6. Measurement of memory.

7. Weight disturbance and dietary habits in teenagers.

8. Sexual difficulties in marriage.

9. A psychological and psychophysiological study of dysmenorrhoea.

10. Psychiatric and psychological studies in dialysis and renal homotransplantation.

11. Predictive studies for outcome of surgery for peptic ulcer.

University of Birmingham

The following investigations are being carried out by Senior Registrars in the training scheme:

1. Psychological aspects of obesity.

2. Weight variations in depressed patients.

3. Operational research into the running of a psychiatric domiciliary squad.

4. Problem families.

5. A study of school non-attenders.

6. A controlled study of a new antidepressant.

7. A controlled study of convicted criminals with a history of serious penetrating head injuries.

8. A clinical study of children with tuberose sclerosis.

9. Body image in neurotic patients.

University College Hospital

Current work includes the following studies:

1. The effect of tranquillizers on schizophrenic patients; this project is being carried out by a neuropsychological research unit set up jointly with Friern Hospital.

2. The pattern and outcome of attempted suicide.

3. The incidence of psychiatric illness in the Hospital for Tropical Diseases.

University of Liverpool

The Unit for Research into Doctor-Patient Communication has now completed its first year of research into ways of helping patients remember what they are told by doctors, and of increasing patients' satisfaction with the communications aspects of their hospital stay.

The Department of Psychiatry is collaborating with the School of Dental Surgery on a project to assess psychological reactions to various types of dental treatment, with special reference to day bed dental treatment.

Both the above projects are being financed by the Department of Health and Social Security.

Other research projects being carried out are as follows:

1. Genetic aspects of alcoholism.

2. Aversion therapy in sexual deviants.

3. The parameters of aversion treatment for homosexuals, with the emphasis on the theoretical basis of the treatment and the role of incubation in the success or failure of treatment.

4. State dependent learning effects of drugs in humans.

5. Drug trial of a new hypnotic.

6. Heart rate, telemetry and measurement of free exploratory movement on the Human Automated Two-Subject Open Field.

7. Verbal learning with thought-disordered and brain-damaged patients.

8. The effects of haloperidol, chlordiazepoxide and alcohol on various psychological skills.

9. The intellectual characteristics of entrants to the nursing profession.

10. Cerebral dominance in twins.

11. Medical knowledge of hospital in-patients.

12. Psychological aspects of smoking behaviour and attitudes.

13. Psychological aspects of compliance.

REGIONAL DEVELOPMENTS

Development Project for the Mentally Handicapped in Sheffield

A feasibility study has recently been undertaken by the Department of Health into the provision of a comprehensive hospital and local authority service for the care of the mentally handicapped in the City of Sheffield, an area with a population of about 530,000.

The service will be provided jointly by United Sheffield Hospitals, the Hospital Management Committees of the Sheffield Regional Hospital Board and the Local Authority, and will consist of comprehensive assessment facilities, accommodation on two District General Hospital sites for those needing full medical and nursing support, small community units under hospital control for those needing minimal medical and nursing attention, and residental accommodation in the form of small homes in the community or group homes in lodgings. Hospital Units on the District General Hospital site, for both adults and children, will be large enough to cater for in-patients and for a number of day patients. Patients accommodated in hospital service community units will attend Local Authority Training Centres, and these units will be sited within easy reach of the training facilities. In addition, there will be a joint mental health social work organization between the Hospital Service and Local Authority.

A special unit of 24 beds with provision for some security will also be provided, under hospital control, for emotionally disturbed adolescents and young adults of both sexes.

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Newcastle Regional Hospital Board

The Durham County Hospital, formerly an accident and emergency unit, has been closed for a year so that it can be altered for use as a short-stay psychiatric unit. When it re-opens it will have 60 beds and a large day centre with model kitchen, laundry and bathroom as well as occupational therapy facilities. The conversions will cost about £130,000 and will mean than Durham will have psychiatric treatment available for the first time in the city itself.

Leeds Regional Hospital Board

Work began in October on a new £45,000 psychiatric unit for the Halifax area, which will take about two years to complete. The unit will serve as a sister unit to the new psychiatric department recently opened at Halifax General Hospital and is the second part of the plan which, when complete, will give Halifax a comprehensive and self-sufficient mental illness service. The Northowram Psychiatric Unit, as it will be called, will work closely with the department in the General Hospital, and will consist of 90 beds, a day centre capable of handling 125 cases a day, and full diagnostic and rehabilitation treatment facilities. Until now the district has been heavily dependent on Storthes Hall and St. Luke's Hospitals in the Huddersfield area. It is intended that when the new unit opens this dependency will end.

Sheffield Regional Hospital Board

Loversall Hospital, which was officially opened in September, will provide a further 120 beds and other facilities for patients with mental illness in the Doncaster area (a population of 270,000) in addition to the 81 beds already existing at Doncaster Royal Infirmary. Previously some patients have had to be treated at Middlewood Hospital, Sheffield.

The first day hospital in the Derby area, serving both the Pastures and Kingsway Hospitals, was officially opened in October. Thornhill Day Hospital, as it will be called, came into being as the result of the conversion of an existing building in the grounds of Kingsway Hospital, at a cost of £25,000. The building will eventually accommodate 60 patients.

MISCELLANEOUS NEWS

Children and Young Persons Act, 1969

In view of the number of enquiries that have been made concerning witnesses' fees, the following extract from the B.M.A. Solicitor's report on the subject is reproduced:

On behalf of certain child psychiatrists, I have been consulted about questions of professional confidence, the legal duty (if any) to render a report, and the person to whom such reports should be forwarded. The 1971 Regulations follow the 1967 Regulations in referring to a 'written report made by a registered medical practitioner to a court in pursuance of a request . . . by a court'. This does not apply to a request by a local authority unless in a particular case the court in fact has asked the local authority as its agent to request a written report from the doctor concerned. Only in that event would these Regulations apply.

In other cases where the enquiry is initiated by the local authority without a previous request by the court the position is as follows:

(1) A general practitioner can and should negotiate a fee.
(2) A practitioner employed full-time in a public health service cannot as a general rule claim a fee.
(3) A practitioner who does part-time work in the public health service, e.g. a consultant child psychiatrist—may be able to negotiate a fee with the local authority, but this will depend on the terms of his contract and on whether he prepares the report in the course of his public health sessions.
(4) A full-time practitioner in the hospital service may negotiate a fee provided that circumstances fall under the new Category II.

The National Association for Mental Health

The National Association for Mental Health launched its MIND campaign at the beginning of the year with a call for action in the 1970s. It proclaimed that every citizen has the right to demand that mental health be given as high a priority as physical health: everyone suffering mental disorder the right to a life of human dignity with a home, a job and friends: every family with a mentally disabled member the right either to care for him at home with help and support of statutory and voluntary services, or an acceptable alternative: all whose profession is to care for the mentally disordered the right to proper working conditions in which to exercise their skills.

Since then it has been concerned to examine how far these aspirations are matched by the experience of patients and their families. It has published four MIND reports which have been widely noted. The first arose from the findings of the Farleigh Report and dealt with hospitals for the mentally handicapped; the second with psychiatric treatment facilities for adolescents; the third with stress at work; and the

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