coming to the notice of the Department had risen from 487 in 1960 to 2,881 in 1969; however the figures had remained stationary since. He explained the advantages of a national drug unit of this kind.

On 4 April the House approved an Order under the Misuse of Drugs Act, 1971 (which is not yet fully in force), adding the names of several recently-introduced drugs and deleting others (e.g. fencamfamine and pemoline) from the relevant schedules.

Alcoholism

In reply to questions by Mr. A. W. Lyon, it was stated that there are probably between 200,000 and 400,000 alcoholics in England and Wales. About 1,600 beds in special units etc. are occupied by alcoholic patients and about 100,000 days of incapacity have been certified in one year as due to alcoholism. It was also stated that the Government had since 1970 allocated £2 million towards treatment and research, and that the results of a comparative study of treatment methods by the Institute of Psychiatry would be published.

Delinquency

On 19 March Mr. Cordle asked about the after-care of mentally ill offenders discharged from hospital, and was told that, apart from the usual arrangements, after-care was one of the matters being considered by Lord Butler's Committee.

Since the coming into force of the Mental Health Act the Home Secretary has refused 57 recommendations for discharge made by review tribunals (these are all presumably in respect of delinquent patients).

It was stated that known shoplifting offences had increased from 56,000 in 1963 to over 119,000 in 1971.

Personnel of Government Committees

Prof. K. Rawnsley is a member of the Committee of Inquiry into the Regulation of the Medical Profession.

There is no psychiatrist on the Health Education Council, but one psychiatric social worker, Miss M. Bailey, is a member.

Miscellaneous

In an Adjournment Debate on *Homeless Single Persons* on 2 March, Mr. M. Meacher pointed out that the increase in the number of persons 'sleeping rough' was in part due to the earlier discharge of mental patients from hospitals. In his reply, Mr. Paul Dean of the DHSS made no mention of this factor, but referred to the circular of September 1972, asking local authorities 'to consider what need existed among adults with personality disorders' and what action should be taken.

In a written answer on 13 February, Sir Keith Joseph gave the *suicide rates* over the last five years for the 20 largest towns in England and Wales. In 1967, 10 of them had rates of over 10 per 100,000; in 1971 only 3 reached this figure. At a first glance the rate appears to be high in Nottingham, Cardiff, Newcastle and Southampton, and low in Birmingham, Liverpool, Bradford and Stoke-on-Trent.

ALEXANDER WALK.

'MY DR. SLATER'

By FLORA PEETT *Journal (now Editorial) Secretary*

'Your Dr. Slater', said the hall porter at Chandos House, 'is a nice old gentleman.' I was a bit surprised at the 'old', for the hall porter is at least 65 and Dr. Slater seems to me to have an ageless quality, but I heartily agreed with the rest of the remark.

I first met Dr. Slater in 1966 when he interviewed me for the post of Journal Secretary, and I was immediately conscious of that curious rapport with an erstwhile stranger which one occasionally discovers. I was delighted to be offered the post a few days later.

Much of Dr. Slater's work as Editor-in-Chief had to be done at home, but every Wednesday he came to Chandos House to deal with business there, filling the tiny *Journal* office with his presence and personality. He was always dignified, kindly and courteous, and immaculately groomed. Together we got through an enormous amount of work, but in an easy, relaxed atmosphere. He never seemed to hurry, yet, as Sir Martin Roth has written in the *Journal*, every letter he wrote to an author was given painstaking care and attention to detail.

Dr. Slater described our association as a partnership, and I always felt this to be true. For a man of his intellect, knowledge and professional standing, he was extraordinarily modest. He never saw himself as an infallible superior being, knowing everything about everything. After my previous experience in an organization with a rigidly hierarchical structure, I found it a bit disconcerting at first when he asked me for my opinion, expected me to have one and, not infrequently, acted upon it. Working with him was never dull, but a continual challenge to one's wits, a development of one's talents, and a consequent growth of one's self-confidence.

In spite of the relaxed atmosphere, mistakes did

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sometimes occur, but he never made an issue of them. Faults were admitted by one side or the other, and that was the end of the matter. It is significant that the only occasions when I have known him to be angry were when he was dealing with disembodied voices on the telephone. He particularly detested callers from the mass media who wanted his authoritative opinion on some topical subject at short notice —and he said so in no uncertain terms!

Dr. Slater once told me that when he first qualified he vowed never to forget that his patients were people, not cases. He has carried that vow into his other professional relationships, treating all his colleagues as equals with their own minds and feelings. Therein, I feel sure, lies the secret of the affection and esteem in which so many hold him.

At the end of each working day Dr. Slater never failed to thank his 'trusted colleague' for her help. Now it is my turn to thank him for six years of harmonious teamwork on the *Journal* to which he has given so much of himself. Is it not significant that, during his last few weeks in office, he went home on one occasion without his hat and twice without his umbrella?

SOCIAL AND COMMUNITY PSYCHIATRY GROUP

Council of the Royal College of Psychiatrists has approved the formation of a Group concerned with Social and Community Psychiatry. Professor J. K. Wing has been appointed convenor.

All those interested in participating in such a Group are invited to attend an inaugural meeting in the Wolfson Theatre, Institute of Psychiatry, de Crespigny Park, London, SE5 8AF, from 5–5.30 p.m., 15 June 1973. This sesssion will follow the earlier meeting of the Southern Division of the College which will take place from 2–4.15 p.m. in the same Theatre, the topic of which will be 'Recent Research in Social Psychiatry'. The Southern Division Executive Committee has given permission for those from other divisions who wish to take part in the inagural meeting of the Group to attend the Divisional meeting if they so wish.

The main business of the inaugural Group meeting will be to elect a Chairman, Secretary and Committee. Those who are unable to attend but who support the idea of a group are invited to send comments or suggestions to the convenor.

THE ASSOCIATION OF PSYCHIATRISTS IN TRAINING

It is almost two years since the Association was founded. Its objectives include the provision of a forum for discussion and action by trainees in psychiatry, the holding of meetings and symposia, and the creation of a pressure group to hasten the establishment of adequate training programmes and methods of assessment in the specialty. In that time A.P.I.T. has had many difficulties to surmount. It has had to overcome the apathy and disinterest of trainees, many of whom are too busy coping with heavy clinical commitments, several examinations and inadequate training facilities to participate in the Association's activities. It has had difficulty, as have bodies as prestigious as the D.H.S.S., in even contacting many trainees—there being no central register of those in sub-consultant grades. It has had to combat a prevalent feeling that on issues such as the M.R.C.Psych. examination, representation, the reorganization of the psychiatric services, the views of individual junior psychiatrists are of little consequence. Thus there are still areas of the country in which the Association is weak. The interest of overseas doctors in the specialty has not been sufficiently stimulated. Yet the signs are hopeful and as a whole A.P.I.T. is strong.

Representation

One of the first efforts of the Association was to discover how junior psychiatrists might obtain some representation on the committees of the College. A.P.I.T. still believes that in the final analysis junior psychiatrists who have still to obtain the Membership proper should have formal representation within the College and it will continue to press for this. At the present time, however, representation with observer non-voting status is a more realistic aim. Following joint discussions between representatives of A.P.I.T. and the College in the summer of 1972, Council agreed that there should be trainees as observers at meetings of the Standing Committees and on the Divisional Executive Committees of the College. A.P.I.T. claimed that it was the only

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