## **Correspondence**

### Personal psychotherapy

DEAR SIR

As a British trained psychiatrist now living in the United States, I have a number of comments on the subject of personal therapy for psychiatrists (Bulletin, 1982, 6, 38). First, most American psychiatrists have been in therapy, usually psychoanalysis. The value of this has been reviewed critically by Greenberg and Staller (1981). They found that the research done in this field was poor but that there were indications that personal therapy might improve a therapist's responsiveness and empathy and reduce countertransference. These effects were apparent, however, only after therapy had terminated and the psychiatrist had acquired more experience in dealing with patients.

Secondly, psychotherapy can be harmful (Crown, 1981). Therefore, those who recommend personal therapy to trainees have a responsibility to ensure that they are not damaged as a result of this advice. This requires a sufficient number of well-trained, competent and suitable therapists, a situation which perhaps does not exist in Britain, except in London. Therefore, personal therapy will not be a practical proposition for the majority of British psychiatrists. Other ways will have to be found for improving the standard of

psychotherapy in Britain, starting with the trainee having more time and better supervision.

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#### REFERENCES

 GREENBERG, R. P. & STALLER, J. (1981) Personal therapy for therapists. American Journal of Psychiatry, 138, 1767-71.
CROWN, S. (1981) Psychotherapy research today. British Journal of Hospital Medicine, 25, 492-502.

## Importance of staff relationships

DEAR SIR

It was refreshing to read Nick Rose's article (Bulletin, 1982, 6, 60) on the acute admission ward, with its mention of staff relationships at a grass-roots level, and its exploration of organizational structure. Perhaps there is a need for more articles of this nature.

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# Forthcoming Events

The Institute of Family Therapy (London) is offering a number of courses and special interest seminars commencing in October 1982. There will also be a number of two-day workshops during the coming months: 'Transgenerational Family Therapy'—Stuart Lieberman: 9 September 1982; 'Cross-Over Dialogues—Two therapists interview families treated by the other'—John Byng-Hall and Alan Cooklin: 12 and 13 November 1982; 'Different Structures, Different Habits'—Gill Gorell Barnes: 26 November 1982. Information: Course Secretary, Institute of Family Therapy (London), 5 Tavistock Place, London WC1.

The 7th International Congress on Psychosomatic Obstetrics and Gynaecology will be held in Dublin from 11 to 15 September 1983. The theme will be "The Young Woman". The closing date for applications is 30 August 1982. Information: Dr John Stronge, Congress Secretary, 7th International Congress on Psychosomatic Obstetrics and Gynaecology, 12 Pembroke Park, Dublin 4, Ireland.

The Child Guidance Training Centre is holding a course on therapeutic communication with children which is aimed at increasing understanding of children's communication and of the therapeutic process. Ten places are available for staff members of Child Guidance Clinics and Departments of Child Psychiatry who are engaged in ongoing individual work with children. The course will be held at the Centre on Mondays from the Autumn term 1982 to the Spring term 1983. Information: Mrs J. Hopkins, Child Guidance Training Centre, 120 Belsize Lane, London NW3.

In association with the Institute of Group Analysis (London), courses in group work and family therapy will be held in Oxford (September 1982–May 1983) and Northampton (October 1982–June 1983) on a weekly half-day basis. Course fee £180. Information: Course Secretary (Oxford), Ann West, Chaplains' Office, Littlemore Hospital, Littlemore, Oxford OX4 4XN; or Course Secretary (Northampton), Mrs Rose Fisher, Cheyne Walk Clinic, 3 Cheyne Walk, Northampton NN1 5PT.

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