

SOUTH ASIAN INTERNATIONAL DIVISION NEWSLETTER

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From the Division Office desk:

Welcome to the second newsletter of the South Asian International Division of the RCPsych. In this edition we present the inspirational work by Prof Wig and Dr Latif. We also have all our regular features including a movie review by Dr Harbishettar. We are introducing a new section (the 'e-interview') where we aim to hear from members who reside in the South Asian Division. We have featured Dr Venugopal Duddu whose work has created huge waves in the Indian media recently.

We are honoured to present an abstract from Prof. R. Srinivasa Murthy's moving lecture on Prof. N.N. Wig, delivered at the Royal College of Psychiatrists. This was the Royal College of Psychiatrists' prestigious invited Presidents lecture. Prof Murthy summarises the inspirational work and life of Prof. Wig. It is a truly motivating read. Prof. Murthy's brief introduction is in itself a stimulating read.

We also pleased to present Dr Shahid Latif's work to promote mental health training in Pakistan. His ongoing work in teaching and training is motivational to all budding mentors.

For the first time this year, the South Asian Division introduced a bursary for psychiatry trainees to support an international trainee to attend the annual International congress. The division office is proud to announce Dr. Himanshu Mansharamani as the winner of the 2019 College Bursary for poster presentation at the International Conference to be held in London in July this year. Dr. Mansharamani is a senior resident at the Jawaharlal Nehru Medical College, Maharashtra, India. He is presenting a paper on "Psychiatric Morbidities in Children of Alcoholic Parents – A Study from Rural India".

We regret to say that we could not select more. The quality of applications for the bursary was very high and it was an arduous task to select just one. We had a total of twenty-one applications which came from across India, Bangladesh and Nepal.

Dr Deshpande and I will be going to the RCPsych International Conference in July and we look forward to meeting some of you there in the South Asian Division business meeting. We continue to look to improve the function of the division for the benefit of its members. We would love to hear from all of you about ideas and suggestions.

We hope you enjoy this newsletter. We are looking for articles for our future editions and would love to receive them from all of you.

Dr Divya Ganesh Nallur, Vice- Chair

West-to-East: Highlights of activities undertaken by the division members or by other members in South Asia

In this edition of West-to-East, we are delighted to present an abstract from the recent prestigious RCPsych Presidents' lecture. Prof. N.N. Wig's career and his professional contributions was the subject of the 'Prof. Narendranath N Wig Lecture' on February 13, 2019 at the Royal College of Psychiatry, London, co-hosted with the British Indian Psychiatric Association (BIPA), UK. Prof. R. Srinivasa Murthy, Professor of Psychiatry (retd) of National Institute of Mental Health and Neurosciences, Bangalore, India delivered the lecture.

Prof. Narendra Nath Wig- 'Breaking barriers' towards 'mental health for all'.

Abstract

Prof. Wig (1930-2018) has played a pivotal role in the mental health developments in India and other developing countries. One single theme that describes his life's work is, 'breaking barriers' to make mental health reach common people. First of the barriers he broke, at the beginning of his career, was shifting mental health care from mental hospitals to the general hospital psychiatry units as centres for mental health care. The second barrier he broke was to move from 'clinics to community'- the Community Mental Health Movement. Third barrier he broke was the development of Indian psychological tools for clinical assessment. Following retirement, he moved to next level of reaching to the general population by both giving his services free of cost and through public mental health education (1).



Introduction

The last seven decades of psychiatry in India, from the 1950 to 2019, represents the history of Indian psychiatry in Independent India. Starting with a handful of trained professionals and almost no centre for training of mental health professionals and very limited mental health services, during the seven decades, the country has a National Mental Health Programme (NMHP) formulated in 1982, a Mental Health Care Act (2017), Rights of Persons with Disabilities Act (2017), National Trust Act (1999), improvement of mental hospitals, a vibrant private sector psychiatry and wide range of voluntary organisations working with mental health issues. Prof. Wig, along with other leaders like Prof. M.V. Govindaswamy, Prof. N.S. Surya, Prof. K.C. Dube, Prof. J. S. Neki, Prof. A. Venkoba Rao, Prof. N.S. Vahia, Prof. B. B. Sethi, Prof. V.N. Bagadia, Prof. K. Bhaskaran, Prof. R. L. Kapur, Prof. Sharada Menon, Prof. Abraham Verghese, Prof. D.N. Nandi, Prof. Ajita Chakraborty (this list is representative and not comprehensive list of all leaders), have provided leadership in many ways to bring about the above changes.

