

OVERSEAS



BULLETIN



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Let's hear from you!

B. K. TAYLOR, *Editor*

"A FORTUNATE MAN — the story of a country doctor"

by JOHN BERGER

*Photography by Jean Mohr. Penguin Paperback Books,
London, 45p*

A book with pictures about a country doctor, when the country is a green out-of-the-way spot in Britain, and the doctor a general practitioner in the National Health Service might not seem to be an appropriate one to review in an overseas newsletter. But this is a remarkable book and if the underlying poetry and philosophy of this imaginative, creative, down-to-earth biography has nothing to say to all of us universally in the helping professions, then I have misunderstood the essence of the matter.

I began by marking passages which seemed to me particularly insightful, and beautifully conveyed. There is not one single word included or out of place, that does not do a specific job in the writing,

and I found that every page merited three or four underlinings. What is it about? It is about the full experience of living, nothing less, and the way in which it lights from within—a state of grace. It is about all the ordinary (?), unremarkable tasks that a country doctor performs everyday.

A handful of “cases” introduces us to the community and its doctor. It places them for us in *their* context. There are passages evoking what we know (and often have forgotten) about the unity of mind, spirit, and body. Although the psycho-somatic elements of this are perhaps culture-bound (in the sense that the doctor’s patients live in a society where one can afford to be concerned with such matters) but soon the fundamental elements appear.

ON RESPONSIBILITY

“He had proved his skill to himself and his ability to take decisions. With this proof came the conviction that those who lived simply, those who were dependent upon him possessed qualities and a secret of living which he lacked. Thus while having authority over them, he could feel he was serving them”.

ON DEATH

“The doctor is the familiar of death. When we call for a doctor we are asking him to cure us and relieve our suffering, but, if he cannot cure us, we are also asking him to witness our dying. The value of the witness is that he has seen so many others die. (This rather than the prayers and the last rites, was also the real value which the priest once had). He is the living intermediary between us and the multitudinous dead. He belongs to us and he belongs to them. And the hard but real comfort which they offer through him is still that of fraternity.”

ON COMMON SENSE

“Common-sense is essentially *static*. It belongs to the ideology, of those who are socially passive, never understanding what or who has made their situation as it is. But it represents only a part—and often a small part—of their character. These same people say or do many things which are an affront to their own common-sense. And when they justify something by saying ‘It’s only common-sense’, this is frequently an apology for denying or betraying some of their deepest feelings or instincts”.

ON TIME

“The sobbing man is not like a child. The child cries to protest, the man cries to himself”.

ON BIG THINGS

“Do his patients deserve the lives they lead or do they deserve better? Are they what they could be or are they suffering continual diminution? Do they ever have the opportunity to develop the

potentialities which he has observed in them at certain moments?"
"... How much right have we to go on being always patient on behalf of others?"

"... he tries to remove a fear without destroying the whole edifice of the morality of which it is a part ..."

"... He is always observant, but in this state of mind he notices far more than he can name or explain. Everything seems significant. And the stimulus of this so speeds up his selection and application of a myriad necessary routine responses and checks that he has time to speculate about what he is doing as he is doing it. He is working creatively".

"But I would suggest that one of the fundamental reasons why so many doctors become cynical and disillusioned is precisely because, when the abstract idealism has worn thin, they are uncertain about the values of the actual lives of the patients they are treating. This is not because they are callous or personally inhuman: it is because they live in and accept a society which is incapable of knowing what a human life is worth".

and so on, and so on, stirring up thinking and feeling and enriching, for it is more than a book; it is an act of human poetry.

DAVID DRUCKER