

Professor Andrew Sims
Former President of the Royal College of Psychiatrists

Consulting, teaching, researching, writing, training and also representing psychiatry to the medical establishment, the Department of Health and to ministers and government.

“After leaving Monkton in 1957 I went to Emmanuel College, Cambridge to read medicine and then on to Westminster Hospital for my clinical training. I had been interested in the mind and what makes it tick since reading Carl Jung in the school Library when I should have been working for A levels! After qualifying I worked in internal medicine for a time before joining an excellent training scheme for psychiatry in Manchester. I became interested in clinical research and, after a few years as a consultant psychiatrist in a large mental hospital, I transferred to academic posts, first in Birmingham and then in Leeds where I was professor of psychiatry until 2000.

Throughout my career in psychiatry I have had two over-riding research involvements. Most of my initial research was on the epidemiology, that is the enumeration of a condition in a defined population, of the neurotic disorders, which are the most frequent of psychiatric illnesses. My other long-term interest has been in descriptive psychopathology: that is studying mental illness from the patient’s own subjective description. This is fundamental for teaching psychiatrists how to do their job, and my book, *Symptoms in the Mind*, remains the standard text in British-influenced countries for post-graduate trainees through its four editions.

I was a member of the Royal College of Psychiatrists (RCPsych) from its inception in 1971, replacing a previous organisation that had existed since 1841. With others, I believed that without a strong and independent body, the speciality could not develop to its potential. I became Dean of the College in 1987, in this post being responsible for post-graduate training in psychiatry in the United Kingdom and Ireland, management of the examination for membership of the College and conducting inspection of training facilities throughout the country. There was also involvement with training in other countries. It was a time of expansion of training and the Dean’s was a busy but very enjoyable job.

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I was elected President of the RCPsych in 1990 for three years. This was an extremely demanding and varied post. I had to represent psychiatry to the rest of the medical establishment, to the Department of Health and to ministers and government – not easy at a time when the party in power were trying to cut costs drastically! Working with other psychiatrists in Britain, Ireland and throughout the world was enjoyable and rewarding. Some of the activities I undertook then have only born fruit many years later – sometimes one can shift the equilibrium a little, for example with government, in a way that brings benefits in years to come.

I left Monkton Combe at 18 as an avowed atheist – I have always had problems with conforming! By the grace of God and through the prayers of others I became a Christian before going up to Cambridge whilst labouring in a cheese factory, reading GM Trevelyan's *English Social History* in my lunch breaks! In the 1960s and 70s the attitude of senior psychiatrists towards religion, and especially Christianity, was often hostile, seeing beliefs of patients as evidence of being guilt-ridden and lacking clear convictions in life, and belief of doctors as being 'unscientific'. I am glad to say that the climate has changed markedly and now spiritual aspects are increasingly seen as important within the psychiatric establishment.

Last year I had a book published: *Is Faith Delusion?* (2009: Continuum) drawing together my beliefs as a Christian and my knowledge as a psychiatrist. In this I have written that *delusion* has become a psychiatric word with a specific meaning and within any precise definition of delusion faith is not and cannot be regarded as delusional. I also draw out some of the massive evidence to show that religious belief, far from harming patients, results in significant short and long-term benefits in mental and physical health. As a psychiatrist, I have learnt from my believing patients and I hope the book will help them with the dual stigma they face: being mentally ill in a world that discriminates against them and being a Christian in a resolutely secular society.

I am grateful for my time at Monkton. I learnt much, mostly outside the classroom, and made some good friends. I am certainly not the same as I was when I left and I know the school has changed too – mostly for the better.”