LATEST SUICIDE STATISTICS

The World Health Organisation’s Epidemiological and Vital Statistics Report (Volume 14, No. 5. 1961) shows that during 1951-1959 suicide rates were highest in West Berlin. Of other territories analysed the descending order is as follows: East Germany, Hungary, Japan, Austria, Switzerland, Denmark, Finland, West Germany, Sweden, France, Belgium, South Africa, England and Wales, U.S.A. (white population), Australia, Portugal, Scotland, Ceylon, Norway, Canada, Israel, the Netherlands, Italy, Spain, U.S.A. (non-white population), Northern Ireland and Ireland.

The female rate of suicide is lower than the male for all ages taken together and, generally speaking, for each of the age groups. The 15-19 age group is an exception to this picture, for there were more girl than boy suicides in Venezuela, Ceylon, Israel, West Berlin, Italy and Portugal on a number of occasions during the period examined.

The general trend is for the suicide rate to increase in both sexes with age, and there is frequently a peak for men in the age groups 60-69 or 70-79, the maximum for women occurring a decade earlier.

AND ROAD ACCIDENTS

Latest statistics from the office of the Registrar-General for England and Wales give the following comparative table for 1959/60 for deaths from suicides and self-inflicted injuries and deaths from all types of road accidents.

|              | 1959  | 1960  |
|--------------|-------|-------|
| M. 3,116     | M. 3,058 | 1959  | M. 3,058 |
| M. 2,091     | M. 2,054 | 1959  | M. 2,054 |
| 5,207        | 5,112  | 1959  | M. 3,058 |
| M. 4,526     | F. 1,666 | 1960  | F. 1,935 |
| M. 4,868     | F. 1,935 | 1960  | F. 1,935 |
| 6,192        | 6,803  | 1960  | F. 1,935 |

CONFERENCE OF VOLUNTARY BODIES CALLED BY HEALTH MINISTER

Following the publication of the Hospital Plan for England and Wales and the Health Minister’s announcement in January that he would call together representatives of the hospital authorities, the local authorities and the voluntary organisations to confer at national level, such a meeting was held on February 13th, under Mr. Enoch Powell’s Chairmanship. The Conference covered the scope for voluntary provision within the development of the hospital and local authority services and the manner in which the planning of these services can best take account of this.

The voluntary bodies represented had been invited to the meeting by the Ministry of Health, and covered the British Red Cross Society, the National Association of Leagues of Hospital Friends, the National Council of Social Service, the National Old People’s Welfare Council, the St. John Ambulance Association and the W.V.S. Also present were representatives of the Regional Hospital Boards, Teaching Hospitals Association and Association of Hospital Management Committees; the County Councils Association, the Association of Municipal Corporations and the London County Council, the English and Welsh Associations of Executive Councils; and the Welsh Board of Health.
A Ministry hand-out after the meeting stated: "There was general agreement that the scope for voluntary provision in the hospital and local health and welfare services could and should be enlarged, and the Conference discussed specific directions in which this enlargement was most desirable.

It was agreed that the initiative in calling for an expansion of voluntary provision in the hospital and local authority services should be taken by the Hospital Management Committees (or Boards of Governors at teaching hospitals) and by the local health and welfare authorities respectively. The Minister indicated his intention to invite these bodies to take this initiative and to give them detailed guidance on the lines on which they might proceed. In formulating this guidance he would have regard to the views of the conference and of working parties which it set up to examine some of the points that had been raised.

The voluntary organisations represented at the conference undertook on their part to inform their constituent and local organisations.

The Minister told the conference that he intended subsequently to hold a larger meeting of voluntary organisations to which those working in specialised fields such as mental disorder and particular physical handicaps would be invited.

MORE YOUNG HUSBAND COURSES

The Ministry of Health has announced that further courses are being introduced to provide a general training in social work on the lines recommended in the Young Husband Report. The first three were commenced last autumn in the North-Western Polytechnic, London, and the Colleges of Commerce in Birmingham and Liverpool, and the colleges concerned are now ready to consider applications for entry to further two-year courses on the same pattern, beginning in September. Similar courses will commence in the autumn at the Colleges of Commerce in Bristol, Manchester and Leeds and possibly in other centres in England and Wales.

They are designed to meet the urgent need for further trained staff in the local authority health and welfare services, including the mental health service, and similar services of voluntary organisations, by providing at colleges of further education a two-year full-time training course, in which the study of theory and practice will be closely linked.

Entry is open to persons already in the employment of Local Authorities or of appropriate voluntary organisations, and to new recruits to social work. Although no specific entry qualifications have been laid down, it is expected that candidates will be at least 19 years of age, while preference will generally be given to older candidates.

CHILDREN IN CARE

The Home Office has reported that on March 31st, 1961, there were 62,199 children in the care of local authorities, 470 more than the year before, and the highest number in care since March 31st, 1956.

48% were boarded out, excluding those in lodgings and residential employment. The average rate of parental contribution was estimated to be 5s. 9d. a week for each child.

