

Reviews

Mental Handicap: Progress, Problems and Priorities.

A Review of Mental Handicap Services in England since the 1971 White Paper 'Better Services for the Mentally Handicapped'. 1980. DHSS: London.

'8.28. The White Paper objective of providing more services in the community, which must entail a declining role for the large mental handicap hospital, is generally accepted, *but the means of achieving this have not been adequately considered,*' (my italics).

This extract from the current Departmental review touches the hub of the problem. Even more explicit is the following: '10.23. The disparity between the resource assumptions underlying the White Paper and those which must underlie planning at the present time must obviously cause us to consider whether existing policies need to be adjusted to bring them into line with available resources. Put more bluntly, this means considering whether the policy of building up local services should be abandoned or at least deferred so that whilst the development of local services remained a goal, the existing pattern would remain substantially unchanged until well into the next century'.

Having thus boldly set out the reality of the present limited progress and inadequate funding the review goes on to deny any intention of a U-turn and expresses a pious hope that further progress will be made, with no indication as to how this is to be financed.

In acknowledging the pioneering work of the Wessex Region the review refers to a plan drawn up by that authority to provide over 700 places in local units with restructuring and reduction of the size of the large hospitals, *pending their complete replacement.* This, once again, seems unrealistic thinking, on the basis of the very slow current tempo of change.

A concession to the real state of affairs is made in section '4.5.: Throughout the period there was continuing expenditure on hospitals of over 500 beds, reflecting the dilemma faced by authorities when confronted with the need to replace engineering plant and upgrade wards in old unsatisfactory hospitals. *Such work can only be done at the expense of providing accommodation more in line with current policy.*' (my italics). In fact, as the review admits the number of people in hospitals for the mentally handicapped has not declined as rapidly as was expected in 1971. There were still 44,100 residents in such hospitals in 1977 despite an increase in residential home provision to 11,700 residents. The service remains unable to respond to many urgent pleas for residential accommodation or to find hostel places for the many hospital residents who have been recommended for this type of placement.

Meantime the neglect of the mental handicap hospitals

continues and is pinpointed by some examples quoted in the review. Even bare essentials of maintenance may be postponed on grounds of economy linked with the illusion of pending closure. This last consideration is also a factor in lowering staff morale, coupled with adverse publicity and uncertainty as to professional status in the wake of the Jay report. The review comments that the most recent nursing recruitment figures show a fall in the number of students, with high wastage, and 1977 showed a fall in the proportion of qualified nurses to 44 per cent. It is abundantly clear from this review and everyday experience that failure adequately to maintain existing services coupled with a virtual standstill on many new projects is a recipe for disaster.

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The Politics of Mental Handicap by Joanna Ryan and Frank Thomas. 1980. Penguin Books. Pp 175. £1.75.

Parents and Mentally Handicapped Children by Charles Hannam. 1980. Penguin Books. Pp 175. £1.50.

There have been many improvements in services for the mentally handicapped in recent years but there is still much to be done. Just how much is illustrated by two recently published books which describe services from the viewpoint of the consumer—the mentally handicapped themselves and the parents and nurses who care for them.

The author of *Parents and Mentally Handicapped Children* is himself the father of a Down's child and tells his own story along with the experiences of eight other parents. The simple eloquence of their narrative accounts provides a remarkable insight into the practical and psychological difficulties which parents face as they cope in turn with the diagnosis, school years, sexual development, and school leaving, and makes telling points about the gaps in the service. Of course, it can never be possible to fully compensate for the blow of having a handicapped child however ideal the service, but so many of the eminently sensible suggestions for improving services listed at the end of each chapter are a matter of making better use of existing resources and of increased professional sensitivity to parents' needs that there is really no excuse for not providing them.

The Politics of Mental Handicap is an altogether different book. Written around a diary kept by one of the authors whilst he was a nursing assistant, its stark and harrowing descriptions of daily life on a ward for severely

mentally handicapped men are a shaming indictment of our inability to translate our ideologies into practice at the point where they matter. It tells of the progressive policies of management floundering on the blunted sensibilities of an over-worked nursing staff rendered immune by their situation, of good intentions worn down by the sheer enormity of the task and of uncomplaining patients caught up in a system of which they know no different.

Why in an age of apparent enlightenment, ten years after Ely, amidst a mounting pile of reports and recommendations, when so many improvements in services for the mentally handicapped are a matter of common sense and humanity, are we failing to make the expected progress. The senior author, a psychologist, sees the subnormality hospital as the microcosm of society's attitudes towards the mentally handicapped and in a penetrating analysis cites prejudices rooted deep in the history of their segregation, inter-pro-

fessional rivalry and resistance from the medical and nursing professions as the main barriers to reform. It is, of course, all of these and more. Of equal importance are difficulties of transforming one system of care into another, inadequate funding, and above all our failure to establish an unequivocal national policy.

But to regard these two books as entirely indicative of the present scene would be to be too despondent. The past decade has seen the agonizing and as yet incomplete evolution of a new philosophy of care; throughout the country the beginnings of a new service have been emerging—albeit falteringly. It is to this new growth that we must look for the real evidence of progress.

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The College

The College's Medals and Prizes

Gaskell Medal and Prize

In addition to the medal the award attached to this prize is £150. The annual examination for the prize will be held in April or May 1981. Entries should be sent in by 31 March 1981.

The Prize has always been considered one of the foremost academic distinctions obtainable in clinical psychiatry, and members are asked to bring it to the notice of suitable candidates at their hospitals who may be eligible to compete.

Full particulars of the Regulations are given below, and entry forms may be obtained on application to the Dean.

REGULATIONS

The examination must be held in England according to the terms of the Trust.

Candidates must produce evidence of (a) having been qualified officers in one or more psychiatric hospitals or clinics in psychiatry in the United Kingdom or elsewhere in the Commonwealth or in the Republic of Ireland for at least two years; (b) having passed the M.R.C.Psych. examination or possessing any other degree or diploma in psychological medicine.

Candidates must be over 23 and under 35 years of age on 1 January of the year of the examination.

The examination includes a written paper, a clinical and an oral.

An entry fee of £5 is charged, returnable to bona fide candidates.

Research Prize and Bronze Medal

A College Prize is awarded for Research and the winner receives the College Bronze Medal.

The value of the prize is £150. A limit of two such prizes will be awarded each year. No prize will be awarded if a sufficient standard is not reached.

The Examiners for the Research Prize are nominated jointly by the Court of Electors and Research Committee.

Entrance for the Prize is limited to Members (or Inceptors) of the College below the rank of Consultant Psychiatrist (or equivalent).

Reports of research carried out by candidates for the Prize should be submitted to the Dean by 31 March of each year. Reports received after this date will be accepted as entries for the Prize for the following year.

Laughlin Prize

This prize is awarded to the candidate who obtains the highest marks and the best recommendation from the Examiners in the Membership Examination. The prize is awarded twice a year after the Spring and Autumn Examinations. The value of the prize is currently £50.