## Correspondence

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## DEAR SIR,

Dr. Mackie's letter and your reply (Journal, November 1967, p. 1317) reflect a situation that causes a great deal of concern to many psychiatrists. At the risk of some over-simplification, it can be said that British psychiatric literature separates "two cultures". A "scientific" one has research dominated by the rigours of statistical and experimental methods but with little apparent connection with what people are about. The other, the psychodynamic, consists mainly in descriptive and interpretive studies concerned with people as persons, and in particular with their difficulties in achieving good relationships.

It has been most unfortunate for British psychiatry that these two approaches have developed with such marked divergence. One result is that, in your reply to Dr. Mackie, the critical issue for psychiatrists today, namely, the implications of the current position in which leading psychotherapists do not consider the British Journal of Psychiatry a congenial medium for at least some of their contributions, is not considered. The origins of this situation are complex, and I do not wish to embark on these. What is much more important than dwelling on past history is to take constructive steps for the future. I suggest that something along the following lines might be contemplated. The Bye-laws for our proposed College envisage three specialist areas, Psychotherapy, Child Psychiatry and Subnormality, along with General Psychiatry. Could not each of these divisions have an editorial group with an allocation of Journal space and with the three groups co-ordinating their work with the editorial group for the General section?

I believe that contributors to technical journals are influenced by two considerations. They want their work to reach the relevant audience; but they also like their articles to appear in a journal in which the very fact of publication within its pages indicates a certain standard of work. In my view this latter is fulfilled only when an editorial group itself possesses, and is seen to possess, an expertise acceptable to the best contributors. However good the intentions of the present editors may be towards the psychodynamic culture, I think that leading contributors would not want to use the *British Journal of Psychiatry* until a demonstration of interest in their approach is built into the editorial structure. (I would support your view from my own editorial experience that soliciting articles is not a reliable method for establishing a journal tradition.)

The adoption of a policy such as I have outlined would have many merits. Not only would it present to all psychiatrists a sample of the best work going on in the various sections of psychiatry, but the existence of editorial groups within the different specialties would be of great value for the morale of each, for achieving closer relations between them and general psychiatry, and hence for benefiting the development of all sections.

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## DEAR SIR,

It is undoubtedly fitting that proper attention, respect and encouragement should be given to reports of work done in those areas of psychiatry where statistical methods and other instruments developed in the mathematical and physical sciences are applicable. Nevertheless, it must surely be faced that much of the work of psychiatrists does lie in unavoidably subjective situations, where intuition has its part. The only way of communicating what is experienced within not a few human interaction situations may be to construct an anecdote. An independent sociological expert, observing the same situations objectively from without, would report them quite differently, and be able, perhaps, to report in terms of trends and numericisms.

By no means the majority of psychiatrists find themselves in a position to practise that limited form of their art which could take place in a real or imagined laboratory situation; the field is *people*, and their individuality defies statistical corroboration. The being of consciousness is the consciousness of being (J. P. Sartre) and is realized as in some respects inaccessible to enumeration and statistical comparisons. Statistical instruments handle and clarify experiences when they are reduced to numerical data, in a world seen as consisting of determined variables, not of human individuals being themselves in groups.

Some psychiatrists see their primary commitment as trying to help patients to exist themselves in a more