

logical frame of reference are proposed. Catchwords are: the shaping of the basic personality, culture-shock, acculturation, several forms of stress.

J. A. Rijnberk and Dr. M. C. Jansen:

A sketch of the current situation in music therapy

A number of factors explaining the great variety of schools within music therapy is described. To illustrate these factors a brief description of a few schools is given. Professional image, vocational training and (inter)national cooperation are briefly mentioned.

J. A. Rijnkerk en Drs. H. J. Duivenvoorden:

An investigation into the reactions of psychiatric patients to musical intervals

This paper presents the results of a descriptive investigation aimed at gaining insight into the way psychiatric patients react to musical intervals. Twenty psychiatric patients and a control group were asked to indicate the subjective reactions evoked by four musical intervals and a little melody, with the aid of a 20-item questionnaire constructed in a pilot study. Average item score is graphically represented for both groups. Iterative cluster analysis of the reactions to the melodies showed that the results fell by and large into two clusters. In cluster 1 (which contained the attributes 'unpleasant', 'depressing' and 'alarming', among others) the psychiatric patients scored higher than the controls. In cluster 2 (e.g. 'quiet', 'peaceful' and 'soothing'), there was no significant difference between the two groups. Finally the results are discussed, e.g. in relation to the composition of the groups.

Summaries

Tijdschrift voor psychiatrie 1977/6

A. Pen, W. A. Arrindell, W. Lawant en J. Pols:

The reliability of the Present State Examination

A description of a structured psychiatric interview the Present State Examination is given (P.S.E. Wing 1967). We replicated Kendell's reliability study of the 8th version of the P.S.E. Our aim was to test the applicability of the scale when used by raters without formal training in scoring the P.S.E. and working under normal clinical circumstances. The results were somewhat disappointing, agreement amongst our raters being markedly lower than in Kendell's study. Three possible causes for our relative lack of interrater-agreement are mentioned: insufficient training of the raters, failure to eliminate a systematic bias of some raters and the severe pathology of our patient population.

R. J. van den Bosch:

Obesity: Towards an integrated model

Physiological regulation of the human energy balance appears insufficient in an environment which abounds in palatable food. Human feeding behavior is predominantly controlled by cognitive factors. Behavior and cognitions in the obese are relatively more externally and less internally physiologically controlled, which increases the chance of balance distortion.

Little physical activity and small range of adaption of basal metabolism contribute to difficulties in maintaining normal body weight. Psychiatric deviation is not important in development of obesity, but secondary problems may arise. Weight reduction methods commonly aim at increasing cognitive control. However, a lasting improvement by cognitive and behavior change techniques has not been proved.

Drs. A. Verdonk:

Migration and mental illness

This article is a review of study of several authors dealing with the relation between migration and mental illness. After dealing with problems of defining migration and methods for measuring mental health, we study the admission rates of immigrants to psychiatric hospitals. Authors report conflicting findings. The overall rate of first admission is sometimes higher and sometimes lower for immigrants compared with native people.

The relation between culture and diagnoses has been studied. Topics are: the possibility to apply the Western nosographic system with regard to immigrants and the use of 'culture' as an 'explanation' of mental illness in immigrants. Lastly explanations within the social-psychological or socio-