

Achievements of the Research Committee of the Royal College of Psychiatrists (1971–1985)

ANDREW SIMS, Professor of Psychiatry, St James's University Hospital, Leeds; Chairman, Research Committee

In the Charter of the College, the Research Committee is established as a Standing Committee of Council; thus research has always been seen to be an essential part of the work of the College. The four main roles of the Research Committee are: (a) to help, advise and encourage the membership of the College in carrying out psychiatric research; (b) to advise the Council on the place of all aspects of research in the College; (c) to maintain a dialogue between the College and major potential grant-giving organizations for research, for example, the Medical Research Committee (MRC), the Department of Health and Social Services (DHSS) (both of which send observers to the Research Committee) and larger relevant voluntary organizations; and (d) in some circumstances to be the agent for carrying out research.

Encouragement of researchers

Encouragement of research interest has always been a primary aim of the Research Committee; this is especially directed at advising and enabling trainees in psychiatry to become involved with research, but also to provide a resource for consultants, especially those who are isolated, in research information:

- (1) Research advice is offered by the Research Committee through regular advertisements in the *Bulletin*. Enquiries about research come to the Committee who put the enquirer in touch with someone who can help him, either locally in his area, or appropriately, within the field of research. This scheme is being formalized at the moment with a register maintained by the Research Committee of a panel of experts providing different areas of research expertise.
- (2) 'Hints on Research'—this document, aimed at helping psychiatric trainees, has been made available to clinical tutors and to all members and inceptors on application to the College. A revised edition is now available.
- (3) In co-operation with the Programmes and Meetings Committee, over the last five years there have been increasing opportunities for trainees to make short presentations on research topics at Quarterly and Annual Meetings of the College. The number of submissions for these sessions, and their high quality, has demonstrated the wide extent to which small-scale research is being carried out by trainees all over the country and the rapid development of interest in research.
- (4) The Research Committee has taken a close interest in the research option for the MRCPsych Examination as this is seen as an important area of training. The Research Committee has made proposals for modification, suggesting that the final examination may be taken after two years, but the diploma only awarded after three, with evidence

of psychiatric research having been carried out in the third year.

- (5) Courses in research methods have been organized under the aegis of the Research Committee. These have concentrated on methodologies appropriate to psychiatry, dealing with practical and elementary issues. There is currently discussion concerning further courses, perhaps at a higher level of sophistication.
- (6) The Research Prize of the College, and also local Divisional prizes for research presentations, have further stimulated activity amongst trainees.

An agent for carrying out research

An important part of the work of the Research Committee has been to find ways in which questions addressed to the College from government departments or outside agencies, or alternatively directed to the Research Committee from other parts of the College relating to mental health issues, might be investigated. The College has access to psychiatric hospitals and their staff throughout the British Isles and also in many other parts of the world. The College, therefore, is in a good position to carry out research into rare conditions which only occur in large enough numbers nationally, to survey practice and opinion all over the country, and to produce quantitative data on such matters as working style and career prospects of different groups of psychiatrists.

Completed projects have included: (i) Barbiturate prescribing: psychiatrists' views;¹ (ii) Use of neurosurgery for psychological disorder in the British Isles during 1974–76;² (iii) Electroconvulsive therapy in Great Britain, 1980;³ (iv) Career development study (opportunities for women in psychiatry);⁴ (v) Career opportunities for overseas graduates in psychiatry;⁵ (vi) Suicide and unexpected death in hospital;^{6,7,8,9,10} (vii) Opinion of consultants and senior registrars in child and adolescent psychiatry on the effects of video violence upon children;¹¹ (viii) Electroconvulsive therapy in the Republic of Ireland, 1982.¹²

Plans for future research include: (i) Economic change and family health: a joint project between the Research Committee and the Social and Community Section of the Royal College and the Royal College of General Practitioners;¹³ and (ii) a follow-up of the ECT survey.

Plans for a Research Unit

The increased interest in research by the College, the need for research into various aspects of good practice, the likelihood of involvement in more than one major project at a time and the need for expert research opinion within the College have resulted in the decision by Council to establish a Research Unit.

Plans for funding this and for finding suitable premises for office accommodation, computer and other equipment are currently under discussion.

Representing the needs of research in psychiatry outside the College

The MRC and DHSS both have observers on the Research Committee. There has been frequent contact over the years with the Mental Health Foundation. In preparation for the appeal for the Research Unit short descriptions have been prepared of important areas in research that could be carried out with the collaboration of the College, and we are concerned to show outside bodies how the College can make a contribution to research.

Members of the Research Committee contributed to the book edited by Richter, *Research in Mental Illness*.¹⁴ The Research Committee is regularly asked by the College to comment on documents produced by DHSS and other organizations with relevance to research.

An important function of the Royal College of Psychiatrists has been to encourage and facilitate research. The main thrust of the Research Committee has been to help individual members with their research endeavours. It has also been the intention to emphasize research and research-mindedness within the College, and to represent the needs of psychiatric research to other organizations. Some research has been undertaken directly following the initiatives of the Research Committee.

ACKNOWLEDGEMENTS

The author would like to express his gratitude to the current Research Committee and secretarial staff for help in producing this report.

REFERENCES

¹BARRACLOUGH, B. M. (1976) Barbiturate prescribing: psychiatrists'

views. *British Medical Journal*, *ii*, 927-928.

²BARRACLOUGH, B. M. & MITCHELL-HEGGS, N. A. (1978) Use of neurosurgery for psychological disorder in British Isles during 1974-6. *British Medical Journal*, *ii*, 1591-1593.

³PIPPARD, J. & ELLAM, L. (1981) *Electroconvulsive Treatment in Great Britain, 1981*. London: Gaskell.

