
Plight of the drunk

The drunkenness offence

The proceedings of an International Symposium held at the Institute of Psychiatry, Maudsley Hospital, London

Ed. by Timothy Cook,
Dennis Gath and Celia
Hensman

Pergamon, 80s.

EVERY YEAR there are in this country about 80,000 arrests for drunkenness. On that basis it only needs 12½ years for the courts to clock one million drunks through their turnstiles. The astonishing and almost totally unbelievable fact is that until very recently no one seems to have bothered to enquire as to the characteristics of the people who get drunk in our streets. Society has sat by for far too many years and calmly witnessed a cruel, ineffective and expensive absurdity. A man can go to prison fifty times on a drunk charge without anyone ever asking for a medical report.

Suddenly however the problem of society's handling of the drunk seems to have come to public notice and it is much to be hoped that the appearance of this important book will serve to ensure that the only possible reason for the plight of the drunk ever now again ceasing to be a matter of social concern will be when the problem has been solved.

The Symposium which the present volume reports was really a very historic occasion. Over a matter of a few days papers were read which between them totally overthrew the old picture of the drunk as being either a casual roisterer or the vagabond ne'er-do-well who would do better if only he were kicked a little harder. The core of the public drunkenness problem transpires from these papers as being quite simply alcohol addiction. When the middle classes contract alcoholism they nowadays stand a fair chance of

going to hospital. The unskilled labourer who becomes an alcoholic has nothing between him and the gutter, the police cell, and Wandsworth. The distinction between the sick alcoholic and the bad drunk is no longer tenable.

The editors of "The drunkenness offence" have obviously done a painstaking editorial job and they and their contributors have produced a volume of quite exceptional merit. No one who is interested in the processes by which society is slowly moved, cajoled, and informed towards greater humanity, can afford to miss this exciting book.

Griffith Edwards

BOOKS

The de-segregation of the mentally ill

by J. Koenig and
Marion W. Hamilton

Routledge and Kegan Paul,
45s.

THIS IS an account of research into the work of two of the general hospital psychiatric units, Burnley and Blackpool, in the Manchester Hospital Region. These have the objective of providing a comprehensive psychiatric service for all the cases in their respective areas. As the unit in Burnley has 80 beds for a population of about 172,000 and the Blackpool one has only 44 for about 280,000 people, there are obvious differences in the adequacy of the two services which are examined. Essentially the book describes a detailed research into the progress of 273 patients in the two services, selected according to criteria which laid more emphasis on the elderly and on the diagnos-

tic groups tending to chronicity. A four year follow-up study was carried out, treating the selected group as a cohort.

Special investigations were carried out into schizophrenic and elderly patients and the 'burden' on the household, both 'objective' and 'subjective' was investigated in these two groups, as well as the general questions of mortality, the suicide rate, the burden on the services, the extent of usage of the mental hospitals and attitudes to the services of patients and their relatives.

This is a valuable statistical research giving data of great usefulness for comparison, now and in the future, with similar and differing approaches to the provision of comprehensive psychiatric services.

The conclusion come to in the book is that the approach described in it has the advantage of being within easy reach of the community from which the patients come, of removal of the stigma of admission to the mental hospital, of facilitation of early investigation and treatment of physical illness, and of mutual benefit to the general hospital staff and the psychiatric service. The previous 'long-term' hospital stay is replaced by 'short-term' stay, out-patient and community treatment and the attainment of a more continuous doctor-patient relationship.

This type of service avoids the disadvantages of the selective psychiatric unit which leaves the more serious forms of psychiatric disorder to be dealt with by the mental hospital services, but the attainment of a complete picture of the psychiatric services of the Manchester Region would necessitate a further investigation to assess the functioning of the mental hospitals in the Region, the effect on them of the general hospital psychiatric services and their methods of dealing with increased chronicity among their patients. This is required because at the time of this research there were 1,815 beds in the general hospital psychiatric units, and 9,931 beds in the mental hospitals in this Region.

The limiting factor which prevents the general application of the approach described in the book is the small number of beds in

general hospital psychiatric units as compared with the vastly greater number of mental hospital beds. Unless there is a radical change in the Government's policy, this situation will not be altered appreciably within the foreseeable future, and the great majority of the country's psychiatric services will continue to be provided by the existing mental hospitals.

