Annual elections – Honorary Officers

Notice to Fellows and Members

Fellows and Members of the College are reminded of their rights in connection with the forthcoming elections for the offices of Dean, Registrar, Treasurer, Editor and Librarian.

All Honorary Officers are eligible for re-election with the exception of Professor Cornelius Katona, who is in his fifth year of office as Dean, and Professor Greg Wilkinson, who is in his tenth year of office as Editor.

The nominating meeting of the Council will be held on 24 January and the last date for receiving nominations will therefore be 21 February. Nomination forms are available from Andrea Woolf. The relevant Bye-laws and Regulations are printed below:

Extracts from the Bye-laws

Section XII – the other Honorary Officers

(1) The Council shall, in accordance with the Regulations, make its nominations for the offices of Dean, Registrar, Treasurer, Editor and Librarian at the first meeting after the name of the President for the next ensuing College year has become known. Written nominations for the above Honorary Officers, accompanied in each case by the nominee’s written consent to stand for election, may also be lodged with the Registrar at such time as may be prescribed by the Regulations, provided that each such nomination is supported in writing by not less than 12 Members of the College who are not members of the Council.

(2) The Dean, Registrar, Treasurer, Editor and Librarian shall be elected from among the Fellows, by the Members of the College, in each case in accordance with the procedure prescribed by the Regulations.

Section XIII – the Dean

(1) The Dean shall be the principal academic officer of the College.

(2) Subject to the Regulations and the directions of the Council of the Court of Electors, the Dean shall have the management of all matters relating to examinations held and prizes or other awards given by the College. The Dean shall further have the management of such other matters, whether of an academic or educational nature, or in the field of research, as may be entrusted to the Dean by the Regulations or by the Council or by the Court of Electors.

(3) The Dean shall hold office as such for a term of not more than 5 consecutive College years.

Section XVI – the Editor

(1) The Editor shall (subject to the directions of the Publications Management Board Committee) have the management of the Journal and be responsible for its day-to-day conduct. The Editor shall be Chairman of the Publications Management Board Committee.

(2) The Editor shall not hold office as such for a term of more than 10 consecutive College years.

Extracts from the Bye-laws

Section XII – Election of the other Honorary Officers

(1) The method of electing the Honorary Officers other than the President, the Vice-Presidents, Sub-Deans and Deputy Registrars shall be the same as that for electing the President*, save that nominations from Members of the College who are not members of the Council shall be lodged with the Registrar between the first day of June in any calendar year and the date which is 4 clear weeks after the meeting of the Council which is the first held after the name of the President for the next ensuing College year has become known.

*That is, written nominations, accompanied in each case by the nominee’s written consent to stand for election, may be lodged with the Registrar, provided that each such nomination is supported in writing by not less than 12 Members of the College who are not members of the Council. An election by ballot shall be held in accordance with the provisions of the Regulations.

An update on the College’s anti-stigma campaign website

http://www.changingminds.co.uk

The College Anti-Stigma Campaign website (http://www.changingminds.co.uk) came of age with the launch of a 4 week long display of 2000 advertisements on London Underground trains, starting 4th July 2002. Figure 1 reveals the immediate impact on the website hit rate, with a five or six-fold increase. During the rest of the month, the rate fell away slightly and settled thereafter at about double the original level – useful information for any would-be advertisers!

In August, the advert also commanded attention on the wide screen at the Notting Hill Carnival. Financial support, such as that generously provided on this occasion by Mr Stelios Haji-Ioannou, Chairman of Easy-Group, is needed again and is still being sought for similar displays elsewhere in the UK. Thus, the present modest hit-rate is still hardly indicative of widespread public awareness of the site. An A4 version of the advertisement is available to members who would like to promote it locally (Contact Liz Cowan, the Campaign Administrator, Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG; tel: 020 7235 2351; e-mail: lcowan@rcpsych.ac.uk).

The website is intended to be the principal legacy of the campaign. It can provide the main engine that continues to drive our message home after the campaign itself has ended in October 2003. It is intended to both inform and empower those who read it and much of the information on it is of an enduring nature. Meanwhile, we are continuing to develop it.

The site contains our declaration of intent, signed by about 3000 members of the College, and also publicly endorsed by

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leading institutions and people, including the current leaders of the three main political parties. To the original collection of seven ‘booklets’, now themselves up on the site, we are adding statements concerning relationships of stigma to suicide, creativity, personality disorder, risk of violence, schizophrenia, drug and alcohol misuse and addiction. There are guidelines to journalists wishing to report on schizophrenia and how, most effectively, to complain about stigmatising and discriminatory media behaviour. The website also provides access to Reading Lights, HEADstuff, Changing Minds: Our Lives and Mental Illness and our poster, indicating how to obtain them. It provides access to ‘Every Family in the Land’, the 200000-word, 80-author, internet and CD-ROM book. It also offers access to Council Report 91, the campaign report generated in collaboration with the British Medical Association, the Royal College of Physicians and in association with the Royal College of General Practitioners, the Royal College of Nursing, service users and the Department of Health, concerning stigmatisations of people with mental illnesses by doctors (Royal College of Psychiatrists, 2001); also, a listing of the hundred or so campaign-related articles published in medical journals over the past 4 years.

We continue to act on the recommendations of Council Report 91. During the past 6 months, the Chief Medical Officer of England and Wales has drawn it to the attention of all medical practitioners in the NHS. Subsequently, the Department of Health has also kindly circulated our précis of the report to all doctors. We are in the process of identifying basic generic competencies in ‘psychiatric’ practice for all doctors, based on the Recommendations on the Training of Specialists (General Medical Council, 1987). The relevant recommendations of this latter statutory document are detailed in Council Report 91. Other Royal Colleges and training bodies, many of whom have welcomed the original report, are now seeking such guidance from us.

