Down at the local

A recent report, sponsored by the Medical Council on Alcoholism and published by the Christian Economic and Social Research Foundation, states that the child whose father goes down to the local for a drink once a week is least likely to come into contact with the child care services.

Perhaps not surprisingly, the report goes on to say that all children of alcoholic fathers need some degree of child care support. However, in those families where the father never drank outside the home half the children investigated needed some degree of care. This is in contrast to families where the father is down at the pub about once a week — only one-tenth of the children from these families needed the child care services.

The survey, carried out by Muriel Abbott, a health visitor in an urban area, covered 400 families with children under the age of five. It was found that 7 per cent of the fathers in this group were ‘compulsive drinkers’ and one in six or seven ‘drank to excess’.

The report also discusses the social and medical implications of the survey. Obviously the public house has an extremely important part to play in this sphere and the report argues that it should be ‘controlled and managed so as to maximize its therapeutic value and minimize the detriment’. The report suggests that: ‘The good it can do depends on atmosphere and that, in turn, is the result of amenity and service backed and directed by intelligent and responsible management’. The public house should be somewhere where the customer can relax and where he does not have to compensate for poor amenities and a bad atmosphere by drinking more heavily.

‘Rats and door-mats’

If you find yourself attracted to ‘rats’ (the human sort!) it could be that you’ve got emotional problems. This is the view of a woman psychiatrist who believes that happy, well-adjusted women just aren’t attracted to men who treat them badly.

She feels that women who form this sort of relationship are trying to avoid a mature relationship and goes on to divide the women into three groups.

There are the reformers — mother-figures who are looking for someone to control and reform. The reformer thinks she can change a ‘rat’s’ behaviour. She is the sort of woman who thinks that all a homosexual needs ‘is a good woman to cure him’. Unfortunately this sort of relationship usually fails.

The second group are ‘bored’, those women who feel that the more stable, solid man lacks excitement and see in the ‘rat’ a personal challenge. Again, the relationships rarely last very long.

The last group — by far the largest numerically — are the romantics. These women deceive themselves about their own motives, getting involved with ‘rats’ so that, when the relationship goes wrong, they have someone else to blame. These women, the psychiatrist’s report continues, will never give up; they will go from one ‘rat’ to another and should one try to reform, the woman may do her best to thwart him. She may encourage the alcoholic attempting a cure to ‘just have one drink’ because with no one to blame if the cure succeeds, she may find herself having to face up to her own personality problems.

The psychiatrist’s advice: ‘... if you’re falling for a “rat”’ it’s time to stop and ask yourself why. It is the man who is kind and gentle and reliable that loves you most. The “rat” just loves himself.’

Perils of the anniversary

Unexplained depression may sometimes be caused by a forgotten anniversary — or a traumatic event in the past, like the death of a relative or close friend.

A psychiatrist, Dr. George Pollock, recently quoted the case of a woman complaining of irrational anxiety, of feeling ‘abandoned, trapped, unable to get away’. It was late April at the time and she feared the approach of May without knowing why. In fact, both her father and her first fiancé, had died suddenly in May some years previously. Although she had forgotten this, she was now pregnant and apparently feared for her own health and that of the baby in the coming month.

‘Anniversary reactions’, as they have been termed, are apparently also found in children who have been deliberately conceived to replace a lost brother or sister. Vincent Van Gogh is perhaps the most famous example. Named after a dead brother and born exactly one year after the other Vincent, he received the same parish register number — 29 — and was continually reminded that he was not the ‘original’ Vincent. Subject to cyclical depression throughout his life, he eventually committed suicide on the 29th.

Some psychiatrists feel that one of the possible reasons for this type of depression may be that the loss was not fully mourned when it occurred and bottled up feelings may emerge from the subconscious later in life — often at a crucial time like pregnancy or marriage — as ‘anniversary depression’.
Marriage is such a shock to the system that either the bride or groom is almost certain to become ill, according to a recent report from America. It goes on to say that four out of five people fall ill at the time of the wedding − appendicitis is the commonest health, divorce spouse illness.

Professor Thomas Holmes of the department of psychiatry at the University of Washington, author of the report, believes that rapid changes in people's lives can cause both physical and psychological ill health, and he has classified these 'trauma' into a points system, related to their likelihood of causing illness.

Top of the table is death of a spouse with 100 points followed by divorce with 73 points. Other 'scores' are imprisonment, 63; getting the sack, 47; pregnancy, 40; heavy mortgage, 31; moving house, 20 points and changing to a new school, also 20 points.

Surveys carried out using Professor Holmes's points system show that 80% of people unlucky enough to score more than 300 points within one year are likely to suffer heart attacks, become pathologically depressed or develop other serious conditions.

Because of the danger concentrating these trauma into a short space of time, Professor Holmes suggests, for example, that a man about to retire should not also plan to sell his house and move abroad in the space of a few months.

Just in case you think you're alright, even the good things in life are traumatic and 'outstanding personal achievement' rates 28 points in the league table.

The anxiety stakes

Professor Lynn took a number of variables which would suggest levels of anxiety and for which there were reliable statistics – these included suicide rates, car accident death rates, high alcoholism statistics and low calorie intake (anxiety usually appears to inhibit the appetite).

He divided the races under observation into Mediterranean, Alpine and Nordic groupings. Using this method, the countries with a high anxiety level turned out to be Japan, Germany, Austria, Italy, France and Belgium, showing a clear preponderance of the Alpine and Mediterranean groups. The 'moderate' group was mixed and included the Netherlands, Norway, Finland, Denmark, Switzerland and Sweden. The low anxiety-level countries were predominantly Nordic, comprising the United Kingdom, Australia, Canada, United States, New Zealand and Ireland.

