psychopathy can simulate empathy to manipulate others.
- **Neurobiological Basis:**
 - Reduced amygdala volume and hypoactivity impair emotional processing, including fear recognition and empathy.
 - Dysfunction in the ventromedial prefrontal cortex compromises impulse control and moral decision-making.
- **Social Impact:** Psychopathic traits often lead to exploitation and harm, distinguishing them from the unintentional social difficulties seen in autism.

Overlaps and Distinctions

1. Empathy Deficits:

- **Narcissism:** Emotional empathy is impaired; cognitive empathy is often intact but may be used manipulatively.
- **Autism:** Emotional empathy is heightened, while cognitive empathy challenges stem from differences in social processing.
- **Psychopathy:** Both emotional and cognitive empathy are profoundly impaired, with deficits often weaponized for manipulation.

2. Intentionality:

- Psychopathy involves deliberate exploitation of others, while narcissism is often rooted in unconscious self-centeredness. In autism, empathy-related challenges are unintentional and reflect neurodevelopmental differences.

3. Theory of Mind:

- Autism: Theory of mind difficulties arise from genuine neurodevelopmental differences.
- Narcissism and psychopathy: Theory of mind is intact but often used strategically for personal gain.

4. Behavioural Overlaps:

- Traits like emotional detachment, superficial charm, or difficulty interpreting social norms may appear across conditions but arise from distinct mechanisms.

Challenges in Current Classification Systems

Limitations of Categorical Models

Categorical models like the DSM-5 and ICD-11 fail to capture the complexity of overlapping traits and subthreshold presentations:

- **Rigid Boundaries:** Categorical systems force binary decisions that exclude individuals with significant subclinical traits.
- **Overlooking Co-occurrence:** Many individuals present with overlapping traits (e.g., autism with narcissistic traits), which are not well-represented in categorical frameworks.
- **Fragmented Research:** Categorical models hinder cross-disciplinary research by treating conditions as separate entities rather than interconnected phenomena.

Cultural and Gender Biases

- Women and girls with autism often go undiagnosed due to social masking, while cultural norms may influence the perception of narcissistic or psychopathic traits. For example, assertiveness in men may be seen as leadership, while similar behaviour in women may be labelled negatively.

Dimensional Models: A Promising Alternative

Dimensional approaches assess traits along continua, offering a nuanced understanding of individual differences:

- **Empathy Spectra:**
 - Dimensional models could map emotional and cognitive empathy as separate axes, highlighting individual profiles across conditions.
- **Integrated Perspectives:**
 - Combining neurobiological, psychological, and sociocultural factors offers a more holistic understanding.
- **Clinical Applications:**
 - Tailored interventions could address specific traits (e.g., cognitive empathy training for autistic individuals) rather than relying on categorical diagnoses.

Implications for Research and Practice

1. **Integrated Research:**
 - Examine shared neural and genetic mechanisms across narcissism, autism, and psychopathy to foster interdisciplinary collaboration.
2. **Personalized Interventions:**
 - Develop therapies targeting individual traits, such as emotional regulation in narcissism or perspective-taking in autism.
3. **Public Education:**
 - Address stigma and misconceptions by promoting a nuanced understanding of these constructs.

Final Discussion: Narcissism, Autism, and Psychopathy

Narcissism, autism, and psychopathy are complex, multifaceted constructs that defy simplistic classification. These traits and conditions have long been subjects of fascination, misunderstanding, and debate within psychology, psychiatry, and the broader public discourse. Current diagnostic systems, such as the DSM-5 and ICD-11, have laid a foundation for understanding these conditions but remain constrained by rigid categorical frameworks that fail to capture the nuances of individual experience. Emerging dimensional models offer a promising alternative, emphasizing the spectrum-like nature of traits such as empathy, impulsivity, and emotional regulation. This discussion delves deeper into the challenges and opportunities of rethinking these constructs, drawing upon interdisciplinary insights, cultural considerations, and the latest research.

The Limitations of Categorical Frameworks

Traditional diagnostic systems rely on categorical frameworks, which group individuals into discrete categories based on specific criteria. While this approach offers clarity and structure, it often oversimplifies the complexity of human behaviour. For example, a

diagnosis of narcissistic personality disorder (NPD) or autism spectrum disorder (ASD) depends on meeting a predetermined number of criteria, yet individuals who fall just short of these thresholds may still experience significant challenges.

