

Dr Lisa Wilson, Clinical Executive, CPG, writes her views on the current debate around the Diagnostic and Statistical Manual of Mental Disorders (DSM). Her views have been recently published in the British Psychological Society's Division of Counselling Psychology Newsletter:

Dr Lisa Wilson writes: I would like to say how encouraged I was to read Pam James' statement and is the reason I chose DCoP. As a counselling psychologist I strive to consider the biomedical model in the same way as I encourage my clients to treat all pieces of information - as potentially useful but as something we must hold lightly. After conducting my doctoral thesis on the impact of a particularly pejorative label (borderline personality disorder) and initially believing this to be a diagnosis that required relabelling, I now believe that changing a name, and ultimately the classification system, is a matter of semantics. I believe the biomedical model provides a starting position as any model would; an ability to talk about collections of symptoms using a common language. We need to consider all models as providing potentially useful contributions perhaps instead of focusing our energies arguing for and against one or the other. After all each human being cannot be defined by any one single system but more correctly a container for many systems and trying to apply a simple model whether it be biomedical, psychological, social or any number of other ways of understanding would act to exclude important pieces of a complex puzzle.