Career

Prof. Wig was born on October 1, 1930, in undivided India, in what is now Pakistan. He completed his undergraduate and postgraduate medical education (medicine) from Lucknow. Following this, he trained in psychiatry at a number of centres in U.K. USA, and India. Following this, he started the Department of Psychiatry at the Postgraduate Institute of Medical Education and Research, Chandigarh in 1963. In 1976, the Department got international recognition as WHO Collaborating Centre for Training and Research in Mental Health. In 1980, Professor Wig moved to All India Institute of Medical Sciences, New Delhi. In 1984, he joined World Health Organisation as the Regional Advisor for Mental Health and remained at Alexandria, Egypt, till 1992. In this capacity, he was responsible for developing mental health programmes in 22 countries, from Pakistan to Morocco in the Middle East and North Africa. Following retirement, in 1992, he devoted part of his time to provide free psychiatric care at the Lajpat Bhavan, Chandigarh and towards public mental health education.

In recognition of national and international contributions of Prof. Wig, the Royal College of Psychiatrists, London conferred on him the unique honour of the Honorary Fellowship of the College. He is the first Indian psychiatrist to receive this honour.

To summarise such a vast amount of contributions, I am sharing details of '**four barriers he broke**' to make a difference to mental health situation in India and other developing countries.

Reviewing the professional contributions of Prof. Wig is a challenging task (2,3). His research contributions are significant in a wide range of subjects (from classification, phenomenology, general hospital psychiatry, family planning, community psychiatry, drug dependence, psychological toll development, religion and mental health and public mental health education). About 10 years back, on his completing 70 years, while editing the book of essays in his honour, I was impressed both by his contributions as well as the pioneering nature of many of his initiatives (3).

1. General Hospital Psychiatry

In late 1950's and early 1960's, the country was building more psychiatric hospitals. The setting up of one of the early units of general hospital psychiatry (GHPU) in the country was his passion. He viewed the movement of psychiatry outside the confines of the mental hospitals as essential for the development of mental health services in the country. Initially he started the psychiatric unit at K.G. Medical College, Lucknow in the late 1950's and in 1963 at PGIMER, Chandigarh. He demonstrated the value of the GHPU in a number of ways. First of these is the demonstration of the feasibility of providing mental health care in a general hospital setting and the characteristics of the patients seeking care and their treatment utilisation patterns. Secondly, he demonstrated the importance of psychiatry to medicine and surgery through research in matters of body and mind. Following his move to AIIMS, New Delhi, he continued research on issues of the prevalence of mental disorders in general medical wards and the different aspects of psychiatric problems of emergency room.

2. Community Mental Health

The most important contribution of Prof. Wig is the leadership he provided for community mental health movement in India and other developing countries. This contribution is important as it was the most important need of the country in the 1970's, as it occurred at a time in India in which there were only about 500 psychiatrists and it required taking professional positions often not supported by others in the profession. PGIMER, Chandigarh was one of the 7 centres of the WHO multicentric project 'Strategies For Extending Mental health Care' (1975 -1982). Prof. Wig led the team to a series of efforts to understand the needs of the mentally ill persons in the rural areas and measures to address the unmet mental health needs in the rural population. The setting up of a rural psychiatric clinic, village level surveys to understand the unmet psychiatric needs of the rural population led to the realisation that the way to provide mental health care to the rural population is through integration of mental health care with primary health care. I was privileged to be a partner of these initiatives.