Psychopathy, which is not officially recognized as a distinct diagnosis in the DSM-5 but is often assessed using tools like the Hare Psychopathy Checklist-Revised (PCL-R), faces similar issues. Traits such as superficial charm, lack of empathy, and impulsivity are measured on a scale, yet the distinction between someone who is psychopathic and someone who merely exhibits psychopathic traits is often unclear. These categorical frameworks fail to account for the overlap between conditions—a particularly significant issue when considering the high co-occurrence of autism and ADHD, or the interplay between narcissistic traits and psychopathy.

Moreover, rigid categories perpetuate a false dichotomy between “disordered” and “normal” behaviour. For example, traits such as self-confidence (associated with narcissism) or logical thinking (often seen in autism) can exist on a continuum that includes both adaptive and maladaptive expressions. This artificial divide hampers our ability to understand and support individuals whose experiences do not fit neatly into predefined boxes.

The Dimensional Approach: A Spectrum of Traits

A dimensional approach offers a more nuanced understanding of narcissism, autism, and psychopathy by viewing these constructs as spectra rather than categories. In this model, traits are measured along a continuum, allowing for greater recognition of individual differences and the coexistence of seemingly contradictory characteristics.

For example, empathy—or the lack thereof—is a key trait in discussions of both autism and psychopathy. In autism, difficulties with cognitive empathy (understanding others’ perspectives) are often paired with intact or heightened emotional empathy (sharing others’ feelings). In psychopathy, the reverse is often true: cognitive empathy may be intact, but emotional empathy is severely diminished. Recognizing these nuances helps to avoid stereotypes and encourages a more individualized approach to assessment and intervention.

Similarly, impulsivity, a trait associated with both psychopathy and ADHD, can manifest in diverse ways depending on context and co-occurring conditions. Dimensional models allow researchers and clinicians to explore how impulsivity interacts with other traits, such as emotional regulation, executive function, and risk-taking, to shape behaviour. This approach also highlights the dynamic nature of traits, which may fluctuate over time or in response to environmental factors.

Interdisciplinary Collaboration: Bridging the Gaps

Adopting dimensional approaches will require a paradigm shift not only in research but also in clinical practice and public perception. Interdisciplinary collaboration is essential to this endeavour. Insights from neuroscience, genetics, sociology, and anthropology can enrich

our understanding of how traits like narcissism, autism, and psychopathy develop and interact with environmental factors.

For instance, advances in neuroimaging have revealed structural and functional differences in the brains of individuals with high levels of psychopathic traits, such as reduced activity in the amygdala and prefrontal cortex. These findings complement genetic studies that identify potential heritable components of these traits. Similarly, research on the neural underpinnings of autism has highlighted differences in connectivity patterns, offering potential explanations for the sensory sensitivities and social difficulties often observed in individuals with ASD.

Sociological perspectives are equally valuable. Cultural norms and values influence how traits are perceived and labelled. For example, behaviours considered narcissistic in one culture may be viewed as assertive or confident in another. Likewise, the stigma surrounding autism and psychopathy varies widely across societies, shaping individuals' experiences and access to support. Anthropological studies can shed light on how these constructs have evolved over time and across cultures, challenging ethnocentric assumptions and promoting more inclusive frameworks.

Cultural Sensitivity: Context Matters

Cultural sensitivity is a cornerstone of the dimensional approach. Traits such as narcissism, autism, and psychopathy do not exist in a vacuum; they are shaped by cultural, social, and historical contexts. Understanding these contexts is crucial for developing effective interventions and reducing stigma.

For example, autism has historically been underdiagnosed in women and girls, partly due to gendered expectations of behaviour. Traits such as social withdrawal or intense interests may be overlooked or misinterpreted in females, leading to delayed or missed diagnoses. Similarly, narcissistic traits may manifest differently across genders, with societal norms influencing how behaviours like self-promotion or vulnerability are perceived.

Cultural factors also play a role in the interpretation of psychopathic traits. In individualistic societies, traits like charm and manipulation may be more readily rewarded in certain contexts, such as business or politics. By contrast, collectivist cultures may place greater emphasis on community and empathy, potentially leading to different manifestations or consequences of psychopathy.

Reducing Stigma: The Role of Public Perception

Stigma remains a significant barrier to understanding and supporting individuals with traits associated with narcissism, autism, and psychopathy. Public perceptions are often shaped by sensationalized media portrayals, which emphasize extreme or harmful behaviours while ignoring the broader spectrum of experiences.

