

Dr Adrian James,  
President  
Royal College of Psychiatrists  
21 Prescott Street  
London  
E1 8BB

10<sup>th</sup> July 2020

Dear Dr James,

We look forward to your response to our 1st July letter, but after reading your comments in the BMJ article "Psychiatrists urge royal college to tackle racism,"<sup>1</sup> alongside comments at the AGM, it is apparent that you have already decided that no independent commission should be appointed. Instead you mention the two newly appointed leads for race and equality who will be joining yourself and your CEO in a task force to look at "the injustice of racism". We agree there is already ample evidence to act on, however, history has shown that organisations carrying out their own inquiries into their practices can never be free of bias and vested interests that undermine their efforts to put past ways of thinking and practices behind them. Therefore, on behalf of the 166 signatories we repeat our call for an independent commission.

Of more urgent concern is that you reported that the training curriculum has already been submitted for GMC approval. The endorsement of enhanced cultural competency training within psychiatry curricula comes at a time when progressive thinkers in this area are recognising that at best, cultural competency is simply a starting point, and at worst a superficial veneer to the deeper problems of structural racism that it may only serve to further obscure<sup>2</sup>. Below are the deeply unsettling accounts from a medical student and trainee, sent with our press-release last week, that highlight the distress and hopelessness felt at this level, and which we hear within our own networks, are turning many away from choosing psychiatry. **We therefore urge you to withdraw the curricula without delay so that independent experts in the field of systemic racism and colonialism can examine them and make recommendations before re-submission to the GMC.** We are copying this letter to the GMC to make them aware of our concerns.

On behalf of the signatories to our letter of the 1<sup>st</sup> of July,

Duncan Double  
Suman Fernando  
Hamideh Heydari  
Sushrut Jadhav  
James Rodger

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<sup>1</sup> O'Dowd, A. Psychiatrists urge royal college to tackle racism. BMJ 2020;370:m2657.

<sup>2</sup> Metz J, Roberts D. Structural Competency Meets Structural Racism: Race, Politics, and the Structure of Medical Knowledge. AMA Journal of Ethics. Available at: <https://journalofethics.ama-assn.org/article/structural-competency-meets-structural-racism-race-politics-and-structure-medical-knowledge/2014-09>

Derek Summerfield  
Sami Timimi  
Sara-Lily Waite  
Sarah Wong

Statement from a psychiatric trainee

“Local activists from the Afro-Caribbean community describe that psychiatrists here have completely failed to understand their cultural experiences, and in particular the impact of racism on their collective and individual psychological wellbeing, and they spoke of the violence inflicted on their brothers, sons, and friends within the wards I have worked in. This included deaths from medication and the trauma of oppressive experiences of detention, restraint, and seclusion. It is with deep shame that I acknowledge that even knowing this, I feel ill-equipped to prevent similar harms from occurring in the teams I have worked in. How do we as trainees avoid reproducing and perpetuating these abuses?! My experience is that our training does absolutely nothing to prevent another generation of psychiatrists inflicting the same systemic harms.”

Statement from a medical student:

“I am a medical student currently working alongside other medical students with the dean of medicine at my university to decolonise our teaching through student-led workshops, curriculum changes, and accessible feedback. I am also aware that by going into the medical field at large I am entering into a profession that has used ‘science’ and ‘facts’ to systematically oppress Black people and POC for centuries, with the perhaps naive hope to work against this in my career. However, I and my fellow medical students who are politically active will have a hard time reconciling our anti-racist work and principles with the state of psychiatry at the moment. To work within the guidelines and rules as they are now, for me would mean being complicit in racial violence. It would mean contributing to a system that sections Black people under the Mental Health Act at four times the rate of white people. A system that forces sedation and medication on Black people because they are disproportionately seen as a danger to themselves and others. A system that routinely works with the police in criminalising illness and often fatally detaining Black people and POC. Until the Royal College of Psychiatrists commits to independent examination and works to rid itself of the practices and guidelines that actively militate against Black and POC people in the UK, I cannot choose psychiatry.”