It is significant that this body of research, along with that from NIMHANS, Bangalore under the leadership of Prof. R. L. Kapur contributed to the formulation of the NMHP in August 1982. The formulation of the NMHP, the passion with which Prof. Wig pursued the essence of his thoughts is presented in Box 1. The current state of NMHP with extensive coverage of the district mental health programme, measures to increase the human resources for mental health care, the school mental health programmes, the suicide prevention and massive increase in the funding testify to the vision of Prof. Wig. The same will be his most enduring legacy.

Box 1: Vision of Mental Health by the year 2020, envisaged in 2000

1. To make the benefits of modern psychiatry available to all sections of the population, rich and poor, urban and rural, men and women.
2. To combine both the biomedical and psychosocial approaches in psychiatric practice.
3. To effectively utilize emerging technologies to solve our national problems.
4. To make psychiatry more relevant for Indian cultural needs.
5. To keep a balance between psychiatry and mental health.

3. Psychological assessment tools

In psychiatry of the 1960's and 70's, there were very limited number of psychological assessment tools and it was also the period of the launch of the General Health Questionnaire by Prof. David Goldberg which was making waves in the psychiatric research circles. Prof. Wig recognised the need to develop Indian tools for psychological evaluation. The team of Dr.S.K.Verma, Dr.Dwarka Pershad and later Dr.D.K. Menon addressed this need by the nearly two decades of efforts. PGI Health Questionnaire and PGI Memory Scale and other tools are lasting contributions to Indian psychiatry.

4. Public mental health education

Prof. Wig, following his visit to war torn Iran, as a W.H.O. staff from Alexandria, in 1988, recognised the need for mental health to be a 'people's movement'. The statement of Prof. Wig '**Mental Health is too important to be limited to mental health professionals**' typifies his belief that mental health is relevant to all and everyone can be part of the mental health movement. (4)

Public mental health education has been an area of special interest of Prof. Wig. He started writing for the common man early in his career. The recently published book '**The Joy of mental health**' is a compilation of popular writing on over a dozen topics. His ability, both in one to one situation, meetings and in writings, to simplify mental health is very special.

I would like to **summarise** the lifetime contributions of Prof. Wig, under four themes.

Firstly, his commitment to Indian psychiatry expressed through his initiatives in the areas of NMHP, family planning, community mental health, development of psychological testing tools and interpretation of Indian concepts to the rest of world. Secondly, he was an internationally recognised and respected researcher, collaborator with many leaders in world psychiatry and a spokesperson for developing countries. Thirdly, most importantly, he was ahead of his time in thinking of the importance of classification, recognising the value of Indian studies to understand the nature and the course and outcome of mental disorders. Fourthly, he was very skilled in building leaders for mental health and invested a lot of his personal and professional efforts to identify the strengths of his colleagues and students and support them to achieve their full potential.

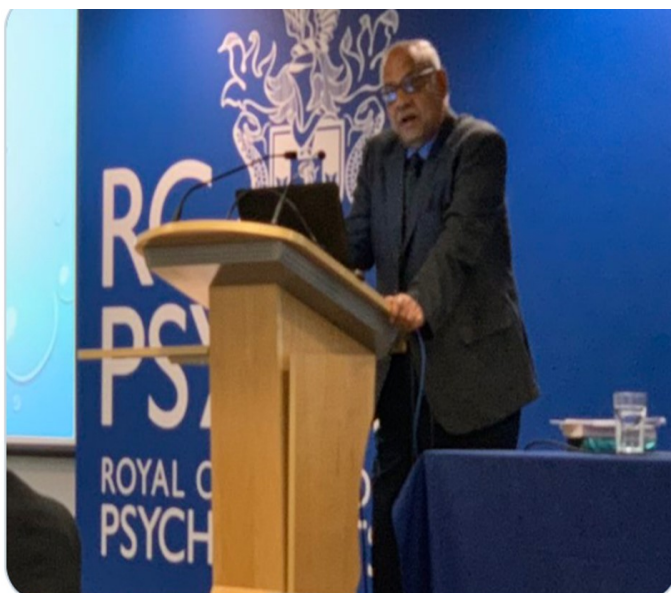
At a personal level, I want to acknowledge the continuous support and guidance of Prof. Wig, that has been a vital part of my professional life. He was my mentor.

