professional discussion. It is difficult to see how a PRO would be able to alter this state of affairs. If, however, the College has aims or objects which it wishes to achieve, Dr David Clark suggests that these might be defined and advice on procedure be sought from Public Relations Consultants. Such an approach is likely to cost a great deal of money.

Dr Haslam and his group have put a lot of hard

work into seeking solutions to these problems, but the result of their labours adds little to the Memorandum produced in 1972 by the College's Public Policy Committee, or to Dr Clark's Memorandum to the PPC in 1974. The dilemmas remain unresolved.

DONAL F. EARLY

CORRESPONDENCE

THE QUALITIES OF A GOOD PSYCHIATRIST

DEAR SIR.

Re Sir Denis Hill's lecture(1): the book(2) he quoted was written in the belief that if you cannot beat them or join them it is best to co-operate with them. If doctors always insist on being the leaders in a group, can they expect other professions to accept this and give full co-operation?(3)

ALEX BAKER

Alpina, Theescombe Lane, Amberley, Gloucestershire.

References

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British Journal of Psychiatry, 133, 97-104.

Baker, A. A. (Ed.) Comprehensive Psychiatric Care. Blackwell, 1976.

The consultant, one who consults (an oracle). Bulletin of the Royal College of Psychiatrists, June 1978, pp 110-1.

NATIONAL MARRIAGE GUIDANCE COUNCIL

Marital Sexual Dysfunction Project

The DHSS has notified us of a project which is being funded by the Department to train marriage guidance counsellors in the treatment of certain sexual problems. In 1974 it was agreed to fund an experimental study to examine:

- i. The feasibility of providing a training programme for marriage guidance counsellors to enable them to treat sexual dysfunction using non-counselling special treatment methods without undermining their existing skill in counselling;
- ii. the feasibility of staffing a co-therapy service without having a highly professionally qualified person as one of the co-therapists, and (as a further development) the feasibility of staffing the service with single 'non professional' therapists.

Following an evaluation of the Study, NMGC has been given financial support for a further three years to develop and extend this training. The main aims of the present project are:

The continuation of apprenticeship training. In the first year of the NMGC's 'apprenticeship training' the trainer acted as senior co-therapist and the trainee as junior co-therapist in treatments based at Herbert Gray College in Rugby. In the next year, the erstwhile trainee acted as trainer and senior co-therapist, with a new trainee, at the new trainer's own MGC. These cycles are planned to repeat themselves annually, so spreading training gradually outwards from Rugby.

At this stage in the project the number of people who can be offered treatment at each centre is quite small, and outside the Midlands treatment is available at only a few MGCs (see list following). However, treatment will start in several more in the second year of the project.

The NMGC recognize the importance of developing and maintaining links with doctors and NHS services providing advice and treatment for sexual problems.