In view of this fact, the only practicable method of appreciable expansion of the comprehensive psychiatric services is by utilisation of existing mental hospital services and their adaptation to fulfil this function. Some are more favourably sited than others, but an even more serious handicap interfering with this adaptation is the attachment of the salaries of hospital officers to the number of beds in the hospital.

In spite of this, mental hospitals in various parts of the country and in varying degrees are making progress towards this objective. That it is a practical possibility is shown by the fact that in one of these hospitals the number of beds had been reduced from over 1,300 in 1948 to 700 in 1965 i.e. to a ratio of 1.7 beds per 1,000 of the population. Its admission beds were operating at the figure of 0.48 per 1,000, which is comparable to that of the Burnley unit. Geriatric beds accounted for a ratio of 0.57 per 1,000 and the remainder were devoted to rehabilitation, hostel accommodation, children, adolescents and an addiction unit. The objectives described by the authors were attained, including effective liaison with the general hospital services through proximity without actual siting in the general hospital. Thus modification of the function of our existing mental hospitals can produce services comparable to those described in this interesting book, attaining a similar objective by a different approach.

Duncan Macmillan

The special child

by *Barbara Furneaux*
Penguin Education, 6s.

THIS BOOK is of particular value to teachers; the well chosen case his-

ories really do illuminate the many facets of the problem and reference is made throughout to pertinent research. The facilities available for the education and training of the special child are critically examined.

Separate sections are devoted to two administratively distinct groups: severely and educationally subnormal children, showing how dividing lines may be arbitrary and that there is little homogeneity within either group. The plea for differential diagnosis leading to individual teaching programmes is well made, though it does not necessarily follow that children with similar difficulties should be educated together.

The author concludes that mental subnormality hospitals, however humane, are largely inappropriate places for children who are not in need of medical care and sometimes not even subnormal. Early diagnosis and treatment is essential to save many disturbed, psychotic and brain damaged children (as well as those with language difficulties) from deteriorating in such unsuitable surroundings. In spite of the welcome increase in the provision of training centres, with so many untrained staff the provision made for the individual child's development within these centres is often inadequate.

In conclusion Mrs. Furneaux shows how vital it is that everyone should accept mentally handicapped children and their parents within the community and see that their needs are adequately met from common resources.

Dorothy M. Jeffree

Aversion therapy and behaviour disorders

by *S. Rachman and J. Teasdale*
Routledge & Kegan Paul, 40s.

THIS BOOK provides a thorough review of the literature on aversion therapy and also on the relevant laboratory learning experiments. The effects of these various aversion techniques are looked at closely and an attempt to establish a theoretical basis for them is made.

Perhaps the most striking thing

about this book to anyone familiar with the earlier writings of Rachman and Eysenck on this subject is the fairly marked change in theoretical viewpoint. The simple cut and dried, somewhat dogmatic adherence to learning theory explanations found earlier has given way to a more cautious, uncertain attitude, much more consistent with the available evidence.

This trend is of course to be welcomed. The difficulty in accounting for most of the changes during clinical aversion in learning theory terms is made quite clear. However, you can't keep a good learning theorist down and in the last part of the book, as though they had gained their second wind, the authors once again embark on a theoretical exercise in which the realities of the clinical situation become again obscured.

They do clear some of the dead wood from earlier theoretical ideas and are probably justified in emphasizing that aversion therapy is closer to the experimental punishment model than to any other stimulus response model. However, their conclusion, that aversion is mainly effective because of the classical conditioning of anxiety to the deviant stimuli, is a good example of where the most attractive theoretical idea is not supported by the available evidence. There really is very little evidence that conditioned anxiety occurs more than occasionally in aversion therapy or that, when it does, it is related to the outcome.

The need for some other or additional framework to usefully analyse the effects of such treatment stands out from the pages of this book as obvious. The nearest the authors come to providing it is an occasional mention of 'cognitive factors'. But these are left untouched, presumably as areas too far from home or threatening to throw existing theoretical ideas into disarray.

The fact is that the really important questions concerning aversion therapy remain unanswered. It is still not clear whether aversion therapy works better than other directive behavioural techniques because no controlled comparative study has been reported. It therefore remains a very open question