R.Srinivasa Murthy,

Professor of Psychiatry (Retd)

Formerly of NIMHANS, Bangalore, India.

Email: smurthy030@gmail.com



Prof. Murthy has been a full time academician/researcher from the time of completion of postgraduate training in 1975. He was a faculty member at PGIMER, Chandigarh (1975-1981) and the National Institute of Mental Health and Neurosciences (NIMHANS) Bangalore (1982-2003). Prof. Murthy

was Professor of Psychiatry at NIMHANS, from 1987-2003. He was Head of the Department of Psychiatry, from January 1988 to February 1997 with over 50 postgraduates and 40 academic staff. He has been a much-respected teacher and mentor to many of the current leaders in psychiatry in India. He was a staff of World Health Organisation (WHO) during 2000-2001 (Chief Editor, World Health Report, 2001- Mental Health) and 2004-2006 (in the WHO-EMRO Office). Since retirement, he has provided honorary services to non-governmental organisations like the Association for the Mentally Challenged, (AMC) Bangalore (2008-2014), Sri Shankara Cancer Hospital and Research Centre (SSCHRC), Bangalore (2015-2016). He was awarded the Distinguished Scientist Chair of Indian Council of Medical Research, (ICMR), New Delhi in May 2016. Currently working to develop and disseminate 'self-care skills' for emotional health with a special focus on persons living with a diagnosis of cancer and HIV-AIDS

Further reading:

1. The Joy of Mental Health-some popular writings of Dr.N.N.Wig, Compiled and Edited by Dr.K.J.S.Chatrath, (2nd edition), Mental Health Forum, Servants of the People Society, Chandigarh. 2010.

2. Srinivasa Murthy, R. (2015) Prof.Narendra Nath Wig- a man ahead of his time, In Psychiatry in India: Training and training Institutions, Ed. TSSRAO, and A.Tandon, Indian Psychiatric Society. 2015. Pages 753-776.

3. Srinivasa Murthy R(ED) Mental health in India (1947-2000) Essays in honour of Prof.N.N.Wig, Peoples Action for Mental Health, Bangalore.2000 (Free electronic version available from smurthy030@gmail.com)

4. Srinivasa Murthy, R.(2018) Future of Mental Health, Asian journal of Psychiatry, December 2018. <https://doi.org/10.1016/j.ajp.2018.11.007>

Do you want to highlight any activities that you have undertaken in the last one year? If it is of interest to the others, please do share it with us.

Interested in being a mentor to someone relocating to the South Asian Division? If yes, the division can connect you informally with a prospective Psychiatrist who may be relocating to your city/province or a trainee who might be going to the UK from your region. Please express your interest by an email to any of the division officers

In this issue we are also highlighting the work done by **Dr. Shahid Latif** who is a Consultant Psychiatrist and the Clinical Director Adult Mental Health with the Northamptonshire Healthcare NHS Foundation Trust. He is also the Chair of the RCPsych Transcultural special interest group. Dr Latif travels to Pakistan to train residents in Psychiatry. He shares his experiential account [here](#).

I have been invited on a number of occasions to the WHO collaborated Institute of Psychiatry, Rawalpindi Medical University, Pakistan. I have been visited them for approximately 4 years for the purpose of presenting different topics relevant to their training.

Topics presented in the past include 'presentation of psychiatry disorders from a cultural perspective', 'communication, presentation and interview skills', 'medical leadership', 'medical and MTI training in psychiatry in the UK' and most recently 'interface between primary and secondary mental health services in the UK' in January 2018.

They also carry out research programs and I have been on the panel of judges for research and audit competitions.

The topics covered have always been well received by the trainees at the Institute and subsequent themes were suggested by them.

They particularly found the workshops on communication and interview skills meaningful and useful.

