events in the universe capable of effecting the organism where part of the universe quite clearly lies within the organism's own skin.

There appears to be a distinct shift of meaning in the statement that in cases of chromosomal abnormality "the main approach to treatment is through the environmental manipulation of rewards". One sets out to alter the Mongol's behaviour, not his chromosomal pathology. Any contribution of genetic make-up as a cause of behaviour is, at present, beyond manipulation. The behavioural intervention does not affect the disease process and in this sense is not a "cure". Unfortunately, this article retains and perpetuates this type of confusion, which is a consequence of the use of everyday language in the description of therapeutic activities.

Finally, we feel that a distinction can be made between a collection of techniques and a team approach based upon a sound analysis of the determinants of behaviour. A functional analysis attempts to specify these determinants and, thus, to elucidate the relationship between social, psychological and medical factors. The role of therapists in efficient intervention could be based on such an approach and would not be arbitrary. It may well be that this is the nub of Dr. Marks' argument, although his exposition left us unclear.

> Yours faithfully, Laurence Tennant and John Hattersley Clinical Psychologists Hereford/Worcester Area Health Authority

PRIVATE PRACTICE

Dear Sirs:

I feel I should reply to the comments in your last issue by Drs. Isaac Marks and Antonia Whitehead in an attempt to clarify the position of the Institute of Behaviour Therapy. It would seem from these letters that there may be some concern over possible conflicts of interest which might arise from the fact that some prominent members of the BABP are also involved in advising the Institute of Behaviour Therapy with its programmes of workshops. We would thus like to reassure members of the BABP that there has never been intended any conflict between the Institute of Behaviour Therapy and the BABP. We would further add that the terms of reference of the Institute are much more narrow than those of the BABP in that the activities of the Institute are confined solely to the development of training workshops and programmes while the BABP is able to deal much more extensively with the broad issues involved in the general growth of behaviour therapy.

It may well be that in a rapidly expanding field such as behaviour therapy some names may recur. This may be due to the relative newness of the approach and it is certainly one of the hopes of the Institute of Behaviour Therapy that as more people become involved in the necessary administration and training many more names will be seen to be involved with a range of similar activities. The Institute of Behaviour Therapy is a privately run training facility which runs training programmes usually of a non-profit-making kind.

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This is quite a usual consequence of the development of a new field of endeavour and has good precedent in most of the other professions. It can only be hoped that the sort of service which is offered by the Institute will soon be much more widely available through other types of organisation as well.

> Yours faithfully, Robert Sharpe, Ph.D.

NAME OF THE ASSOCIATION

Dear Sir,

Thank you for the copy of the Bulletin, which I read with considerable interest. It is difficult to find a satisfactory solution to the labeling dilemma. "Behavior Modification" is strongly identified with operant procedures. In addition, the label behavior modification has unfortunately been applied to any method that alters behavior. Publicized accounts generally confuse behavioral approaches, which rely upon environmental influences, with bio-medical techniques involving surgery, drugs, and brain implants. As a result, those who use behavioral procedures bear the consequences of public condemnation for methods they never use and, in fact disavow.

"Behavior Therapy" carries fewer negative connotations, but it encompasses only part of a broad range of behavioral applications including educational programs, community interventions, and the like. The term will become even more unsuitable as we increasingly apply corrective measures to detrimental social practices rather than limit ourselves to treating the casualties of these practices.

"Behavior Change" is a broad title that encompasses both person and social change and does not arouse negative associations.

This brings my best wishes.

Sincerely, Albert Bandura Stanford University, California.

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