



columns

contemporary practice and attitudes need to be changed. There are many constructive recommendations that would assist in fulfilling National Service Framework objectives.

Though the views expressed are those of psychologists, there is much that many psychiatrists would agree with and indeed a lot of the research quoted is that of psychiatrists'. We would have welcomed a review that encouraged our members to take much more seriously what well-respected colleagues in psychology are saying.

We will take just one area that the BPS report focuses on – family interventions. These were pioneered at places such as the Maudsley Hospital more than two decades ago and have consistently been found to have a power at least equivalent to medication in reducing the relapse rates that understandably burden Persaud (the reviewer) and so many general psychiatrists (not forgetting the patients and families themselves). Yet we understand that it is rare for a Maudsley trained psychiatrist to have been routinely trained in these methods, whereas we are sure that they are experts at the latest medications. We found it worrying that Persaud does not have the experience of working with a psychologist in an acute or early intervention service and seems unaware of parts of this country and other countries where psychologists are key members of teams running acute services along the lines recommended by the BPS, and getting improved results.

Our reading of the report is that psychologists are not suggesting that they run services without doctors and medication – as Persaud rather mischievously suggests – but in partnership. We would encourage College members to read the review and wherever possible form better relationships with well-trained psychologists, many of whom have a great deal to contribute to modern psychosis services.

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Special interest sessions: some thoughts

Sir: The correspondence from McIntosh (*Psychiatric Bulletin*, January 2002, **26**, 37) on the use of her special interest sessions for a placement in public health was a welcome sight for specialist registrars such as myself because unless a training scheme has special interest sessions already established, this is often left to our imagination and resourcefulness, so one is grateful for any inspiration.

A recent study (Stephenson & Puffett, *Psychiatric Bulletin*, May 2000, **124**, 187–188) revealed that some trainees have real problems in knowing what to do about these sessions. Something along the lines of an internet database of pooled experiences might be valuable and I would be happy to be contacted by any interested parties.

Finally, we also need to be aware that placements outside of our employing trusts may not be covered either by trust indemnity or by our defence organisations, and it may be necessary to negotiate a contract with the trust our sessions are with.

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the college

Art at Belgrave Square

Art at Belgrave Square – paintings by psychiatrists and people who have suffered mental health problems – is part of Mind Odyssey.

The College is very grateful to Henry Boxer, Director of the Henry Boxer Gallery, London, for the loan of a painting from his renowned collection of 'Outsider and Visionary' art. The painting *Inside Banstead Hospital* by Rosemary Carson, a service user, will be exhibited in the College from 10 May to 10 June 2002.

Rosemary Carson (b 1952)

Since the age of 6, Carson has occasionally experienced the sensation of maggots moving in her body. She describes her childhood as rather unhappy and attempted suicide at the age of 15. Since then she has spent periods in psychiatric care and her treatment has included drug

and electric therapies. Her work featured in the exhibition *Private Worlds – Outsider and Visionary Art* at the Orleans House Gallery, Twickenham, last year. The Wellcome Trust has recently acquired one of her paintings for its permanent collection.

Painting has long been important to Carson but never more so after she became ill again in 1996 when she started hearing voices. She spontaneously began to paint faces that she subsequently recognised as fellow patients from her earlier stays in psychiatric hospitals. This brought back memories. The need to capture these memories was reinforced by the urgings of the 'underlings' (spirits of dead patients), so called because they speak to her under the voices of others. Mostly they encourage her in her work, but sometimes they become frightening and destructive. At these times, she enters a local psychiatric unit until she feels able to return to painting in safety.

Changing Minds Campaign roadshow breakfast briefing

Stigma Alert

Tuesday 25 June 2002

We would like to invite you to a breakfast briefing at St Fagan's and Penarth Suite, Jury's Hotel, Cardiff, 8.00–9.30 a.m. (including a complimentary full Welsh breakfast), to hear about the work of the Changing Minds Campaign, and in particular Stigma Alert.

Stigma Alert is an initiative, funded by Jansse-Cilag, that takes the messages of the Changing Minds Campaign to primary health care teams, in particular general practitioners (GPs), throughout the UK.

Please come along to what should be a fascinating breakfast briefing. We need your help to promote the campaign locally. This will be the only opportunity that Members will have at this year's