Other projects are underway. We have developed a CD-ROM-based educational programme for 13–17-year-olds, which harnesses the stimulating properties of our two campaign videos. One of these, the ‘1 in 4’, 2-minute cinema film, continues to provoke a great deal of comment. Most people are startled and some are even stunned by it. Those under the age of 50 or so often regard it as not only stunning but outstandingly good, as did nearly all the original cinema goers whose opinions were captured! Reactions from older people have sometimes been less positive. Some regard the decaying backdrop and style as additionally stigmatising. We believe that it is important to watch it several times before expressing an opinion. One then begins to understand and respect the symbolism of the background and the underlying sensitivity and intelligence of the script as it and the commentator’s own changing mind take hold. The role of the CD–ROM is intended both as an informing and empowering tool in its own right and as a debriefing instrument in relation to this video.

Meanwhile, a recent controlled study by Professor Helen Cowie, a member of the Child and Adolescent Working Party, within the campaign, has revealed that an educational programme engaging adolescents in their mid-teens has a significant impact in terms of increased knowledge about and sensitivity to those of us with mental health problems.

Many members will be aware of the Campaign Roadshow, which is now engaging with GPs within their postgraduate training programmes in many parts of England and Wales. It usually takes the form of contributions by local users and professionals backed up by relevant literature.

We are also trying to make a contribution to the understanding, not only of how, but also why, people stigmatise others and, in this instance, those with mental illnesses. There has been input from evolutionary biology, cultural anthropology, psychology, sociology and psycho-analysis as well as from psychiatry. This report should appear on the website in the near future.

Other projects, a dozen or more, await funding. So far we have secured about £1 million in one form or another. It is this that has enabled us to do many of the things described above. However,
Russell William Andrew Charles Barton

Formerly Physician Superintendent, Severalls Hospital, Colchester, Essex, and later, inter alia, Director, Rochester Psychiatric Center (USA)

Russell Barton, the maverick Anglo-American psychiatrist who thrived on controversy, died after prolonged cardiac invalidity in June 2002, aged 78.

Barton was endowed with high intelligence and a comparable degree of personal courage. The former is exemplified by his clutch of academic medical qualifications gained in the UK and the USA; the latter by the courage he showed when, as a medical student, regardless of his health and safety, he volunteered to help the surviving skeletal, disease-ridden victims of Belsen, one of the most notorious purpose-built Nazi death camps, when it was liberated at the end of the Second World War.

However, sadly perhaps, at times Barton could exhibit a variety of courage mounting a short-term, but very well-organised, campaign addressing employers, young people and the media. The World Psychiatric Association has a global campaign that specifically addresses the stigmatisation of people with schizophrenia. The World Health Organization (WHO) is taking the matter seriously. At a recent WHO meeting in Europe, we were gratified to be told that our campaign was the most comprehen- sive one on this continent at this present time. If it really is that good, we hope that others will speedily emulate those aspects that are good and build upon them. We hope to survey again, late in 2003 or early in 2004, the opinions of the general population. Providing we can get £30 000 worth of funding, we shall be asking the Office of National Statistics to use the same methodology and the same instruments as before to maximise the opportunities for comparisons: Whatever the findings, they may defy explanation and attribution! But before then I hope that we shall have another opportunity to bring you up to date again with the campaign’s activities during its concluding year. Meanwhile, please do use the booklet, and especially the posters and advertisement whenever you can.

Professor A. H. Crisp  Chairman; Changing Minds Campaign:


Barton’s magnum opus, Institutional Neurosis. Published in 1976, it ran to three editions and was translated into several languages, including Greek.

In essence, Barton’s thesis was that patients incarcerated in mental hospitals without employment or stimulation developed a neurotic condition over and above the psychiatric condition which occasioned their admission. In everyday parlance, he sought to demonstrate the age-old maxim, namely ‘No work is a dangerous occupation’, a maxim as true for the insane as it is for the sane.

It is a fact that while Barton was at the helm at Severalls, the discharges plummeted. But – and here’s the rub – was the dramatic fall due to an active pursuance of Barton’s personal policy, or was it, as is claimed, an expression of genuine therapeutic miracles? The motion was actively, even acrimoniously, debated in the 1963 columns of The Lancet. The arguments for and against make intriguing reading and are strongly recommended.

What is beyond doubt, however, is that Barton’s views were sweet music to the ears of politicians of both major parties and must have provided ammunition for those who advocated closure of the mental hospitals in favour of ‘community care’.

The wisdom of the decision is still being debated and one wonders, if it ever came to a vote, how Barton would cast his in the light of today’s experience, both here and in the USA.

Russell Barton leaves a widow, two daughters and many friends on both sides of the Atlantic.

Henry Rollin

seeking funds remains a challenging and time-consuming activity. Henceforth, wherever we can secure adequate funding, it will be possible to initiate or continue with these projects after the campaign itself has ended. They, along with the website, will be adopted by the College’s Department of External Affairs and, hopefully, provide increasingly firm foundations for the College in this clinical and political arena.

Our tendency is to stigmatise, whenever we experience fear, communication and empathy difficulties and related unpredictability in others. It is too ingrained to be kept readily in check. The tasks of alerting, informing and empowering us all will, therefore, continue. Have we made any impact so far? The campaign has been welcomed by many people and organisations. It has not been the only campaign. For instance, the Department of Health is currently actively, even acrimoniously, debating whether it should employ the website, will be adopted by the College’s Department of External Affairs and, hopefully, provide increasingly firm foundations for the College in this clinical and political arena.

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