

B.A.B.P. BULLETIN
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EDITORIAL

If you believe that your great thoughts and words of wisdom are wasted on your wife or colleagues and you would like your ideas to be discussed in Palo Alto and Hamburg then write an article for the B.A.B.P. Bulletin. The American Psychological Association publication "Psychological Abstracts" have reviewed past issues of the Bulletin and have decided to abstract appropriate articles to be included in their machine readable file. Approximately 2,500 abstracts with full citation are published each month making Psychological Abstracts a major source of information and providing wide exposure throughout the world.

Occasionally we intend to give over a whole issue of the Bulletin to a particular topic and as a start would like to solicit articles in the following areas:

Behavioural Approaches to Education - Addictive Behaviours - Psychology and Medicine - and Learning Theories.

The B.A.B.P. Bulletin is published in January, April, July and October and copy must be in by the 15th of the month before publication.

ARTICLES

THE AETIOLOGY AND TREATMENT OF SEX DISORDERS: THE SOCIO-SEXUAL PARAMETERS OF A MALE PATIENT SAMPLE AND THE RESULTS OF A PROGRAMME USING SURROGATE PARTNER THERAPY.

Abstract of paper to the B.A.B.P. Annual Meeting, Exeter, 1976.

Martin Cole - Institute for Sex Education and Research Limited - Birmingham.

Information collected from approximately one hundred males with sex disorders was analysed in order to attempt to identify some of the causes of the more important sex dysfunctions in men. Those conditions receiving special attention were erectile dysfunction, premature ejaculation and heterophobia. The information gathered comprised those parameters thought to be relevant from the patients' social, sexual and medical histories. Some thirty independent parameters were recorded including a limited psychometric assessment. Information on social class, education, family structure, parent-child relationships, traumatic experiences were quantified as far as possible and to this were added data from the patients sexual history; masturbation patterns, the frequency, pattern and variety of sexual outlet, the nature of his fantasies and so on. Information was also collected on somatotype, relevant medical indices, and smoking and alcohol consumption.

The absence in the most part of reliable control data has made the interpretation of the significance of some of this information difficult. It does however provide baseline data upon which further studies can be designed. Overall there did not seem to be any clearly defined causative factors shown by the dysfunctional groups. The impotent males did have significantly higher N scores (EPI) ($p < 0.001$) a factor likely to be significant, although this has been observed by others. Other interesting facts emerged however. For example, it did seem that the presenting sex disorder did significantly affect the patients prospect of marriage particularly if he was either impotent or heterophobic but not if he was a premature ejaculator. Data on attempted suicide provided a meaningful indicator of the level of distress caused by sex problems. Overall 15% of the patient sample had attempted suicide (24% of the heterophobics) as against a national figure of only 4%.

In the light of these results which are largely negative it is clearly difficult to account for the expression of the presenting disorders entirely in terms of learning experiences. It is more profitable to recognize the multifactorial nature of sex dysfunctions and place greater emphasis upon the concept of the predisposed individual who possesses a vulnerable neuro-endocrinological framework. Sex disorders can be best compared by psychosomatic conditions in this respect.

From the patient sample two populations of males could tentatively be identified, those who were premature ejaculators and those who were impotent or retarded ejaculators: further observation should establish whether this distinction can be further validated.