

The Programmes and Meetings Committee have organised jointly with L'Association des Psychiatres Français a very interesting study tour to Bordeaux in May. I understand that there are still some places available and further details are obtainable from the Registration Desk.

PROF. R. G. PRIEST
Registrar

Resolution

Dr D. Hollander introduced the following Resolution: "We condemn racism everywhere, and in particular the state

institutionalised racism of apartheid in South Africa with its associated gross inequities in the provision of health care, including mental health care; and we urge all members of the College to give every support to the Commonwealth Nassau Accord of October 1985, which agreed upon and commended 'discouragement of all cultural and scientific events except where these contribute towards the ending of apartheid or have no possible role in promoting it.'" The Resolution was seconded by Dr N. Richman and Professor R. Levy. Nine Members participated in the ensuing discussion. The Resolution was put to the vote and carried by a majority (72 to 4).

The Public Image of Psychiatry

The Collegiate Trainees Committee has recently been concerned about the apparently poor public image of psychiatry. At the Trainees Forum in January 1986, Dr Richard Smith from the *British Medical Journal* and Mr David Hencke of *The Guardian* were invited to present their images of psychiatry from the medical and lay media points of view. Anthony Clare, Professor of Psychological Medicine at St Bartholomew's Medical College, was invited to present the psychiatrists' image of themselves and the media.

Dr Smith quoted several studies which showed that medical students saw psychiatrists as weak, emotionally unstable, non-energetic and confused thinkers. These attitudes became more positive after psychiatric clerkship, though this effect did not last. Psychiatrists were seen as least advanced, least expanding and as having the lowest status in the profession in another study of medical students. He felt that the relationship between psychiatrists and non-psychiatrists was not very good. Dr Smith advised that the changes in attitudes could be brought about by random selection of medical students and better exposure to 'bread and butter' psychiatry rather than rare esoteric cases, by better liaison between psychiatry and other medical specialities and by reducing divisions within psychiatry itself.

David Hencke pointed out the dichotomy of exposure of psychiatry between the tabloids and the quality papers. The former portrayed psychiatrists as big softies who could be easily manipulated by any criminal wanting a 'cushy' life in a mental hospital. The quality papers appeared to see psychiatrists as empire-builders spending large sums of money.

The public was often unable to make any clear distinctions between mental handicap and mental illness. People felt that mentally ill patients were generally violent and should not be living near them. He warned of an enormous backlash secondary to the public's perception of poor community care.

Professor Clare questioned psychiatrists' obsession to

examine their image. He felt that the reasons for the poor image were two-fold. Firstly the public's expectations might be too high and psychiatrists might not be able to satisfy these. Secondly psychiatry was still an infant science and could not deliver all its promises. On the positive side, Professor Clare found psychiatry to be more interesting than other specialities and the proportion of medical students finding it so was encouraging and recruitment to psychiatry was not such a problem. The public image of psychiatry had had little effect on recruitment. But the poor image produced poorly informed legislators who in turn affected the practice of psychiatry. From the viewpoint of teaching, he felt that medical students should have more exposure to psychiatry in primary care and the psychological aspects of physical disease. He urged the College to take the lead in informing the public by appointing a Press Officer.

A lively discussion ensued. Dr Smith emphasised that psychiatrists should learn to beat the media at their own game by arguing well and promptly. Professor Clare stated that the image of psychiatry was not totally negative and that psychiatrists had to accept the combination of greatness and charlatanism projected upon them by the public that Freud was said to have and that they might have to struggle to persuade the public of its shortcomings. Dr Bewley, President of the College, pointed out that measurement of any change was difficult in less than three generations. Dr Birley, Dean of the College, added that the issues of stigma concerning mental illness were affecting the normalisation process in the community. Mr Hencke felt that psychiatric patients did not wish to come forward in the community because of this stigma. Professor Clare again stressed the need to communicate with other colleagues and for the College to have a clear voice rather than none or one which came too late.

DINESH BHUGRA
*(on behalf of the fourth
Collegiate Trainees Committee)*