It is with great sadness that we write to inform you of the recent deaths of two eminent colleagues – Dr John Hope Henderson (1929–2010) from Edinburgh, former member of the editorial board of the African Journal of Psychiatry, USA, Greece, UK, Canada, Iran, and President of the European Council of the World Federation of Mental Health and a registered in England and Wales (228636) and responsible for any error of omission or fact. For copyright enquiries, please contact the Design © The Royal College of Psychiatrists. Subscriptions International Psychiatry is published four times a year. For subscriptions non-members of the College should contact Publications Subscriptions Department, Maney Publishing, Suite 1C, Joseph’s Well, Hanover Walk, Leeds LS3 1AB, UK, tel. +44 (0)113 243 2800, fax +44 (0)113 386 8178, email subscriptions@maney.co.uk For subscriptions in North America please contact Maney Publishing North America, 875 Massachusetts Avenue, 7th Floor, Cambridge, MA 02139, USA, tel. 888 297 1514 (toll free); fax 617 354 6875, email maney@maneyusa.com Annual subscription rates for 2010 (four issues, post free) are £28.00 (US$55.00). Single issues are £8.00 (US$14.40), post free. Design © The Royal College of Psychiatrists 2010. For copyright enquiries, please contact the Director of Publications and Website, Royal College of Psychiatrists. All rights reserved. No part of this publication may be reproduced or reprinted in any form or by any electronic, mechanical or other means, now known or hereafter invented, including photocopying and recording, or in any information storage or retrieval system, without permission in writing from the publishers. The views presented in this publication do not necessarily reflect those of the Royal College of Psychiatrists, and the publishers are not responsible for any error of omission or fact. The Royal College of Psychiatrists is a charity registered in England and Wales (228636) and in Scotland (SC038349). International Psychiatry was originally published as (and sub-titled) the Bulletin of International Affairs of the Royal College of Psychiatrists. Printed in the UK by Henry Ling Limited at the Dorset Press, Dorchester DT1 1HD. **The paper used in this publication meets the minimum requirements for the American National Standard for Information Sciences – Permanence of Paper for Printed Library Materials, ANSI Z39.48-1984. Notice to contributors International Psychiatry publishes original and scientific articles, country profiles and points of view, dealing with the policy and promotion of mental health, the administration and management of mental health services, and training in psychiatry around the world. Correspondence as well as items for the news and notes column will also be considered for publication. Manuscripts for publication must be submitted electronically to the Editor (ghohdas@nshms.ac.ir), with a copy sent to the Secretariat (ip@rcpsych.ac.ir). The maximum length for papers is 1500 words; correspondence should not be longer than 500 words. The Harvard system of referencing should be used. A declaration of interest must be given and should list fees and grants from, employment by, consultancy for, shared ownership in, or any close relationship with, any organisation whose interests, financial or otherwise, may be affected by the publication of your submission. This pertains to all the authors. Manuscripts accepted for publication are copy-edited to improve readability and to ensure conformity with house style. Contributions are accepted for publication on the condition that their substance has not been published or submitted elsewhere.

About our peer-review process All articles submitted as ‘original papers’ will be peer-reviewed to ensure that their content, length and structure are appropriate for the journal. Although not all papers will be accepted for publication, our peer-review process is intended to assist our authors in producing articles for worldwide dissemination. Whoever possible, our expert panel of assessors will help authors to improve their papers to maximise their impact when published.

Mission of International Psychiatry The journal is intended primarily as a platform for authors from low- and middle-income countries, some writing in partnership with colleagues elsewhere. Submissions from authors from International Divisions of the Royal College of Psychiatrists are particularly encouraged.

Discussion focused around professional standards, quality and content of training and service development, and highlighted common interests and goals faced by professional organisations in Europe as well as the differences shaped by national economic, political and social contexts. Dr Mujen led on the relationship between the WHO and various organisations. The participants recognised the need for a Europe-wide effective body with clear terms of reference and resources adequate for the mandate. The group felt that liaison with key stakeholders in Europe needs to be improved. It was agreed that an informal forum initially would be very helpful and the right way forward. A cautious and measured approach to further collaborative work was accepted and discussions will continue at forthcoming meetings in Berlin (2010) and Amsterdam (2011).

College visit to Bangalore, India In March 2010 the College officers were invited by the National Institute of Mental Health and Neurosciences (NIMHANS) in Bangalore to a 2-day conference where, in a prelude to International Women’s Day, the President gave an illustrated talk entitled ‘The mind of a woman: portrayal in Bollywood’, which emphasised the importance of accurate and responsible portrayal of mental illness in film.

Sirs: As a psychiatric trainee I had the opportunity to appear for the Clinical Assessment of Skills and Competencies examination (CASC) as an exit exam towards MRCPsych. In a letter published in the April 2010 issue of International Psychiatry (volume 7, number 2, p. 51) authors Joan Hinson and David J. Lynskey say that they were impressed by the efficiency and economy of the design and implementation. The purpose of the present letter is to raise some of the concerns candidates have.

In the examination we never know what is expected of us to pass a certain station, as it is a double-blind procedure where we do not know what is in the patient’s script and neither do we know what weight is attached to each task. We do not know what is in the patient’s script and neither do we know what weight is attached to each task as it is a double-blind procedure. How would I know what it was like? It is entirely up to the individual examiner to differentiate pass grades: ‘A’, which means a candidate displayed ‘clear, adequate and unsystematic approaches. Over the past 2 years, pass rates have been around only 30%, which in itself raises questions about the appropriateness of the CASC examination. There is a sense of mistrust, as the College does not mention on its website the relevance of seeing patients in 7–10 minutes or how the pass mark of 12 out of 16 stations was derived.

There is no record of the candidate’s performance at CASC, so we really cannot comment on what we are not satisfied. If we fail, we get utterly unhelpful feedback. For example, such feedback might say either that there was concern or that there was no concern. Skills like ‘fluency’ or ‘analysis and synthesis of opinion’ or ‘task of focus on the task’ are not quantifiable. How would I know what it was in my performance that the candidate think that my analysis and synthesis of opinion were weak?

Lastly, it was stated in the letter that the CASC examination is economic, but this is not true. Over the past few years the examination fee has been raised consistently, to the point where it now costs as much as a third of our monthly salary, excluding accommodation and travel expenses. I would say that the reliability of this examination is questionable and in statistical terms the percentage pass reflects chance only.

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