

## Correspondence

SEEBOHM AND CHADWICK

DEAR SIR,

If Dr. Ferguson (*Journal*, July, 1970, p. 126; February, 1971, p. 251) has read any of the histories of public health in Britain (e.g. Fraser Brockington's, or Chapter 12 of *The Bleak Age* by J. L. and Barbara Hammond), he will know of Chadwick's medical precursors, Frank in Germany, Percival and Ferriar in Manchester, as well as of Chadwick's medical colleagues, Kay and Southwood Smith. Public health did not spring fully armed from Chadwick's 'social insights'. He will know also that *The Times*, from 1841 onwards, was, as the Hammonds put it, 'a powerful and steadfast friend in the cause of public health'; its hostility towards Chadwick was a personal one, widely shared, as well as being directed against the particular administrative set-up of which he was the centre. To quote the Hammonds again, 'A Control Board on the provocative model of the Poor Law Commission was a lamentable blunder . . . it is difficult to understand how Ministers came to choose the most hated man in England as a member.' This hatred derived from Chadwick's harsh and rigorous administration of the 1834 Poor Law, founded on the fallacious principle of 'less eligibility', which, as Fraser Brockington says, 'ignored all that we now know to lie at the root of poverty'.

I wonder whether Dr. Ferguson would defend this particular 'social insight' of Chadwick's—especially just now when the cry is 'Back to Speenhamland'? Would he consider those who fought against the Act and its application—including the youthful author of *Oliver Twist*—to have been merely 'resistant to change'?

Dr. Ferguson implies that Chadwick's fall in 1854, and the dissolution of his Board, involved a repudiation of the whole public health principle; but he must know that the work was continued under the Privy Council, with John Simon as its Medical Officer, and that it was the advances made during this period that paved the way for the Public Health Act of 1875.

Chadwick's eventual 'rehabilitation' had, of course, nothing to do with the discoveries of Pasteur and Koch—which, incidentally, he never accepted. As with other veterans—Lord Brougham is a good contemporary example—his earlier asperities and

obstinacies faded into insignificance, and he was revered as the great pioneer of the past and the wise counsellor of the present.

Chadwick was right in many things and wrong in others, but it is hard to see what relevance all this has to the administrative questions raised by the Seebohm Report and the Act implementing it.

For the rest, I cannot help deploring Ferguson's stale 'resistance to change' ploy (directed at Dr. Pilkington of all people!), to which one can reply that new and emergent professions are naturally prone to ambitious empire-building. Similarly, charges of 'medical chauvinism' might be countered by ones of 'medical defeatism'. Would it not be better to keep to a sober discussion of the merits of the case, as indeed Dr. Ferguson has done elsewhere?

My reactions to Dr. Ferguson's letters have, of course, been as he would have predicted from my 'age and status range'. My only excuse for writing, apart from a dislike of false history, is that I have had the unique experience of being (simultaneously) President both of the R.M.P.A. and of the Association of Psychiatric Social Workers. There did not, at that time, seem to be all that much divergence between our respective 'insights'.

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DR. SCHMIDEBERG AND PSYCHO-  
ANALYSIS

DEAR SIR,

The late Ella Sharpe, who was my training analyst (1941-44), once said to me 'If you are looking for ideal parents or an ideal band of brothers and sisters then don't join the British Psycho-Analytical Society'.

I have often recalled this saying with relish, and have passed it on to colleagues, and to students whom I have trained.

The operative word, of course, is 'ideal'. Psychoanalysts don't have to be ideal (or infallible), any more than do children, parents, teachers, editors, politicians or what have you. It would be appalling if they did have to be so, and still more if they *were*!

Much of what Dr. Schmeideberg (*Journal*, January, 1971, pp. 61-8) describes concerns our pioneers, both here and in other countries. Paradoxically,