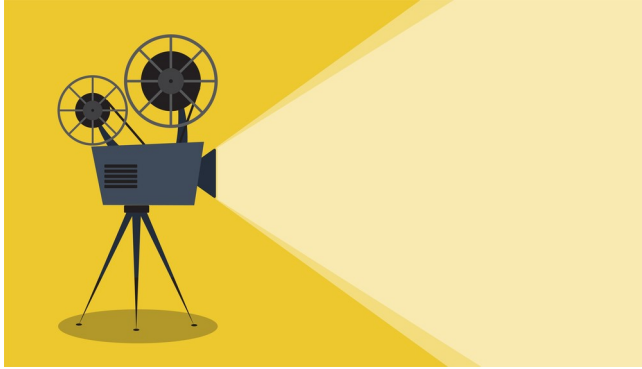
Providing medical leadership updates in the UK is something which not covered in the agents of consonant and therefore had been asked to present this on consecutive years.

Being the Chair of the RCPsych Transcultural Special Interest Group and an RCPsych Trent Division Mentor for International Medical Graduate offered me an opportunity to carry out a workshop in this area. The trainees and junior doctors were offered certificates which was well received as it offered them CPD points as well as up-to-date information.



Visiting and Asian country to provide psychiatric training is always a pleasure especially considering the fact that one is welcomed with open arms and enthusiasm.

MENTAL HEALTH IN THE MEDIA:



Movie review

LUCIA (Kannada language film directed & produced by Pawan Kumar; 2013)

Movie Review by Dr Vijaykumar Harbishettar

Edited by Dr Ashlesha Bagadia

Lucia is an innovative movie in Kannada which is one of south Indian languages. The movie premiered in the 2013 London Indian Film festival, where it won the audience choice-best film award. It was the first ever Kannada movie to be made as a crowd-funded project through funds raised from social media. The main theme of the movie is lucid dreaming, entirely conceptualized by the Director, Mr Pawan Kumar, who also wrote the story and script. As revealed by him in an interview, he got the idea after his own experience with a lucid dream.

Lucid dream is a distinctive dream state, where a person becomes aware that he/she is experiencing a dream whilst asleep. It usually occurs in the REM phase of sleep, in real time. Sometimes the person is able to manipulate the storyline of the dream or control or construct own stories to have a vivid dream experience. There is some emerging evidence on the use of Lucid Dreaming for treating nightmares, one of them by Dutch Scientist Victor Spoormaker. It has also been tried on military veterans for nightmares with some success. It is also been known under the name Tibetan Dream Yoga.

The movie unlike others, has two stories running simultaneously, with one story based in reality and another one in the protagonist's dreams, and therefore many characters have dual roles. The protagonist suffers from insomnia and is introduced to a 'special pill' called 'Lucia' that was claimed to not only treat insomnia, but also create and experience a dream the way the person wants.

Behaviour of an insomniac surrounding drug seeking is covered well in the movie. The protagonist is a

movie star who hates his stardom surrounded by fans and wish to be an ordinary person helping people to find their seats in a cinema hall using torch-light, so in the dark, no one can see him clearly. This becomes his dream story after taking the pill. Throughout the movie, the audience is kept on edge to keep up with which is real and which is the dream world for the actor. At some point, even the protagonist starts believing his dream life is his real life and seems to move seamlessly between the two worlds. In the end, there is a lovely message that runs on the screen "Leading an ordinary life like you may be the dream of a highly successful person".

In addition to insomnia, issues of stress, relationship breakdown, depression, paranoia, fear, etc have also been included. The movie begins with the person trying to commit suicide, which is another topic covered sensitively. A few years ago I had included a discussion on this movie during a teaching seminar in the UK. It was very well received and it was felt that multiple aspects of Psychiatry been highlighted in a very clever manner. The movie explores and helps to better understand the concept of lucid dreaming. It is said that one in 10 people have this experience frequently, but may not have appreciated it. One must appreciate the efforts of the Director for discussing multiple issues pertaining to the field of psychiatry and sleep disturbance via the popular medium of film.

(Dr Vijaykumar Harbishettar, DPM MRCPsych MMedSci, moved back to India after training in the UK and after completing a term as ad-hoc Geriatric

Psychiatry Unit Faculty at NIMHANS, Bangalore, is now in private practice.)

