



suspect that the drop-out rates decrease exponentially throughout training and would welcome efforts to monitor why trainees leave before attempting MRCPsych Part I.

Unless we answer these questions quickly we all continue to face the prospect of working in understaffed departments in the future.

## Reference

HARVEY, J., DAVISON, H., WINSLAND, J., et al (1998) *Don't Waste Doctors – A Report on Wastage, Recruitment and Retention of Doctors in the North West*. NHS Executive.

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## Flexible training in psychiatry

Sir: Three recent papers highlighted issues relating to flexible training (*Psychiatric*

*Bulletin*, October 1999, **23**, 610–612, 613–615, 616–618). The term 'flexible training' implies flexibility, which does not exist, although colleagues may assume it does. Timetables and posts are agreed with the College to ensure that training is equivalent to that undertaken by full-time trainees. Flexible trainees are comparable in calibre and undertake comparable training to full-time trainees (*Psychiatric Bulletin*, October 1999, **23**, 616–618). They have considerable experience, both medical and non-medical, which they bring to their work. Despite this there is a perception that flexible trainees have lower status than full-time trainees.

Most flexible trainees are female and have domestic commitments. Those regarding flexible training as inadequate are mainly male. Is this perceived lower status simply a result of the gender difference? Another explanation may lie in "the machismo of medicine" (Dinniss, 1999). Within medicine, difficult working conditions, long hours and traumatic situations are expected and

dealt with by machismo rather than other coping strategies. Doctors who work fewer hours are not subjecting themselves to the same quantity of this burden as their full-time colleagues and so are not regarded as equal to them.

Flexible training is in reality part-time training, that is less work for less money, taking longer to complete. This training is no more flexible than full-time training. A change in the terminology to part-time training would remove some of the myths that surround flexible training.

## Reference

DINNISS, S. (1999) The machismo of medicine. *British Medical Journal*, **319**, 929.

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# the college

## The Royal College of Psychiatrists Winter Business Meeting

4.30 pm, 31 January 2000, to be held at the Royal College of Psychiatrists. The President, Professor John Cox, in the Chair

1. To approve the minutes of the previous Winter Meeting held at the Royal College of Psychiatrists on 3 February 1999.
2. Obituaries.
3. Election of Honorary Fellows.

## The Right Honourable Sir Stephen Brown, PC

Sir Stephen Brown is the most distinguished family judge of our generation. He has, by initiating and seeing through a 'wind of change' in liaison between psychiatry and family law, established himself as our foremost reforming judge in cases with a mental health component. His unique contribution has been the humane understanding of litigants, particularly when deciding on dilemmas, of patients in a persistent vegetative state or in complex dysfunctional family cases, and in those having an international dimen-

sion. By example, Sir Stephen has realised his vision of 'working together' by medicine and the law which has greatly improved the informed wisdom of the courts' decision-making. As President of the Family Division since 1988, Sir Stephen initiated a sea-change in the standing of family law, and he has only recently demitted this important office. Innovations which he spearheaded have been consolidated, and by his example of openness and accessibility, the culture of all lawyers, doctors and other professionals who come into contact with family law, has become a model of interdisciplinary good practice admired by lawyers internationally. Sir Stephen's leadership, influence and encouragement to lawyers and doctors (especially psychiatrists) have increased evidence-based decision-making, fostered research and led to high quality training for all levels of the judiciary. This pivotal contribution from one of our most eminent judges has secured interdisciplinary cooperation between lawyers and mental health professionals as an established part of legal decision-making.

## Dr Robert Kendell, CBE

Bob Kendell has just ended his term of office as President of the Royal College of Psychiatrists. His presidency has been the culmination of a distinguished academic career, combining intellectual brilliance,

teaching skills – which have clarified areas of psychiatry for trainees over the last 30 years – and astute managerial skills in organising the College and its Committees. He graduated from Peterhouse College, Cambridge, followed by King's College Hospital Medical School obtaining academic distinction in Natural Sciences and Surgery and went on to achieve a distinction in the DPM, followed by the Gaskell Gold Medal in 1967. Thereafter, he worked at the Institute of Psychiatry and University of Vermont, before taking up his post as Professor of Psychiatry at the University of Edinburgh in 1974. He was Dean of the Medical Faculty from 1986–1990. During his term in Edinburgh he became an international expert on psychiatric epidemiology in relation particularly to diagnosis and classification of schizophrenia, affective disorders and post-natal psychiatric illness. He has written almost 100 papers and chapters in books, as well as being co-author of the *Companion to Psychiatric Studies* (Johnstone et al, 1998), which has become something of a bible for trainee psychiatrists. Following a spell as Chief Medical Officer in Scotland, during a time when there were many and difficult changes in the NHS, he returned to psychiatry to become President of the Royal College. His presidency will be remembered for his incisive intellect that has allowed him to successfully challenge politicians and administrators, particularly in the field of Mental Health legislation. In



the course of his career he has made an enormous contribution to the research agenda, to teaching and encouraging young psychiatrists and to increasing the profile of the College. It is certain that he will continue to make major contributions to international psychiatry in his work with the World Health Organization and in his review of College links with other countries throughout the world.

