Correspondence

arguments and in the interests of a better quality of
debate on important issues.

RON LACEY
MIND
22 Harley Street
London W1

DEAR SIRS
I always read with interest the Special Reports
published by MIND and am familiar with those
mentioned by Mr Lacey.

Like many other psychiatrists, however, I some-
times feel that MIND, both national and local, cam-
paigns with a zeal which does not always recognise
the real constraints that the mentally ill, their families
and their psychiatrists have to work within.

In some campaigns both ECT and drugs have been
roundly condemned when what is needed is greater
discrimination in their use. The report on ECT
recognised that and I applauded it.

SYDNEY BRANDON
University Department of Psychiatry
Leicester Royal Infirmary
Leicester

Groups in a mental handicap hospital

DEAR SIRS
I read with interest Dr Lovett’s article on ‘The Life of
a Group on a Locked Ward’ (Psychiatric Bulletin,
February 1989, 13, 60–62). I was involved with two
similar groups in a mental handicap hospital; a group
each on a male and female ward with behaviourally
disturbed patients with mild to moderate handicap.

Some of the difficulties outlined by Dr Lovett were
apparent in the above groups. In particular, there
were difficulties about the same nurses attending
each week due to their shifts. In addition, patients
would walk in and out of the group, and due to poor
punctuality on both patients’ and staffs’ parts, the
group would often commence late.

I experienced other difficulties also. Firstly, there
was difficulty in making interpretations and following
the group process in view of patients’ mild and
moderate handicap. Secondly, the ward staff
adopted an approach whereupon patients were
requested not to express negative views. It was diffi-
cult to persuade the experienced ward staff to change
their long-standing views.

Despite the difficulties, the groups appeared to be
useful and valuable. The conclusions reported by Dr
Lovett appeared very appropriate.

A. K. SHAH
Shenley Hospital
Shenley, Radlett
Hertfordshire

Training assessment visits

DEAR SIRS
As most of your readers are well aware, the Joint
Committee on Higher Psychiatric Training lays a
very strong emphasis on trainee representation on its
visits to senior registrar training schemes. In the past
such representation has sometimes been restricted to
trainees from a few training schemes. In order to
widen this representation, may I, through your corre-
spondence columns, urge senior registrars to forward
their names to me for inclusion on training assess-
ment visits. Trainees’ participation in such an exer-
cise is vital if the improvement in their training is to
continue. Participation in such visits enables one to
not only understand how the other half lives but also
gives invaluable insight into one’s own training.

DINESH BHUGRA
The Maudsley Hospital
Denmark Hill
London SE5 8AZ

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