

DNH:JH

22nd February, 71

Dr. G. Mellor,
 Psychiatric Registrar,
 Parkville Psychiatric Unit,
 35-37 Peplar Road,
PARKVILLE. VIC. 3052.

Dear Graham,

Re: Robert CUMMINGS, aged 16 years.

I would be grateful if you could possibly arrange to see this boy due to the possibility of treatment of his sexual deviations.

He is a practising homosexual with secondary transvestitism. He has a disturbed home background and has been placed in care of the Social Welfare Department at his parents' requests, being in institutions since last August. Apparently relationships with his parents had completely broken down. There is some variance of story into the nature of the home situation, the parents presenting with a picture of a normal family life, Robert as the cause of all home troubles but this situation has been doubted by people who have been in contact with the family and it is felt that perhaps there have been faults on both sides. Whatever the situation Robert has certainly felt rejected for a long time and in the ultimate has finally actually been rejected. During this previous period there have been various incidents of sibling rivalry with his younger sister and brother, acting out behaviour, some degree of school failure in a boy of reported I.Q. of 130 and finally a complete estrangement between the parents and Robert.

The transvestitism started within the past year and he has stolen female undergarments from clotheslines, mainly bras and panties, and wears these articles for the pleasure and sexual arousal they give him. His sexual life has been purely concerned with males, starting with mutual masturbation as a boy and has continued with this sort of behaviour until the past 6 months when he has had several episodes of actual homosexual intercourse. These episodes have taken place at his consent with adult males and in each case he has been the passive partner although he states that he would have liked to have actively participated if he had had the courage to suggest it. He has received pleasure from his homosexuality

2/....

Dr. G. Mellsep.

(2)

22/2/71.

at the time but this is succeeded by feelings of guilt. He has requested treatment in his own words "I don't want to stay like this all of my life".

His personality presents as having a few disturbing features. He is emotionally shallow with a poorly developed a super ego and would be perhaps a doubtful proposition for long term psychotherapy, though he might well provide himself as suitable candidate for someone trying to get a sure 50 sessions.

His motivation is also a bit suspect and when the nature of behaviour therapy was described to him he showed considerable doubt as to whether he wanted this form of treatment, however, he is only 16 and although apprehensive of a life of continued homosexuality, probably has little real insight as to what this actually means and should be amenable to continued help.

I realize there are elements contraindicating therapy but would be grateful if you could see him for assessment and a second opinion. If you do decide he can be helped and that the unit can help him, the Turana authorities are prepared to agree to whatever course of action you think most suitable. He could be discharged to you as a full time patient or, if this is not wanted, could continue on a day patient or outpatient basis.

Many thanks.

Kind regards,

Yours sincerely,



D.J. HIBBS,
Psychiatric Medical Officer,
Turana Clinic.