

Correspondence

Letters for publication in the Correspondence column should be addressed to:

The Editor-in-Chief, *British Journal of Psychiatry*, Chandos House, 2 Queen Anne Street, London, W1M 9LE.

MENTAL HEALTH AND FREEDOM OF CONSCIENCE

DEAR SIR,

In view of the lively public interest aroused concerning the above topic, I thought it might be of interest to your readers to know that the Executive Committee of the World Federation for Mental Health at its last meeting approved the following Memorandum for publication:

There are many definitions of mental health, but one thing they all have in common is the recognition of each man's freedom of opinion which is based on freedom of conscience—that is, his right to hold and to affirm his personal moral values. Freedom of opinion has been attained only relatively recently in some countries of the world; in others it still has to be asserted, and in all countries it has to be vigilantly defended, because deprivation of this freedom is both an affront to human dignity and a severe form of mental cruelty. Respect for freedom of opinion has been incorporated in the United Nations' Universal Declaration of Human Rights.

In recent years, there have been numerous public allegations concerning the current misuse of psychiatric diagnosis, psychiatric 'treatment' and enforced confinement in psychiatric institutions of persons whose only 'symptoms' have been the avowal of opinions disapproved of by their society. These accusations have been directed in particular—though not exclusively—against the alleged incarceration of political dissenters in prison mental hospitals in the U.S.S.R.

The World Federation for Mental Health resolutely opposes any such abuse of psychiatric procedures, and calls on its Member Associations throughout the world promptly to investigate all such allegations and to defend the individual's freedom of opinion where it appears to be threatened. The Federation also calls on the mental health professionals and the Governments of countries where there are no voluntary Mental Health Associations to investigate all charges of the misuse of psychiatric procedures for political ends, and to demonstrate convincingly to the world that such practices are not condoned in principle nor allowed to continue where they are shown to have occurred.

The Memorandum was passed *nem. con.*, with one abstention.

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TRIBUTE TO DONALD WINNICOTT

DEAR SIR,

In the tribute to Donald Winnicott at the N.A.M.H. meeting, which Dr. Kahn reproduced in his letter in the *Journal* for January 1972 (pp. 119-20), the 'squiggle' is described as 'a very simple device for communication between two people. Each takes a small piece of paper and produces a scribble . . . and then the papers are exchanged'.

In fact, Dr. Winnicott described the squiggle game in the first case in his *Therapeutic Consultations in Child Psychiatry* as follows:

'I shut my eyes and go like this on the paper, and you turn it into something, and then it is your turn and you do the same thing, and I turn it into something.'

This technique allows for much more concentration on what each is doing and avoids the introduction of a gratuitous competitive element.

Dr. Kahn comments that there is the accepting of something which is apparently chaotic. Dr. Winnicott put the same point in one of his characteristically vivid phrases: 'If you want to learn from me, you will have to dig from chaos.' Dr. Winnicott's ability to persist in tolerating his patient's chaos without premature intervention, together with his preparedness to expose himself, facilitated a truly therapeutic consultation.

PERRY CALWELL.

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PATIENTS WHO LAPSE FROM GROUP PSYCHOTHERAPY

DEAR SIR,

Sethna and Harrington (*Journal*, July 1971, pp. 59-69) describe the phenomenon of lapsing from group psychotherapy. They are apparently not concerned with ways of predicting suitability for group treatment. However, the 'non-starters' at