⁴WARD, A. W. M. (1984) Psychiatrists who passed the MRCPsych 1975-7. *Health Trends*, *16*, 80-83.

⁵BHATE, S., COX, J. & SAGOVSKY, R. (1985) *Career Survey of Psychiatrists Successful in MRCPsych Examination in November 1981 and April 1982*. Unpublished report to the Royal College of Psychiatrists (to date).

⁶CRAMMER, J. (1984) The special characteristics of suicide in hospital in-patients. *British Journal of Psychiatry*, *145*, 460-463.

⁷LANGLEY, G. E. & BAYATTI, N. N. (1984) Suicides in Exe Vale Hospital, 1972-1981. *British Journal of Psychiatry*, *145*, 463-467.

⁸MORGAN, H. G. & PRIEST, P. (1984) Assessment of suicide risk in psychiatric in-patients. *British Journal of Psychiatry*, *145*, 467-469.

⁹SALMONS, P. H. (1984) Suicide in high buildings. *British Journal of Psychiatry*, *145*, 469-472.

¹⁰SHAW, S. & SIMS, A. C. P. (1984) A survey of unexpected deaths among psychiatric in-patients and ex-patients. *British Journal of Psychiatry*, *145*, 473-476.

¹¹SIMS, A. C. P. & MELVILLE-THOMAS, G. (1985) Appraisal of consultants and senior registrars in child and adolescent psychiatry on their opinion concerning the effects of violent videos upon their patients. In *Video Violence and Children* (ed. G. Barlow). Sevenoaks, Kent: Hodder & Stoughton.

¹²FAHY, T. J. & LATEY, R. H. (1985) *Electroconvulsive Therapy in the Republic of Ireland 1982: A Report to the Irish Division of the Royal College of Psychiatrists*. Galway University Press.

¹³BROWN, A. C., MANN, S. A., SIMS, A. C. P., STANDISH-BARRY, H. M. A. S., PORTER, A. M. D., RUSSELL, I. T. & STANLEY, I. M. (1984) *Economic Change and Family Health: Report of a Joint Working Party*. Unpublished document of Royal College of Psychiatrists and Royal College of General Practitioners.

¹⁴RICHTER, D. (ed) (1984) *Research in Mental Illness*. London: Heinemann.

Board of Examiners, 1985-6

Dr D. Abrahamson; Dr P. M. Ashurst; Dr P. Aungle; Dr M. O. Aveline; Dr S. Benjamin; Dr I. Berg; Dr S. Bhanji; Professor D. J. Bicknell; Dr J. Bird; Dr A. A. Black; Dr S. Bloch; Dr P. Bowden; Professor I. F. Brockington; Dr A. C. Brown; Dr J. Brunning; Dr H. C. Cameron; Dr J. Candy; Dr P. A. Carney; Dr S. A. Checkley; Dr I. D. Chisholm; Dr D. Chiswick; Dr J. R. W. Christie-Brown; Professor A. W. Clare; Dr J. Connolly; Dr A. F. Cooper; Dr J. A. Corbett; Dr J. L. Cox; Dr A. D. Cox; Dr J. L. Crammer; Dr J. C. Cutting; Professor R. J. Daly; Dr R. Davidson; Dr D. M. Dickens; Dr J. H. Dowson; Dr M. T. Duff-Miller; Professor D. Eccleston; Professor J. Griffith Edwards; Dr J. Guy Edwards; Dr H. G. Egdell; Dr M. Y. Ekdawi; Dr A. A. L. El-Sobky; Professor T. J. Fahy; Dr J. D. W. Fisher; Dr M. W. Forth; Dr H. L. Freeman; Dr C. P. L. Freeman; Dr A. H. Fry; Dr R. Gardner; Dr M. J. Gay; Professor P. J. Graham; Dr S. M. Grant; Dr J. S. Grimshaw; Dr G. L. Harrison; Dr B. G. Harwin; Dr M. T. Haslam; Dr G. G. Hay; Dr B. E. H. Heine; Dr L. Hems; Dr R. N. Herrington; Dr J. Higgins; Dr P. D. Hill;

Dr E. Howarth; Dr P. M. Jefferys; Dr T. C. Jerram; Dr J. Johnson; Dr E. C. Johnstone; Dr D. J. Jolley; Dr G. H. Jones; Dr R. G. Jones; Dr J. M. Kellett; Dr P. F. Kennedy; Dr T. A. Kerr; Dr R. Kumar; Dr G. E. Langley; Dr M. W. Leyshon; Professor W. A. Lishman; Dr G. G. Lloyd; Dr I. C. Lodge Patch; Dr J. B. Loudon; Dr W. A. G. MacCallum; Dr A. V. P. Mackay; Dr A. L. MacNeill; Dr S. A. Mann; Dr R. A. Mayou; Dr R. G. McCreadie; Dr J. F. McHarg; Dr E. K. McLean; Dr P. J. Meehan; Dr S. A. Montgomery; Dr R. M. Murray; Dr T. E. Nelson; Dr M. R. Oates; Dr J. B. Pearce; Dr A. S. Powell; Dr M. J. Pritchard; Dr A. H. Reid; Dr E. B. Ritson; Dr K. J. B. Rix; Dr M. A. Ron; Professor R. M. Rosser; Dr P. H. Salmons; Dr D. M. Shaw; Dr A. M. Silverman; Dr A. C. Smith; Dr J. Sneddon; Dr G. F. Spaul; Dr D. A. Stephens; Dr R. S. Stern; Dr E. Stonehill; Dr D. Storer; Dr R. L. Symonds; Dr E. Szabadi; Dr L. Tarlo; Dr P. J. Taylor; Professor D. C. Taylor; Dr R. Thavasoathy; Dr B. K. Toone; Professor A. Wakeling; Dr D. A. Walk; Dr P. Williams.