Further details about the movie available on

Wikipedia: [https://en.wikipedia.org/wiki/Lucia_\(film\)](https://en.wikipedia.org/wiki/Lucia_(film))
IMDB (Internet Movie Database) <https://www.imdb.com/title/tt2358592/>

Mental health & media:

In every issue we would like to highlight the depiction of mental illness or wellness in books, movies, poetry or other art forms, from the South Asian region. Division members are encouraged to send their entries to

ashlesha.bagadia@gmail.com.



e-interview

Dr Venugopal Duddu, MD, DNB, MRCPsych, CCST, FRCPsych, MSc, Dip MedEd, LLM

Dr Duddu is a Consultant Psychiatrist who has trained in India and in the UK. After completing higher specialist training in 2005, he worked as a Consultant Psychiatrist in Lancashire Care Foundation NHS Trust for over 9 years. He held a number of academic roles in the North-west including that of a Clinical tutor, Training Program Director and Senior lecturer at the Trust, Deanery and University. He has a special interest in working with adolescents, as well as medical education and medical law.

Dr Duddu relocated to Hyderabad, India in 2014 where he now practices in the private and independent sector. Dr Duddu has been a member of the Indian Psychiatric Society (IPS) for many years, and was elected as a Fellow of the IPS in 2015. He served as the Convenor of the Ethics Sub-committee during 2018-19, and is currently the Convenor of the Legal sub-committee for the current year (2019-20).

How has your training and work experience in the UK shaped up your practice?

I believe that my UK training has enabled me to appreciate the varied contexts within which mental illnesses manifest amongst individuals. I am more conscious of the need to try and understand the origins and the impact of mental illnesses amongst individuals and their families. I do this by trying to have meaningful conversations about how individuals experience and cope with mental health difficulties. This often means spending more time talking to patients, which can be a challenge in an Indian setting,

but the aspiration is to make every consultation have some therapeutic value (apart from the medication management). Having worked within multidisciplinary teams in the UK, I am also more able to acknowledge and respect the contributions of other professionals in helping people with mental illnesses.

Tell us a little bit about the initiatives that you have been part of under the IPS and the impact it has had.

I was the Convenor of the IPS Ethics sub-committee in 2018-19. During this time, we were asked to give ethical opinions and recommendations on a number of issues- both individually and systemically.

One of the major limitations that we faced was the absence of an updated Code of Ethics for IPS members. We took the initiative to review the ethical codes of a number of psychiatric organisations (including the GMC's Good Medical Practice), and developed an updated IPS Code of Ethics. This Code (which has been accepted and adopted by the IPS) sets out the standards of ethical conduct for all IPS members in the country. I expect it to serve as a benchmark for maintaining the highest ethical standards amongst psychiatrists, thus further enhancing the quality of care as well as the reputation of the profession.



(cont.) I have been appointed as the Convenor of the Legal sub-committee of the IPS for 2019-20. The committee's vision is to raise members' awareness of the law as it applies to psychiatric practice, to set up structures within the IPS to support members facing medicolegal issues, to guide the IPS in medicolegal matters, and to identify and respond to issues facing the profession. In the recent past, we have attempted to address two main sets of concerns with relevant authorities. One relates to a number of stigmatising references to psychiatry (and the mentally ill) made by politicians campaigning during elections. The second relates to the negative portrayal of the profession and patients in Bollywood movies. The actual impact of these initiatives is yet to be seen, but the concerns have been widely publicised in the media. The hope is that it will help reduce stigma and aid help-seeking by those who need it.

What are your interests outside of work?

I enjoy spending time with my family. I also enjoy reading, running and catching up with old friends.

Which trainer of yours has had the most profound influence on your practice and why.

I have learned a lot from all my trainers- both in India and in the UK, and they have all been very kind to me. That said, Dr P. Brown (my Psychotherapy Consultant), Dr J. Knapp (my Old age psychiatry consultant) and Dr R. Gater (my Msc Program Director, colleague and friend) have had a particularly big influence in shaping me as a person and as a psychiatrist.

Which book or publication has influenced you the most?

'On Learning from the Patient' by Patrick Casement.

What advice would you like to give to psychiatrists who are planning to relocate to south Asian region?