The major reason why children came into care was the infirmity of the parent or guardian; 27,438 children being taken in for this reason. Desertion by the mother with the father unable to care for the child accounted for 3,549 children being admitted. 4,112 children were admitted under the Fit Person Orders.

On the other hand, over 38,000 children were returned to the care of parents or guardians during the year under review.
Children cared for in voluntary homes registered under Section 29 of the Children Act, 1948, or boarded out by voluntary organisations in accordance with the Boarding-out of Children Regulations, 1955, totalled 18,489. Expenditure by Local Authorities in 1960-61 was estimated as £18,964,428, i.e., £6 3s. 5½d. per child.

WHO SEMINAR ON MENTAL HEALTH?

Athens will be the venue in April for a seminar organised by the World Health Organisation on "Mental Health and the Family". Its purpose is to accelerate family-centred approaches to mental health problems. Topics selected include the concept of the healthy family, marital tensions, relations between parents and children, the feminine role, old persons in the family and the incidence of mental disorder in relation to the individual's family status. About 40 participants have been invited from all parts of Europe, including psychiatrists, G.P.s, paediatricians, nurses, social workers and psychologists.

MOORHAVEN HOSPITAL MANAGEMENT COMMITTEE'S 1961 REPORT

The Moorhaven Hospital Group covers 775 beds; 692 at Moorhaven Hospital, 58 at Moorfields and 25 at The Gables. The catchment area will in the future include the County Borough of Plymouth together with Saltash Municipal Borough, Torpoint Urban District and St. Germans Rural District, Plympton St. Mary Rural District, Tavistock Urban and Rural Districts, Kingsbridge Urban and Rural Districts, Salcombe Urban District and some of the parishes in Totnes Rural District. The estimated population of the catchment area is 324,760; i.e. 2.4 beds per 1,000 persons.

The Report stresses that the pressure on geriatric beds is always acute, and "it is often several weeks before a non-urgent patient can be admitted to one of the geriatric wards . . .

"Nearly all our wards are overcrowded, some severely so. It is probable that the total number of beds would have to be reduced by at least 150 before really satisfactory space standards could be achieved."

Five years have passed since Moorhaven became a completely "open-door hospital" and the Report comments: "no incidents involving public safety have occurred as a result of this policy. . . . It is interesting to note that since its introduction . . . the suicide rate in psychiatric hospitals as a whole has decreased considerably . . . ."

The following figures show the duration of stay of patients in the hospital during 1958-61:

Patients discharged under three months were 619 in 1958, 580 in 1959, 741 in 1960 and 677 in 1961. Patients discharged between 3-6 months: 93 in 1958, 118 in 1959, 102 in 1960 and 126 in 1961. Patients discharged between 6 months and one year: 44 in 1958, 52 in 1959, 34 in 1960 and 46 in 1961. Patients discharged between one and two years: 8 in 1958, 24 in 1959, 19 in 1960 and 15 in 1961. Patients discharged after two years' stay: 24 in 1958, 23 in 1959, 32 in 1960 and 18 in 1961.

During 1961 the hospital also treated 35 patients (all ex-inpatients spending a minimum of one day a week for several weeks at least at the hospital); and 19 night patients who went out to their normal work and returned to the hospital at night during part of their rehabilitation.

The Report also comments that although the readmission rate is substantially higher now than in 1954-57, it fell by 5% during 1961; the percentages for readmissions being 37.4 for 1958, 45.4 for 1960 and 39.5 for 1961.
REPORT ON SALFORD'S MENTAL HEALTH SERVICES, 1960

This fourth Report in a series issued by the Salford Health Department contains valuable statistics on mental illness, mental subnormality and the whole pattern of mental health services in Salford.

In examining the register of the mentally subnormal in Salford the Report shows that the total number is 679. 57% are in the community and mostly young, with very large numbers in the age group 15-19. The proportion of subjects in hospital increases with age; 83% of all subjects under 20 years of age in the community but only 27% of those over 40. In both hospital and community, males outnumber females.

Among those with I.Q.s of under 20, 41% are in institutions if up to 19 years old and 59% in the community; 90% are in institutions if in the age group 20-39 and 10% in the community; 88% are in institutions if aged 40 and over and 12% in the community. Among those with I.Q.s of 20-49, 16% are in institutions if up to 19 years old and 84% in the community; 48% are in institutions if in the age-group 20-39 and 52% in the community; 80% are in institutions if aged 40 and over and 20% in the community. Among those with I.Q.s of 50 plus, 10% are in institutions if up to 19 years' old and 90% in the community; 24% in institutions if in the age-group 20-39 and 76% in the community; 60% are in institutions if aged 40 and over and 40% in the community.

In commenting on all the data that has been extracted on the mentally-subnormal in Salford, the Report says "Our data show that most low and medium grade subjects who do not die at an early age are eventually admitted to hospitals for the mentally subnormal . . . we do not recommend that this is either the only or the best way to cater for their needs. We merely point out that for the most part they will require some form of special provision for the whole of their lives in contrast to the high-grade subjects whose incapacities and needs are largely temporary."

