

# Correspondence

## *Research and the College*

DEAR SIRS

The College has been significantly unsuccessful in fostering research by younger psychiatrists. Indeed the present structure of the training programme and examination requirements almost precludes serious research endeavour by the emphasis and pressure these put on the registrars. I would also assume that the Research Option in lieu of formal examination is seldom used. Major research programmes are financed by the large institutions such as the MRC, Wellcome Trust, and to an increasing and laudable extent, the Mental Health Foundation. Perhaps the College may not be able to influence the general level of psychiatric research in trainees since incentives such as career progress do not, as yet, appear to be influenced, unlike other more competitive specialties, by the necessity to have papers in the scientific literature. It may be up to university departments to foster research in trainees, but as indicated, the competing pressures are against a fruitful outcome.

What then are the options open to the College, assuming some funding is available? In this respect, should not the somewhat excessive profits from the *Journal* be ploughed back into research, since it is on this that the *Journal* depends? It would be inappropriate to compete with the MRC by setting up a research unit. This would be extremely expensive and would lack the flexibility of other schemes. Probably pump-priming exercises are most productive in fostering new research giving the recipient time to prove his or her worth for further funding from other sources. A College fellowship for training in research would prove very prestigious and sought after and would compete with the kudos associated with, for example, the Gaskell Gold Medal. Such fellowships for younger psychiatrists should be open for competition not only in the south east of England but further north, and even over the border!

Perhaps the Research Committee should include junior psychiatrists with knowledge of the problems, and some debate take place through these correspondence columns before decisions are made as to the form that future College strategy should take.

DONALD ECCLESTON

*Royal Victoria Infirmary  
Newcastle upon Tyne*

*The Research Committee replies:*

DEAR SIRS

The College has always maintained the encouragement of psychiatric research of high calibre as a priority. This objective, enshrined in the Charter, was the reason for

establishing the Research Committee of the College. In 1971, the year of inauguration of the College, there were proposals for establishing a College Research Unit. However, with many other demands upon the newly founded College, these plans were temporarily set aside.

With the setting up of the ECT Survey, a research unit was in fact in operation within the College building and many useful lessons for the future were learnt by the working party of the Research Committee which supervised this project. It was realized that if a more substantial project, or more than one project at a time, were to be carried out, there would be a need for more intensive research direction and co-ordination.

With completion of fund-raising for the College premises, the Appeal Committee considered that high priority should be given in a subsequent appeal for fostering psychiatric research, and the Research Committee was approached to recommend appropriate topics for research and ways in which this could be carried out. Whereas existing organizations such as the Medical Research Council and Mental Health Foundation fund research to be carried out in university departments of psychiatry and in psychiatric hospitals, there is a type of research that is peculiarly well-suited to the College which can yield useful information and potentially improve psychiatric practice; such research would include collecting of information from the national and international membership of the College and could be concerned with aspects of practice or the identification of relatively rare conditions from a large-scale survey. The ECT Survey is a good example of such a project that could only have been undertaken by the College, and produced results which have proved beneficial for improving standards of practice.

In 1982, Council of the Royal College of Psychiatrists endorsed the recommendation that the College should have a Research Unit. It is planned that this should use the national and international contacts and membership of the College. This Unit would be a co-ordinating centre for College-based research and would in no way be similar to, nor would it compete with, MRC units. It would not be involved with psychiatric research that could more appropriately be undertaken in university departments or individual hospitals. Approximate costing for such a Unit has been discussed in a working party of the Executive and Finance Committee and would include salary for staff, cost of premises (probably rental), essential office equipment, and access to appropriate computer facilities. The minimum staff would include a senior psychiatrist as Research Director (appointed for a limited period of four to five years), a research scientist, and an administrative secretary. It is envisaged that if several

research projects were to be funded and under way, each project would make some contribution to the funding of the Research Unit superstructure, and the Director would have responsibility for the overall supervision of these projects, although it is likely that he would be the research worker in only one of the projects. Funding for these research projects would be sought from the Appeal, and the equivalent proportion of funding that a university would require for overheads would in this instance go towards the costs of the Research Unit.