I can go on for a bit about this but briefly, relocating anywhere can be challenging. South Asia is no exception. The healthcare system in most South Asian countries is very different from that in the UK, with the private and corporate sector having a major role in healthcare provision. This reflects in how work is contracted and remunerated. Unlike the NHS, specialities (and specialists) can be differentially valued. It can also be a challenge to adapt to the local social and cultural landscape as it exists today (as opposed to how it might have been a few decades ago). I would strongly suggest that anyone contemplating relocation to this part of the world should clearly understand (and preferably test out) these challenges before making a firm decision to relocate here.

What frustrates you most about working in psychia-

try?

It frustrates me that people who have eminently treatable mental health problems sometimes do not engage with treatment, and often relapse or continue to suffer. This is sometimes due to stigma, but oftentimes due to myths, misconceptions and misinformation about mental illnesses and their treatment.

What do you most dislike about the way media portrays mental illnesses?

It is irritating to see mental illness, mentally ill people and the doctors treating them being caricatured in negative light- often in a crude effort to generate humour. To my mind, this can be quite irresponsible and can feed into a cycle of societal stereotyping, stigma, non-acceptance, non-compliance, continued suffering and poor health outcomes. In this regard, our IPS legal subcommittee (Dr BN Raveesh, Dr SB Math and I) has recently raised concerns about the title of an upcoming Bollywood movie which appears to make an adverse reference to mental health symptoms. Having said that, we cannot draw generalisations as there have been other instances where mental illnesses have been very sensitively handled by the media too.

RCPsych Fellowship - Call for entries

Call for entries for Fellowship of the College is now open!

Fellowship of the College is awarded as a mark of distinction and recognition of contributions to psychiatry.

All Members who have achieved 10 years in Membership as at 1 January 2019 are encouraged to consider applying for Fellowship for the 2019/2020 round.

Deadline for submission is 30 June 2019. All applications received will be submitted to the Nominations Committee for consideration. **The outcome of the decisions made by the Nominations Committee will be sent to the applicants in October/ November.**

Please see the link below for further information and for application.

<https://www.rcpsych.ac.uk/members/membership/fellowship-and-other-honours>

For any further information about Fellowship please contact Zarqa Ali, Membership Operations Administrator on 0203 701 2759 / 0203 701 2566 or by email at membership.operations@rcpsych.ac.uk.

RCPsych Prizes Open to Division Members

Forensic Psychiatry Faculty:

Research Prize

<https://www.rcpsych.ac.uk/specialties/faculties/forensic/faculty/prizesandbursaries.aspx#researchprize>

Intellectual Disability Faculty:

The Brian Oliver prize

Bursary for Psychiatrists from Developing Countries

<https://www.rcpsych.ac.uk/workinpsychiatry/faculties/intellectualdisability/prizesandbursaries.aspx>

Old Age Faculty:

Felix Poster Prize

Lifetime Achievement Award

Education Bursary

Bursary for psychiatrists from developing countries

<https://www.rcpsych.ac.uk/workinpsychiatry/faculties/oldagepsychiatry/prizesandbursaries.aspx>

Rehabilitation and Social Psychiatry Faculty:

International bursary

Lifetime achievement award

Douglas Bennett Prize

<https://www.rcpsych.ac.uk/workinpsychiatry/faculties/rehabilitationandsocial/prizesandbursaries.aspx>

Endorsements of Academic activities by the South Asian International Division of the Royal College of Psychiatrists

Academic activities proposed by a member of the Division (e.g. symposium, workshop) can be endorsed by the South Asian International Division of the Royal College of Psychiatrists. To be eligible for this endorsement, one of the chairs and at least one of the speakers should be a member of the Division

The following documentation is required:

- A brief (less than 250 words) description of the activity that should include
 - the format (e.g. workshop, symposium, etc.) of the activity;
 - details of the conference submitted to;
- List of participating speakers with their affiliations;

Timeline: the documentation should reach the division at least 4 weeks before the planned event. The Division will respond within 10 working days from receipt.

All submission and pre-submission queries should be addressed to southasiandivision@rcpsych.ac.uk and docsandypande@gmail.com