The Report also refers to the increase in the number of low and medium grade subjects over the past thirteen years. It gives evidence which shows that this is probably due to their increased survival rates.

A comparison of the estimated number of mentally subnormal persons at January, 1948, with January, 1961, in Salford, shows 39 low-grade persons in 1948 compared with 62 in 1961; 237 medium-grade compared with 285; 349 high-grade compared with 317; and 17 of unknown grade compared with 13.

The rate per 1,000 population based on the 1951 and 1961 censuses are 0.2 and 0.4 respectively for low-grade persons; 1.3 and 1.8 for medium-grade; 2.0 and 2.1 for high-grade and 0.1 and 0.08 for unknown, making totals of 3.6 and 4.4.

SOUTH LONDON INDUSTRIAL TRAINING CENTRE FOR SUBNORMAL

In February, Mr. Brian Rix, well-known actor and TV personality, opened a new L.C.C. industrial training centre for 100 mentally subnormal men and boys of 16 years and over at 42, Clapham Street, S.W.4. It was the first such centre in South London, and the second of the Council's industrial centres for the subnormal.

Training is being given to help those attending to make the most of their capabilities and to enjoy as full and independent lives as possible.

The centre will stress the production of useful articles, training being given in such crafts as basketry, rug-making,
stool-making and various forms of assembly work. Those considered suitable will be employed in the industrial workshop where woodwork is the chief activity.

Contracts of work with local firms and the L.C.C.'s own supplies organisation are negotiated by the Council's industrial manager. The range of items manufactured includes clothes horses, ironing-boards, duckboards and swing seats and the assembly of lamp holders, brush and comb sets, skipping-ropes and plastic handmirrors.

In the industrial workshop trainees receive a small fixed daily payment, and any others who take part in industrial activity are given a proportionate share of the income received by the Council for this work.

The L.C.C.'s training centre service now provides training for over 1,400 subnormal persons in nine junior centres for boys and girls aged 5-16, six (including the two industrial centres) for youths and men, and seven centres for girls and women.

In Balham there is a centre for 60 older girls and women and in Battersea and Wandsworth health division centres for 90 mixed juniors.

COSTS OF MAINTAINING PATIENTS SUFFERING FROM MENTAL DISORDERS

In Scotland £8 2s. 7d. net cost per head per week was spent on keeping patients in "mental" hospitals during 1959-60 from the National Health Service and £6 15s. 0d. per week on patients in "M.D. Institutions". National Average net costs for in-patients in non-teaching hospitals per week in 1960/61 were £8 7s. 5d. in hospitals classified as psychiatric (mental illness), and £7 9s. 6d. per week in those classified as psychiatric (mental subnormality).

DEAF PATIENTS AND MENTAL HEALTH REVIEW TRIBUNALS

The Ministry of Health sent a letter to Hospital Management Committees recommending that when any deaf patient is to be seen by a Mental Health Review Tribunal arrangements should be made for an interpreter to attend.

In its Report for 1960-61 the Northern Association for the Deaf stresses how important this is and says that the Ministry have now been asked to circulate a list of qualified interpreters for the deaf. It also states that on December 31st, 1960, in psychiatric hospitals and units under the Manchester Regional Hospital Board, 7.4% of the beds were occupied by patients with some degree of deafness, 2% being totally or severely deaf. At December 31st, 1959, the percentages were 5.8 and 2 respectively.

WALSINGHAM CONFERENCE ON CHURCHES' MINISTRY TO MENTALLY SICK

Walsingham, Norfolk, will be the centre for a residential Conference from April 30th to May 4th on the theme of "The Churches' Ministry to the Mentally Sick". The cost for the whole course will be £5 but individual sessions can be attended for a small fee.

The Conference will begin on the evening of April 30th with a talk by the Archdeacon of Lynn, the Venerable W. S. Llewellyn. On the following morning the subject will be "The Churches' Ministry to the Suicidal".

In the evening Dr. W. J. Abel, Consultant Psychiatrist, Hellesdon Hospital will give two lectures: on "Religion and Psychiatry" and "Christian Influence and Mental Stability in the Home". On May 2nd the Rev. G. C. Harding, M.C., M.A.,
Executive Officer, Churches Council of Healing, will speak on “Christ and the Relief of Tension”, “Let Go—Let God”, and “Advancing into old age”. A Brains Trust will be held after dinner. On the morning of May 3rd the Rev. F. S. Sinker, M.A., M.B., B.Ch., Chaplain, Guild of St. Raphael, will speak on “The Sacrament of Penance and the Mentally Sick” and in the evening Dr. D. Russell Davis, M.D., M.R.C.P., D.P.M., Reader in Medical Psychology, Cambridge University, will lecture on “Alienation and Fellowship” and on “Ten Rules for Therapists”. The Conference will end after breakfast on May 4th. Bookings can be made from the Rev. L. A. D. Woodland, The Rectory, Castle Rising, King’s Lynn, Norfolk.

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