

LETTERS TO THE EDITOR

Dear Sir,

Dr. Alex Shapiro's letter published in your edition of June 1969 raises a number of issues which go quite beyond the content of the letter. Dr. Shapiro is the Medical Superintendent of a large subnormality hospital whose catchment area includes some of the most heavily populated areas of the London conurbation. It is inevitable that during a period when great public and professional concern is being shewn for mental defectives that Harperbury, with its size, its over-crowding and its under-staffing should at some time or other come under attack. It is also proper and understandable that Dr. Shapiro, who cares deeply about these things, should rush to the defence of Institutions like Harperbury, which he has worked so hard to improve. What is, however, a source of worry is Dr. Shapiro's position in this matter as a prominent member of the M.D. Section of the Royal Medico-Psychological Association, and one has a right to ask what their position in this matter is. Would they, for example, dismiss alternative types of care simply because some of them have been "idealised"? Do they believe that the problems of the large Institutions should not be made public because in practical terms this is one of the inferences of Dr. Shapiro's letter. Do they hold the belief that there are parents' Societies who "cling to the belief that some magical formula (usually an educational one) will bring to normality the most severely handicapped people"? Do they believe that there are larger numbers of parents who believe this? No-one would dispute the right or fail to understand the need for Dr. Shapiro to put up an emotional defence, but the situation would be clarified if the R.M.P.A. made public a policy statement on the subject. As it is, their mental deficiency section is being seen as the stronghold of the conservatives and in this it could well be that they are being done an injustice.

Yours faithfully,

JAMES LORING,
Director, The Spastics Society.

Dear Sir,

Dr. Shapiro's last paragraph, witty though it may be, entirely begs the question of what is meant by "institutionalisation", which I feel sure every reader of your journal knows is an "avoidable evil".

Of course there are good and bad sides of most hospitals—probably every hospital. Modern decor and equipment cannot solve the problem of the doubly incontinent child—which is also not solved by locking all the "dirty" ones (and the nurses call them that!) together and leaving them to tread in and play with their excreta. What these children need is *people*, to play with them, try to draw a response and get them interested and active—in other words to educate them.

Dr. Shapiro repeats the canard that "parents and parent societies cling to the belief that some magical formula (usually an educational one) will bring to normality the most severely handicapped people". The only parents' societies are affiliated to the N.S.M.H.C. and none of these holds such a belief.

At this very moment, Local Societies and Hospital Friends' Groups are trying to recruit helpers for the purposes outlined above. By trying to make a one-to-one

relationship (something *Institutions* could never attempt) and if possible giving the children a change of scenery for at least part of the day, by introducing attractive play material, we are confident that many, even of the "most severely handicapped people", can be helped to enjoy life a little, perhaps become easier for the nurses to manage. Quite a small thing can sometimes start a train of mental development in a child hitherto sunk in apathy and despair.

Experimental Units with something like adequate finance and staffing are beginning to appear not only in the community but also within some of the hospitals. All we parents ask is that there shall be more of such units, that hospital management and staff do not close their eyes and ears to new ideas because they regard other people's proper concern for the wellbeing of patients as a personal attack upon themselves.

I can assure Dr. Shapiro that many parents have an uneasy conscience because (knowing the situation the staff find themselves in) they have refrained from speaking out as boldly as they might about conditions they have seen with their own eyes and experienced with their own children. Now there is a determination to do something about it—not by "hurling abuse" nor pouring sarcastic scorn, but by personal, practical help.

That many young people formerly categorised as "low grades" can be helped by training and social education we have proved in our own Training Centre and Hostels at Slough, and are proving at Lufton Manor Rural Training Unit. And that most of those formerly dubbed "ineducable" can in fact be educated, albeit by methods specially designed to cater for their needs and abilities, is now recognised by the authorities and professional bodies. But this is far from saying that there is no problem—that they can all be "normalized".

Let us avoid putting up Aunt Sallies to score off rivals, when there are real issues to be thrashed out and so many people to be made aware of what needs to be done.

Yours sincerely,

JUDY FRYD,
Editor, Parents' Voice.