

relevant physical pathology. It may be the case that for some accepted diseases the nature of the pathology is still obscure, and for others a physical concomitant is mistakenly believed to have aetiological relevance. There is still no certainty about the underlying pathology of schizophrenia, depression, anxiety, addictions, or any other 'functional' psychiatric disorder. That is not to say that such pathologies will not eventually be brought to light, but that until such a time the argument for any of these conditions being a disease in the medical sense is tentative, to say the least. Moreover, to claim that psychological processes, such as envisaged by the learning theories, ultimately have a physical basis is of course true. However, the nature of the physical explanation of psychological phenomena remains to be elucidated, and would not seem to be consistent with the specific disease pathologies—inflammation, neoplasia, degeneration, etc.—that currently exist.

Finally, I differ from Professor Roth's view that since we cannot as yet hope to reduce the prevalence of the 'functional' disorders by recommending social change there is no harm in continuing to provide medical care. I think it has to be faced that while society sees one of its most respected and trusted institutions—the medical profession—accepting responsibility for certain behaviours it will assume the 'experts' know best, and, with its conscience eased, expend proportionately less energy in looking at its own structure, patterns and processes. By and large the medical profession carries out its functions with humanity, sensitivity and dedication; it is possible that these very qualities so welcome in the short term, may defeat our aspirations for the long term.

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REFERENCE

ROTH, SIR M. (1973). 'Psychiatry and its critics.' *Brit. J. Psychiat.*, **122**, 373–8.

DOCTORS' ATTITUDES TO HOMOSEXUALITY

DEAR SIR,

Dr. Philip Morris's short investigation into homosexuality (*Journal*, April 1973, pp. 435–6), is important because of the profound depression, often suicidal in degree, which results from a broken relationship. As a psychotherapist, I have had to deal with a few cases, both male and female, where the depression was most distressing. If we could pinpoint the cause, we

should have done a great service, at least to some of these unfortunates.

With regard to 2(a) in the investigation, in 4 of my male cases the patient had been abandoned by the mother in infancy and had been brought up by the grandmother. There were various reasons for this, as illegitimacy, separation by war, mother out at work, the whole family out all day except grandmother who ran the home.

The impression I got was that grandmothers tend to fondle their grandchildren overmuch. The infant is a bundle of erotic zones, some more vulnerable sexually than others. This is not important in the case of the female child but is devastating in the case of the male child, whose instinctual maleness is, albeit unconsciously, affronted. One man described it as being 'smothered among breasts' but the bathing etc. may be injudiciously carried out so that the male is unconsciously but surely set against the female sex.

An investigation into the infantile upbringing of homosexuals could, perhaps, be useful, and if the cause lies in the area of overpetting of the male by the female this might be dealt with satisfactorily by proper teaching regarding eroticism in infancy and the care needed in regard to it.

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SERVICES IN THE COMMUNITY FOR THE MENTALLY ILL

DEAR SIR,

Is the College going to do anything towards reversing the deterioration of the personal services in the community for the mentally ill which has been going on since the implementation of the Social Services Act? One realizes that many areas had services which were only capable of improvement, but in other areas a corps of experienced workers with a vocation has been disbanded, diluted or even 'frittered away' and replaced by figures on paper representing personnel with no knowledge of, or enthusiasm for, the work. This is to the great detriment of the patient and his family, not to mention the hospital service and its staff. No one seems to recognize publicly that psychiatrists need workers in the community who can form a close personal relationship within their work, with both mental patients and psychiatrists, similar to that formed by ward sisters and junior colleagues. This is not possible for

large numbers meeting rarely but needs a selected group meeting often. It also seems insufficiently recognized that workers in the mental health fields are usually self-selected and this is specially necessary in this work. It certainly applies to doctors and nurses, not all of whom make good psychiatrists or mental nurses, and it should be seen to apply with equal force to social workers and occupational therapists.

It seems to me that unless what appears to be present policy is reversed it will become urgently necessary for mental health teams to develop their own community services in the form of either domiciliary nurses or psychiatric health visitors. I would urge the College, if not already doing so, to move strongly for a reversal of present social work policy so far as it affects mental health, or to support the setting up of a new corps of workers in the field with an appropriate pay and career structure.

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THE TAYLOR MANOR HOSPITAL
ESSAY AWARD

DEAR SIR,

I wish to draw the attention of your readers to the Taylor Manor Hospital Essay Award being offered

to the medical student, physician, law student or lawyer under 30 years of age who authors the best manuscript on the medical, ethical, or legal aspects of the delivery of mental health care. The winner will receive a cash prize of \$250.00 plus travel expenses to attend and to read the essay at the 6th Annual Taylor Manor Hospital Psychiatric Symposium in Ellicott City, Maryland, U.S.A., on 6 and 7 April 1974.

The subjects to be discussed at this symposium include: The Right to Treatment; The Right to Refuse Treatment; Involuntary Hospitalization; Prisoners of Psychiatry; The Right to be Different; Behaviour Modification; Psychosurgery; Drug Addiction; Alcoholism; The Right to Suicide; The Use of Psychiatric Patients as Research Subjects; Confinement of Political Dissenters in Mental Hospitals; etc. The speakers will be world-renowned physicians, lawyers, jurists and ethicists.

An original and one copy of the double-spaced, typed manuscript (maximum 3,000 words) suitable for publication in a scientific journal must be submitted by 15 January 1974, to Frank J. Ayd, Jr., M.D., Symposium Director, 912 West Lake Avenue, Baltimore, Maryland 21210, U.S.A. Further details of the competition may be obtained from Dr. Ayd.

FRANK J. AYD, JR.

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