carelessness of those forms of mental infirmity which bring the deep sense of our two terms into play. But Dangerousness, hidden in the Sanitary Law folds concerning the Obligatory Sanitary Treatments, persists, unchanged and in clear letters, within the articles of the penal laws which regulate the internment of the insane author of a crime.

The Jail, the Psychiatric Judiciary Hospital, the Services for Drug Addiction Treatment, which represent privileged lookout-points, remark themselves that the evolution of psychiatric clinic at the ending of the millennium has necessarily to deal with some changes both of the structure and of the form. In the present report these changes are evaluated through the parallel changes of the psychiatrist's position when compared with the two figures of Responsibility and Dangerousness.

The clinical and therapeutic "rehabilitation" of these two terms, would contribute to reverse the degeneration of their meaning respectively into Solidarity and Wickedness. The new clinical forms of the mental illness, such as personality disorders with antisocial behaviour, impose this "rehabilitation". Indeed, the Responsibility denied in the formulation of the Sanitary Law, comes back to the psychiatrist through side-roads. One of these being the psychiatrist taking the therapeutic Responsibility in the interdisciplinary treatment of those increasing forms of mental disease in which the antisocial behaviour, and therefore the matters of Justice, hold a prominent position.

VOTING BEHAVIOUR OF CHRONIC MENTALLY ILL OUTPATIENTS IN GERMANY

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We report the results of a survey held immediately after the 1994 general election for the German parliament. Questionnaires on voting decisions and attitudes towards elections were received from 114 mentally ill residents of nine different therapeutic residential facilities, i.e. halfway houses, group homes and sheltered apartments.

In contrast to the general population of their surrounding neighbourhood (numbers shown in parentheses), patients favoured political parties of the 'left wing'. The Social Democrats received 55.1% (36.4%) of the votes and the ecologist party 16.9% (9.7%). On the other hand only 23.6% (46.8%) of the patients voted for the conservative parties with no votes for the Liberals. This pattern of voting remained stable concerning age, sex and type of housing. Attending general elections was rated important with a medium of 4.84 on a sixpoint-scale (6 = very important ... 1 = totally unimportant). An analysis of reasons for voting decisions revealed most patients' reasons to be similar to these of the general population (party program, candidate, voting habits), while a substantial proportion of 21.5% related their voting decision to the statement that the party of their choice (Social Democrats only) might do more for mentally ill people.

In contrast to earlier reports from comparable populations, we found that in favouring the 'left wing' parties the voting behaviour of chronic mentally ill outpatients from therapeutic institutions differs from that among the general population. For a small but substantial proportion the voting decision is based on the belief that the party of choice supports the interests of mentally ill clients. We suggest that these results demonstrate the voting decisions of mentally ill clients to be interest-related as among other pressure groups. We see this as an indication of a much more 'normal' voting behaviour than if patients were to exhibit the same voting behaviour seen among the general population.

CONTRIBUTING FACTORS AND PERSONALITY PROFILES IN LONG-TERM SATISFYING MARRIAGES

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This study aims to identify and assess the extent of impact of contributing factors in long-term satisfying marriages and relate them to personality profiles. Sample consists of ten couples married between 25 and 46 years. Additional research was performed with ten couples who have recently divorced after ten or more years of marriage. Quality of life and specific interactional, behavioural patterns were examined by: Dyadic Adjustment Scale, while personality profile data were obtained through Millon Clinical Multiaxial Inventory. Results indicate existing correlation of socio-demographic, communicational factors and motivation to live together on one hand, and certain personality traits on other. This is a pilot study of a larger multi-centric, international project targeting to distinguish contribution factors and personality traits relevant to long term satisfying marriage.

RESEARCH ACTIVITY BY SENIOR REGISTRARS IN PSYCHIATRY

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Objectives. To clarify how Senior Registrars use their allocated research time, and to identify specific difficulties that prevent successful research being carried out.

Methods. A questionnaire was sent to all Senior Registrars in Psychiatry in the Yorkshire and Northern Region.

Results. 99 questionnaires were sent, and 57 (58%) questionnaires were received (56.1% males and 43.9% female). 45% of the responses were from full-time and 12% from part-time Senior Registrars. 80.8% were first, second or third years, and all specialties were represented.

84.2% of trainees were actively involved in some form of research, but 61.4% identified specific problems in carrying out their research including interference from clinical work. Between 66.7% and 84.2% felt that they did not have the skills necessary to use a computer, word processor or carry out a CD ROM literature review. 60.7% of trainees received 6 or fewer research sessions per month despite the recommendation being 8 per month. Only 21.1% reported a lack of interest as being the main reason why their research was being hindered. 61.4% felt that they received adequate supervision and support from trainers, but only 28.1% felt that this was "good". Overall 41% said that they believed their research training was either poor or non-existent.

Conclusions. Research by Senior Registrars is often held back by practical difficulties. It is suggested that there needs to be greater understanding of how Senior Registrars use their research time and the difficulties associated with involvement in research. The College may have a key role to play in this through its network of Regional Research Co-ordinators.

A PSYCHOPHARMACOTHERAPEUTIC STANDARD IN A GENERAL HOSPITAL

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The author is developing a pharmacotherapeutic standard in a general hospital. In 1988 he concluded from an investigation of different aspects of benzodiazepine dependence that an *indicating protocol* is needed, if psychotropic drugs are to be prescribed adequately. In many instances a *specific indication* for treatment with psychotropics is lacking. Thus in order to treat psychiatric patients adequately the process