A further experiment was carried out in one area of the United States where Americans of Irish, British, Italian and Jewish descent, and 'Yankees' (from old-established American families) were tested for anxiety levels in reaction to pain stimulation by pulse rate checks and a monitoring electrical method. The Irish and Yankees (predominantly Nordic in origin) were found to have considerably lower levels of anxiety than, for example, people of Italian (Mediterranean) descent, suggesting that climatic factors do not play any part in determining stress levels.

Mortgage milestones

'Mortgagitis' has appeared on the medical scene as a new 'disease'. This word, coined by Peter Westcombe, until recently Medical Officer of Health for Sutton, Surrey, describes a form of nervous breakdown. His views have been endorsed, in turn, by his successor, Dr. William Kinstrie.

Many young people, Dr. Kinstrie says, commit themselves at the start of marriage to rent and mortgage repayments which are unrealistically high and which they are unable to keep up. This in turn leads to anxiety, potential marital disharmony and even the break-up of the marriage.

But the mortgage problem isn't just something which faces young married couples. Old people are also often the victims of 'mortgagitis'. Mrs. Marion Green, secretary of the National Federation of Old Age Pensioners' Associations quotes the case of a newly widowed 79-year-old who found that her supplementary benefit would only pay the interest on her mortgage, leaving her to repay the actual mortgage out of a weekly income of £5.

It looks as though 'mortgagitis' is here to stay − as long as home ownership remains the priority which it is. Are young people being unrealistic today in wanting to own their houses eventually rather than rent for ever? Or is the cost of a mortgage too high in monetary and in social terms?

Getting off the treadmill

Plans are in the offing to set up a special care centre in the Oxford area. The policy committee of the Oxford Regional Hospital Board has accepted a recommendation that a centre should be established for offenders who, for various reasons, are not likely to benefit from prison or mental hospital treatment.

These are the persistent offenders − the vagrant, the alcoholic, and the petty thief − often with a history of mental illness. A working party, set up to study this problem, came into being after cases arose in the Oxford courts of people who were being sent to prison or mental hospital only because no alternative facilities existed.

The plan envisages three different 'sections'; firstly, a place where the offender could be assessed and a decision made about the best type of treatment; secondly, there would be a secure 'residential area' for long-term patients and thirdly, a half-way house for those who might make the adjustment to rejoin society.

This is a pioneer concept, being neither prison nor hospital but more than the ordinary half-way house for the ex-prisoner which often lacks the trained staff to help their residents. The working party said: 'It is acceptable that the nursing profession alone have the necessary training and discipline to approach the practical problems of preventing these individuals from disrupting society'.

In sickness and in health . . .
Drop out, drop in ... to hospital

Ederyn Williams, a researcher at the Institute of Experimental Psychology at Oxford, has put forward the idea that some patients in mental hospitals may be using the hospital as somewhere to rest. He suggests that they can do this simply by feigning insanity.

He draws much of the material for his arguments from a book by Benjamin and Dorothea Braginsky and Kenneth Ring: Methods of madness: the mental hospital as a last resort – based on various studies of psychiatric patients in America.

In one study, a group of patients were told that they were being interviewed to establish whether they were well enough to be discharged; they complained of delusions and hallucinations. When interviewed to see whether they should be transferred to a closed ward, none of them displayed the same symptoms.

In another study the authors questioned 100 chronic patients in one hospital; they found that although 82% knew where the hospital bowling alley was, only 16% knew their own diagnosis. (Although it is only fair to point out that few psychiatric patients anywhere know the medical terms for their conditions.)

Another experiment examined answers given by chronic patients in a true-false personality test in which they had been told that 'true' answers gave a greater indication of mental illness. These long-term patients gave more 'ill' answers than patients who had been recently admitted.

Mr. Williams sees these attitudes as an offshoot of the workhouse system, where the mental hospital 'is becoming the only place where a person can obtain food and a roof over his head without paying or working'.

However, he also has constructive suggestions to make. He advocates a 'lodge' system where chronically ill ex-patients can earn wages under supervision, 'providing social crutches to help them out of hospital'.

Seen and not heard

Many children – particularly West Indians – start school hampered by a basic inability to communicate. This has come to light partly because of an increased need for speech therapists in infant schools. Dr. R. S. Joanes, deputy school medical officer at Warley, recently drew attention to this fundamental problem facing some children entering primary schools.

In many of the families concerned, one parent is working during the day while the other is on night shift. This means that the child is kept quiet for most of the day because either 'mum' or 'dad' is asleep) and does not have the 'home stimulation' all children need if they are to learn to communicate.

This news comes at the same time as a report from the Birmingham branch of Teachers of English to Pupils from Overseas stressing their concern over the 12,000 West Indians in Birmingham's schools.

Mrs. C. Campbell, deputy headmistress of a Birmingham school with 234 West Indian pupils out of a total roll of 347, said many of these children were using sign language to communicate rather than words. She goes on to say that the children were quite clearly not used to talking with adults.

Both these reports highlight the need for further play-school and other pre-school facilities if immigrant children, already a potentially deprived group, are not to lose out in their education as well.

Risks of frenzied air travel

The problems of the executive whose business commitments force him to travel abroad a great deal over short periods of time were highlighted recently by the death of a 29-year-old businessman. The man – found to have committed suicide by aspirin and barbiturate poisoning – was reported to have visited 18 places in 23 days immediately prior to his death. The coroner called for an inquiry into the 'extraordinary schedule of aircraft flights' leading up to the man's death.

Fatigue due to excessive long-distance travel and packed schedules is one problem discussed in a recent book published by Tom Stacey – The Traveller's Health Guide by Dr. Anthony C. Turner. It contains some useful basic information about psychological effects of air travel: loss in speed of reaction and effective decision making, disorientation and ramifications of fatigue.

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