For example, individuals with high-functioning autism are often stereotyped as socially awkward geniuses, while those with psychopathic traits are frequently depicted as violent criminals. These caricatures obscure the diversity of experiences within these groups and contribute to fear and misunderstanding. Similarly, narcissism is often conflated with selfishness or arrogance, ignoring the underlying vulnerabilities and struggles that may drive these behaviours.

Educational initiatives can help to combat stigma by promoting accurate, empathetic portrayals of these traits. Social media platforms, schools, and workplaces are ideal venues for disseminating information and fostering dialogue. By highlighting the dimensional nature of traits and emphasizing shared humanity, we can challenge stereotypes and create a more supportive environment for individuals and their families.

Practical Implications: Improving Outcomes

Embracing dimensional models has practical implications for research, diagnosis, and treatment. In research, dimensional approaches facilitate the study of traits across diverse populations, enabling more comprehensive and generalizable findings. For example, exploring the overlap between autism and ADHD can shed light on shared genetic, neurological, and environmental factors, paving the way for targeted interventions.

In clinical practice, dimensional models encourage personalized care. Rather than focusing solely on diagnostic labels, clinicians can assess the specific traits and challenges that impact an individual's functioning. This approach is particularly valuable for conditions like autism, where the phrase "if you've met one person with autism, you've met one person with autism" underscores the diversity of experiences within the spectrum.

Dimensional approaches also have implications for treatment. For example, understanding the interplay between narcissistic traits and underlying emotional vulnerabilities can inform therapeutic strategies that balance validation and challenge. Similarly, interventions for psychopathy may benefit from focusing on cognitive-behavioural techniques to enhance emotional regulation and reduce impulsivity.

Challenges and Controversies

Despite their promise, dimensional models are not without challenges. One concern is the potential for overcomplication. Measuring traits along multiple continua requires sophisticated tools and training, which may not be readily available in all clinical settings. Additionally, dimensional approaches may blur the boundaries between "normal" and "pathological," raising questions about where to draw the line for intervention.

Another challenge is the integration of dimensional models into existing diagnostic systems. The DSM-5 and ICD-11 represent decades of effort and consensus, and transitioning to new frameworks will require significant investment in research, education, and infrastructure.

Resistance from stakeholders accustomed to categorical systems may further hinder progress.

Ethical considerations also arise. Dimensional approaches emphasize the spectrum-like nature of traits, but this perspective may be misinterpreted or misused. For example, framing psychopathy as a continuum could lead to stigmatizing labels being applied to individuals with subclinical traits, potentially affecting their social or professional opportunities.

The Road Ahead: Scientific Rigor and Compassion

Ultimately, the question is not merely whether we understand narcissism, autism, and psychopathy, but whether we are prepared to evolve our frameworks to reflect the richness of human experience. This evolution will require both scientific rigor and compassion, paving the way for a deeper understanding of what it means to be human.

Scientific rigor involves the systematic study of traits across diverse populations, using cutting-edge methodologies such as machine learning, neuroimaging, and longitudinal research. It also entails the development of robust assessment tools that capture the dynamic interplay of traits over time and across contexts.

Compassion, on the other hand, requires a commitment to viewing individuals as more than the sum of their traits. It involves recognizing the strengths and challenges inherent in conditions like narcissism, autism, and psychopathy and striving to create environments that foster growth and well-being. This perspective aligns with the principles of neurodiversity, which celebrate the value of diverse cognitive styles and advocate for the inclusion of individuals with neurological differences.

Narcissism, autism, and psychopathy are not static labels but dynamic, multifaceted constructs that reflect the complexity of human behaviour. While current diagnostic systems have provided a foundation for understanding these conditions, they are limited by their reliance on rigid categorical frameworks. Dimensional models offer a promising alternative, emphasizing the spectrum-like nature of traits and the interplay of biological, psychological, and social factors.

Adopting dimensional approaches will require a paradigm shift in research, clinical practice, and public perception. This shift must be informed by interdisciplinary collaboration, cultural sensitivity, and a commitment to reducing stigma. By embracing the complexity of human behaviour, we can foster a more inclusive and effective understanding of these traits, ultimately improving outcomes for individuals and society as a whole.

The journey toward a deeper understanding of narcissism, autism, and psychopathy is far from over. It is a journey that demands both intellectual curiosity and empathy, scientific innovation, and human connection. By working together, we can create a future where the richness of human experience is celebrated, and the challenges faced by individuals with these traits are met with understanding and support.

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