

Research priorities for psychiatry

Faculty of Academic Psychiatry
on behalf of the Royal College of Psychiatrists

Position Statement PS01/2011

Royal College of Psychiatrists
London

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Background

The Royal College of Psychiatrists asked the Faculty of Academic Psychiatry to develop an outline of research priorities for psychiatry to help strategic thinking of the College. The idea was that this statement would be ratified by the College for publication and dissemination among its members. It could also be used to guide discussions with outside agencies, including the government, to raise the profile of psychiatry and emphasise the importance of research for the profession in what it does in helping the understanding of mental health and treatment for people with mental illness.

The Faculty convened a strategy meeting at which we discussed results from a survey of academic psychiatrists. The survey was based on one circulated by the Medical Research Council in 2010 asking for views on research priorities in mental health research for the next 5–10 years. From these discussions arose the following consensus statement about research priorities for psychiatry.

Statement

There is an urgent need to undertake research in psychiatry because of the scale of mental health problems, the challenges of an ageing population and age-associated psychiatric disorders and the fact that, in comparison with many other medical disorders, psychiatric disorders are poorly understood and better treatments are needed.

Research is of central importance to our understanding of mental health and illness. Every psychiatrist should have a good grasp of the latest research findings relevant to their field of practice. Every psychiatrist should have been trained in an academic environment that fosters research ideas relevant to psychiatry and should continue that interest through professional development. Every psychiatrist needs to understand the importance of research and foster that in their training of others, including facilitating participation of staff and patients in research studies.

Every medical student should receive clinical training in psychiatry within a strong academic setting that includes research activity and opportunities for research and potential to pursue a clinical academic career.

The Royal College of Psychiatrists strongly endorses the idea that psychiatric research is essential and must be supported at all levels. The College will campaign with the government nationally and internationally for fair levels of research funding for projects and research careers given the serious adverse impact of mental illness on the population. The College will campaign for research to be considered a key part of strategic thinking within the Department of Health, the National Health Service (NHS) and other national bodies.

Research should be clearly distinguished from audit. Whether hypothesis-driven or evaluative, research should be aimed at answering important relevant questions. Research needs to be considered across all levels from understanding basic biological processes related to brain function, through understanding the whole person to the impact of psychiatric illness at the societal level. Here, there should be no simplistic, artificial distinction between 'biological', 'psychological' and 'social' as these domains are intertwined and influence each the other.

In general, we need to understand aetiology to develop better approaches to diagnosis and treatment. This may take some years, and so a balance is needed between the priority for 'translation' and that for 'understanding'. Immediate benefits will only be possible through detailed understanding. Hence, a balance of priorities is needed rather than a push for one fashionable initiative that may result in unrealistic expectations and paradoxically set research back.

Barriers to research include:

- bureaucracy and regulations, including those that impede collaborations with industry

- unrealistic expectations, with impatience for immediate results
- lack of trained staff and lack of exposure of medical students to research-active departments around the UK
- lack of balance between the 'generators' of data and the 'users' of data (e.g. meta-analyses) in informing strategic decisions
- stigma.

Bureaucracy and regulations need streamlining, more strategic thinking is needed about how we ensure adequate geographical spread of research-active departments of psychiatry in the UK, and more emphasis is needed on data generation in strategic thinking. Psychiatry needs to put its best foot forward in reducing stigma at all levels by influencing medicine, government and the public.

There is an urgent need for cultures and bureaucracy within NHS mental health services to change to allow clinical research in UK psychiatry to fully achieve its world-class potential.

We need to develop:

- bespoke mental health research charities to increase the funding dedicated to mental illness
- more emphasis on training, job opportunities and reward for clinical academics to encourage recruitment from medical student level up
- a more informed and organised media profile from academics about psychiatric research
- more engagement of researchers in teaching.

We need to increase research capacity to allow training the next generation of psychiatric academics.

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