

Married Quarters in Hospital

SIR,—It was salutary to read Mr. R. G. Macbeth's letter (June 22, p. 1674) if only to realize how far he is out of touch. There are two matters of fact on which he errs. First there is the problem of the great and growing deficit between the output of the medical schools and the voracious demands of the hospital service. The time has come when hospitals must make their jobs, and their accommodation, attractive. The grubby monastic cell, with its worn lino, cracked lampshade, and iron bedstead, is slowly on the way out.

Secondly, it is not necessarily true that the baby-watching, nappy changing (I do not think we washed them) resident is less devoted to his job than his foot-loose and fancy-free predecessor. He probably works harder and better; he is much less likely to set fire to the residency or to let beer drip through the ceiling on to the boardroom carpet; think what a fool he would feel when his wife and the children got to hear of it.

Times are changing and, I believe, for the better; much can be done, with little money, to keep up. In this group we have a total of 32 resident staff and 12 flats for married residents. At a recent count all were occupied and (*pace* Mr. D. W. Dingwall, June 22, p. 1664) there were 14 children. We are delighted to have them, and only slightly worried that the English learned at school, and taken back to India and elsewhere, is so broadly and cheerfully Lancashire.

For several years the medical and management committees in this group have conspired and contrived to create married quarters out of old unwanted hospital buildings. In addition to the existing 12 flats two new conversions are due to start soon, and a block of four new flats is to be built; we still want the regional board to let us invest in one or two caravans. The results of this policy are highly satisfactory. We have a stable resident staff who show great reluctance to leave the group. We have a waiting-list of successors. We like it; they like it; and it works. Sorry, Mr. Macbeth.—I am, etc.,

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SIR,—Mr. D. W. Dingwall (June 22, p. 1664) should be congratulated on his survey, which at last gives some idea of the number of married house officers throughout the country. I would like to

bring up to date his figures for the Oxford Clinical School. The figures in the Table were obtained three months ago by direct questioning of the clinical students. The trend for students to get married during their clinical training is obvious, and it can be seen that, in Oxford, at least half the students will be married when they become house officers. This figure is higher than Mr. Dingwall found in other schools. The explanation may be found in the longer course at this university (6 years and 2 terms), and in the presence of a considerable number of students at this clinical school who have already carried out one to three years' research work.

This survey makes it clear that Mr. R. Macbeth (June 22, p. 1674) is battling against the tide in saying: "If people wish to marry young, they should not aim to be doctors." It is equally clear that he does not have the support of the Minister of Health, who has drawn the attention of hospital boards, at least in the Greater London area, "to the desirability of an adequate proportion of married quarters."¹ Mr. Macbeth stresses the "limits to the taxpayer's ability to make life cushy for young doctors," but, as Dr. J. S. Elkington (June 22, p. 1673) points out, expenditure could be slight and the benefit great. In fact, it has been suggested² that, if only financial difficulties prevent the provision of married quarters, many married house officers would be prepared to obtain their own flats on the hospital doorstep, if this were allowed.

Comments on feeding the baby and washing nappies reveal little comprehension of the small amount of free time now available to the average house officer. Mr. Macbeth's other argument against the provision of married quarters concerns the educational value of being around the mess. I doubt whether the married house officer would spend much less time in the mess discussing medicine than his unmarried counterpart. As evidence, there seems little difference between the time so spent by unmarried non-resident staff (S.H.O.s and registrars) and that by their married counterparts. Doctors who are tired, jaded, or under strain cannot properly learn, will not want to talk medicine in the mess, and, in fact, are not the best doctors. Nothing is more calculated to put strain on a married man than enforced "collegiate monasticism."

The proportion of married house officers is sufficiently high, the benefit in personal happiness and standard of work

is so great, and the expenditure is relatively so small, that it seems senseless *not* to provide married quarters.—I am, etc.,

W. G. BRADLEY.

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REFERENCES

- ¹ *Weekly Hansard*, No. 562, June 4, 1962, Column 15, Written Answers.
- ² *Oxford med. Sch. Gaz.*, letter in press.

SIR,—As a single female non-resident registrar—with, therefore, no personal axe to grind—I feel I must take up the cudgels on behalf of my married male colleagues and challenge some of Mr. R. G. Macbeth's ideas (June 22, p. 1674).

My experience has been more fortunate than his, for in four-and-a-half years in junior hospital posts I have worked with many married doctors and have not observed any destructive effects of their work on their marriage, or vice versa. In fact, to many their marital responsibilities seem to make them work and study harder than the single men. One ex-P.R.C.P. was married as a student.

In hospitals where wives are permitted to visit the mess I have never noted any slackening of technical conversation on their account, provided we had something of real clinical interest to discuss. Also, their general conversation kept us from becoming too narrowly medical—always a danger when one is resident.

If a modest type of married quarters were provided on hospital territory I think the hospital as a whole would benefit greatly. The young houseman's energies could be concentrated on treating his patients, without the need to worry about a pregnant wife or sick baby in a distant flat. The communal property would be better cared for, and there would be fewer destructive mess parties. The doctor would not feel obliged to rush off the minute he was officially "off duty" if home were near by.

In the theatre and on the wards we expect our young housemen to behave like responsible adults; let us treat them like that in other respects.—I am, etc.,

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SIR,—Whatever may be said by older members of the profession on the rights or wrongs of early marriage by medical students or junior hospital staff this will not alter the fact that a large percentage of these young people are married. My committee believes that the only sensible thing to do is to acknowledge this change and to find ways and means of harmonizing it with the needs of the work of the hospital and of the training of the young doctor.

With the very limited married accommodation available to hospitals at present, the majority of married junior staff have three choices—namely, (a) to rush off duty as soon as possible in order to travel long distances to reach "home," (b) to live a virtually bachelor existence with rare visits to their spouses, or

	Total	At the Time of the Survey						When House Officers	
		Married		Engaged		Single		Married	
		No.	%	No.	%	No.	%	No.	%
Final year	23	12 (now 14)	52	3	13	8	35	14	61
Second ,,	21	7	33	6	29	8	38	11	52
First ,,	20	2	10	3	15	15	75	4	20