The Research Committee welcomes Professor Eccleston's letter and hopes that this will stimulate further debate. We would reassure him that the Committee does include junior psychiatrists. We would welcome the possibility of a College fellowship for training in research, but would point out that to employ a psychiatrist at, for example, senior registrar level for this fellowship would be expensive (perhaps approaching half the cost of the complete Research Unit); it would not necessarily further the type of research that the College alone can undertake. We would, of course, be delighted to see some of the profits of the *Journal* used to support College research.

The Research Committee has been critical of the present Research Option in the MRC Psych Examination for some time and we have made several suggestions for mitigating the deleterious effects of the Examination upon research. There is an increased interest and involvement in small-scale research projects by trainees over the last two to three years, as evidenced by the Trainees' Session at the Annual Meeting, pioneered by the Research Committee. We would consider that allowing some candidates to sit the Membership Examination after two years in psychiatry and only collecting their diploma after evidence of involvement in research had been demonstrated in the third year would redress some of the harmful effects of the Examination upon research. Psychiatric trainees are becoming increasingly aware that research productivity plays an important part in their promotion to senior registrar posts, for which competition is becoming more intense. There is, however, a serious deficiency in the opportunities available because of the present difficulty of pursuing a career in psychiatric research. No solution to this deficiency has yet been found.

A. C. P. SIMS

*Chairman, Research Committee*

*17 Belgrave Square  
London SW1*

### **'U' Approval status**

DEAR SIRS

A recent College Approval Visit on which I was the Trainee Representative, prompts me to write to you. The category recommended by the Panel was 'U', and while I was in complete agreement with this recommendation, I sympathized with the feelings of the local consultants. Their

view seemed to be that without Approval they could not attract good junior staff, without junior staff their vacant consultant post would not be filled, with unfilled posts the demands on the remaining consultants would be such that the service to patients would suffer. This latter point was stressed particularly by one of the GP Vocational Trainers who was very much concerned, not so much as to what would happen to his trainees, but for what would happen to his patients.

It struck me that this must be a reality which other hospitals have faced or, increasingly perhaps in the future, will face. I wondered if the *Bulletin* would be a useful forum in which to discuss the difficulties and, possibly, advantages of being Unapproved for training.

D. L. PATRICIA MARSHALL

*Memorial Hospital  
Darlington*

### ***Closing down the mental hospitals***

DEAR SIRS

Surely Peter Sedgwick (*Bulletin*, February 1983, 7, 22-5) is putting the cart before the horse in blaming Tory politicians for the expulsion of large numbers of chronically ill patients from the mental hospitals?

It is hardly surprising that the politicians, confronted with the choice of (a) keeping the hospitals open at great and ever-increasing cost, and (b) closing them down, should have been attracted to the latter plan, especially as it was put to them that the mental hospital was an anachronism, that closing down these hospitals was quite feasible and would in fact be a great advance from which the patients involved could derive only benefit, and so on. Is he suggesting that left-wing politicians would have decided otherwise in the circumstances?

The decision to run down the mental hospitals was certainly political rather than medical (unlike the reduction of numbers of patients in the infectious diseases hospitals and the tuberculosis sanatoria, which was a direct result of advances in prevention and treatment), but I do not think that one can put the blame on any particular party.

Now that the unfortunate consequences of the policy are increasingly evident, would it not be more constructive to try to repair some of the damage rather than to look for scapegoats?

W. J. STANLEY

*98 Station Road  
Marple, Cheshire*

DEAR SIRS

I read with great interest Peter Sedgwick's article, 'The Fate of Psychiatry in the New Populism' (*Bulletin*, February 1983, 7, 22-5).

To many of us working and planning in the mental health