

CONCLUDING REMARKS

In closing this meeting, I shall mention our thanks for the really valuable sense of communication between the audience and the panel in a moment. First, I would like to comment on Dr John Marshall's admirable address. One of the things useful to remember is that people often come with the form of magic or denial that "all would be well, if only my partner were different, not necessarily a different person, but would behave in a different way". Change is always being asked for—"If only he wouldn't do this, or she wouldn't do that. If only she would stop nagging. If only he would stop drinking. If only he wouldn't bully the children or ignore the children, or neglect the children. If only he wouldn't work so hard and neglect the family, or if only he would work harder and earn more money," and so on and so forth. Perhaps the only useful point of departure for the doctor here is to say, "Marriage is a situation in which two individuals have pledged themselves together to make a corporate thing. It is terribly difficult, but if there is any changing to be done it is the husband who can change himself and the wife who can change herself to be more loving and more loved. You cannot make your wife what you want her to be. She cannot make you what she wants, and if it is agreed between you that either of you must change, and that is usually necessary, then the change has got to come from within, and your contribution to the marriage can be the change you make in yourself—not the change you make in the other person". I am sure that once people get that idea through their heads they stop projecting the entire problem into the opposite court, and there is a chance. But while they see it all in terms of the other person, there is very little chance. This is the first and most important contribution that the doctor can make to his counselling in marriage.

To come to the last contribution about adolescence, I think it is necessary to say, in addition to the admirable material from Dr Elizabeth Doherty, that rebellion or rejection, at least temporarily, of the parents' standards and images is a necessary and inevitable part of becoming an independent person. There is a period when the freethinker's daughter insists upon becoming a nun or something like that, or when the conservative M.P.'s son becomes a communist, and this is a right and proper thing, because unless we can explore the freedom of thought and criticism and intellect and emotion which is part of our responsibility, we cannot grow up. So when your children turn and rend you or when you turn and rend them, it is useful to remember that even in that act they are declaring that you have made them free and that they value that freedom. You can take what solace there is from that, and I think the wise doctor will often need to comfort parents going through the agonies

of adolescence for the second time when their children are growing up, to comfort them with the recognition that adolescence is a necessary period of turbulence and must include rebellion and criticism, even to the point of temporary apparent antagonism, of all the things the child previously accepted from the parent. It is a breaking away so that we can come back in a different way; a basis of friendship must replace a basis of dependence; a basis of criticism and then of common evaluation must replace a dogmatic assertion on the one side, a submissive acceptance on the other.

Dr Doherty mentioned a couple of cases of schizophrenia which had occurred in adolescence and in which an aetiological factor may have been parental pressure. This can be a factor, as most stresses can, but I would say that aetiology of schizophrenia is multiple; the guilt of schizophrenia is never entirely somebody else's and in fact, guilt should not come into it. Schizophrenia is a disorder which like diabetes can be released by stress but probably has a constitutional biochemical element as well; it is also necessary to remember that five times as many people get schizophrenia between the ages of 15 and 25 as at any other stage in life; this is a period of turbulence, stress, endocrine as well as emotional upheaval, so that schizophrenia is a greater risk than anyway, no matter what anyone does or does not do.

I would like to conclude by thanking you for being the sort of audience that brings the best out of speakers, and thanking the speakers for being the sort of speakers that such an audience deserves to get, and say how very happy I have been and how very honoured I have been to act as chairman.

Provost: My task is the very easy and very pleasant one of thanking our speakers. You have shown by your acclamation what you have thought of the papers and speakers here today. I would like to thank especially the chairman, who conducted this meeting in a most exemplary fashion. I think we will all agree that very rarely have any of us been at such a well-conducted meeting. We all enjoyed the speakers' papers and I am not going to pick out any speaker, but on behalf of the East Ireland Faculty of the College of General Practitioners, I would say that we have every reason to be proud of our own faculty members' contribution as general practitioners.