### Professor Israel Kolvin

Professor Issy Kolvin is one of the most eminent child and adolescent psychiatrists of his generation in Britain. After initial training in South Africa, Professor Kolvin quickly established himself as a leader in his field; during his first consultant appointment in Newcastle, his research on cycles of deprivation in families in the north-east became – and remains – a classic. Indeed, his research activities have gained him an international reputation, and the results of the Newcastle study have been of considerable importance in the way in which the pattern of mental health services to children has developed. He moved in 1990 to the post of John Bowlby Foundation Professor of Child and Family Mental Health, and his enormous influence on the development of child and adolescent psychiatry is apparent not only in Britain but in many other parts of the world. Professor Kolvin has also published on a wide range of other topics, including epidemiological studies on the effects of deprivation and disadvantage, speech and language disorders, enuresis, temperament and the psychoses of childhood. He has always held a strong ethical position on behalf of his patients, and all under-privileged people, and has been a major influence upon the thinking of the generation of psychiatrists who followed him. Professor Kolvin has also made a highly significant contribution to the College, most conspicuously in his Chairmanship of the Child and Adolescent Faculty, Vice-Presidency and, over recent years, as Treasurer, a role from which he has only recently retired.

### Professor Juan Lopez-Ibor Alino

Professor Juan Lopez-Ibor occupies the leading Chair of Psychiatry in Spain at the Complutense University in Madrid. The World Health Organization have established a research and training centre for Spain at San Carlos Hospital and Dr Lopez-Ibor has been its Director since it was created. He is generally recognised as the most eminent clinical psychiatrist in Spain, and has also made significant contributions to research with his studies of anxiety disorders and psychosomatic medicine. As Secretary-General of the

World Health Organization, Professor Lopez-Ibor has made important contributions towards unifying the organisation and enhancing its policies, and has succeeded Professor Norman Sartorius as President of the World Psychiatric Association. Professor Lopez-Ibor is highly respected in European psychiatry, regularly participates in scientific meetings and has an influential voice in the activities of the Association. He is fluent in many languages including English, French, German, Italian and Catalan. His duties as Secretary-General entail frequent visits to many parts of the world; he has a particular attachment to the UK and British psychiatry, and could play an important role in developing the relationships which already exist between the College and psychiatrists in the European Community. Professor Lopez-Ibor has an extensive list of publications, and is a man of great energy and dynamism whose philosophical approach to psychiatry encompasses its biological, psychodynamic and social dimensions.

### Professor Toma Tomov

Professor Tomov is the leader of the psychiatric reform movement in Eastern Europe, not only in his native Bulgaria, but also in countries of the former Soviet Union. He has considerable international experience, making many collaborative links with the West, including the UK, and with Africa. He worked for five years as the World Health Organization Consultant for the Tanzanian Mental Health Programme (and more recently as coordinator of a World Health Organization Collaborating Centre in Sofia). Professor Tomov is particularly valued as an inspiring trainer of all sorts of mental health professionals, and he has concentrated upon those aspects of training which were neglected during the Soviet times – in particular, various types of psychotherapy and 'active learning' for students. He has been an influential member of the Geneva Initiative on Psychiatry's 'Group of Reformers in Psychiatry' which first met in 1993 and now has some 400 members. Professor Tomov has been the leader of three important programmes: (a) the Attitudes and Needs Programme, where six centres are assessing the attitudes of psychiatrists towards the mentally ill and their treatment, and are learning to plan services based on the needs of the population; (b) training a group of young mental health professionals to devise community-based services for the seriously mentally ill; and (c) a training programme for psychiatric nurses – the first in the former Soviet Union. In 1998, the Group of Reformers set up a formal organisation, the Association of Reformers in Psychiatry (ARP) and, at its first

election, Professor Tomov was elected President. Many members of the College, and UK-based nurses have been involved in the Geneva Initiative on Psychiatry which will continue to support the ARP for many years to come.

4. Report of the Registrar.
5. Resolutions (if any).

### Reference

JOHNSTONE, E. C., FREEMAN, C. P. L. & ZEALLEY, A. K. (eds) (1998) *Companion to Psychiatric Studies*, (eds R. E. Kendell & A. K. Zealley). Edinburgh: Churchill Livingstone.

### Belgrave Square in the 20th century – the first 50 years

At the beginning of the 20th century, 17 Belgrave Square was lived in by Pandeli Ralli, who, like the Royal College of Psychiatrists 100 years later, was already a long-standing tenant. At this time most of the houses in the Square were occupied by private tenants and their domestic staff, with the coachmen, grooms and their families living in the mews houses at the rear. As the 20th century went on this changed, and by the 1990s most of the tenants were companies or organisations. The Voters' list shows that there are very few private individuals living here and the names of occupiers displayed at the entrances to buildings indicate that some have three or more organisations as tenants. Number 17 is one of the few that has a single occupier.

Pandeli Ralli, who was born in Marseilles, was a British subject whose family had come to England from the Greek island of Scio in the early 1800s. He became an MP and it is said that his house was used by Lord Kitchener as a social headquarters during the First World War. His family, who were very wealthy, helped finance the Greek struggle for independence from Turkey. He died in 1928, having been a tenant of Number 17 for about 60 years.

The next tenant was Leontine, Lady Sassoon. She too had overseas connections, for her husband's family, the Sassoons, came originally from Baghdad. She lived here from 1929 until 1942 and, like Pandeli Ralli and Lord Kitchener during the previous war, kept an open house for the troops during the Second World War. During that war, part of the property was used as a supply depot for the Red Cross. Lady Leontine left in 1942 but retained the tenancy until she died, aged over 90, in 1955.

Examples can be found in 20th century novels of Belgrave Square as an area where the wealthy lived. A couple