
Obituaries

Joan Metcalf Ridley, *Director of Psychiatric Services in the Northern Territory of Australia*

Dr Joan Ridley died in Australia in August 1993. She had spent most of her working life in Britain, but it was in Australia that she made her greatest impact in revolutionising mental health services.

Joan was born in Washington near Newcastle-upon-Tyne in 1931. She spent her early life in the north of England, but as a young woman she moved to London and completed her undergraduate studies at the Royal Free Hospital School of Medicine, receiving her MB BS (London) and the MRCS, LRCP in 1955. After completing her pre-registration year and obtaining the Diploma of Obstetrics she returned to the north of England and became a 'Newcastle School' registrar, where she came under the influence of Sir Martin Roth and also met many of the psychiatrists who would play an important part in her career both in Britain and Australia.

She completed her DPM requirements in 1960 and received both the Conjoint Diploma and the University of Durham Diploma that year.

After completing her training she moved to St Peters, Northampton, and lived and worked in the Northampton and Kettering areas, where she obtained a consultant post.

The Newcastle School became very influential in Australia when people such as Dick Ball, Leslie Kiloh and F.A. (Tony) Whitlock migrated to the country. In Queensland, Whitlock became Professor of Psychiatry at the University of Queensland, and he attracted John Price and, for some years, Max Harper to work in Brisbane.

In the mid 1970s Joan Ridley was seeking a new challenge and became aware through her many friends and contacts of opportunities in Australia. She was recruited by Dr Gordon Urquhart, then Director of Psychiatric Services in the Queensland Health Department, to the job of Medical Superintendent at Baillie Henderson Hospital in Toowoomba, Queensland where she worked from 1977 to 1986.

The hospital was in the process of transition from a traditional mental hospital with limited resources and Joan had the task of completing a difficult reform process.

She embarked on a rapid process of deinstitutionalisation while at the same time setting up community psychiatric services to provide for the deinstitutionalised patients which included establishing good relationships with the local community. She also set about reinvigorating

the acute psychiatry unit at the Toowoomba General Hospital, at which she was visiting consultant.

She established three separate day facilities, a community psychiatric nursing service and within the hospital, rehabilitation, psychogeriatric, forensic and head injury units together with staff through a recruitment programme. At the same time she took on a challenge unimaginable in her native England – the establishment of a visiting rural services team which travelled by car and light aircraft to centres up to 400 miles away and covered an area twice the size of Great Britain.

Joan was always interested in frontier psychiatry in both the literal and the metaphorical sense. After almost a decade in Toowoomba that provincial city had become to seem almost too English and familiar and most of her plans at Baillie Henderson Hospital had been completed.

She had worked for a few months as Acting State Director of Psychiatric Services in Queensland and she then embarked on an ever greater challenge as Director of Psychiatric Services in the Northern Territory of Australia based on Darwin. Darwin is a complicated mixture of a frontier town and administrative centre. Facilities were sparse and staff, especially psychiatrists, were difficult to attract and retain so that there had only ever been a limited mental health service and no psychiatric hospital.

Joan set about establishing community and hospital based services. The population was even more spread out than was the case in Queensland. Alcohol consumption was high. The Aborigines had specific mental health problems: they had difficulty in obtaining access to mental health services and in relating to non-Aboriginal health professionals. Many of them lived in their tribal lands, but others had become detached from their homelands and had developed a range of psychiatric disorders.

With a well chosen but small team Joan was able to build up a comprehensive service for the Northern Territory.

In late 1991 Joan suddenly became ill and was discovered to have a widespread metastatic malignancy which was untreatable. The prognosis was hopeless and she was given about six months to live. Nevertheless, she was determined to enjoy the remainder of her life and to fight the disease as best she could using meditation techniques. She resigned her post in the Northern Territory and she and her husband built a house

in the country outside Toowoomba. She made trips to India, to the Adelaide Arts Festival and one last visit to England before her deteriorating health made further travel impossible.

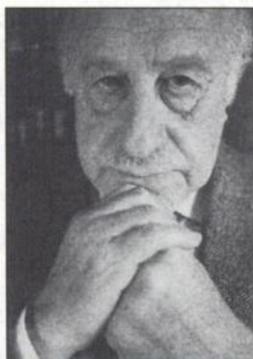
Joan had been married for over 25 years to Bill Oliphant. They had travelled the world together and he had been her partner in all her ventures over the years. She is survived by Bill and their daughter, Sarah, and son, Guy. Sadly, she did not live to see the birth of her first grandchild.

She was a Foundation Member of the Royal College of Psychiatrists and became a Fellow of the Royal Australian and New Zealand College of Psychiatrists after moving to Australia. She was elected FRCPsych a couple of years before her death.

The Ridley Unit, a medium secure unit at Baillie Henderson Hospital was named in her honour.

JEFFERY THOMPSON

Irving Shribman, *Consultant in Forensic Psychiatry, Home Office*



"I find it hard to believe that someone so interesting and so vital is no longer with us – truly the end of an era, when psychiatry was more of an art and less of a business than it is now", a colleague wrote on learning of Irving's death. He had not got the better of a coronary which last year chastised him after 75 years of living life to the full.

In 1944, as a (neutral) Irish national, he volunteered for the RAMC. An Acting Major with the BAOR, he treated military wounded on both

sides in general surgery and graded psychiatric postings. His commanding officer said of him, "he is one of the most likeable of men. Quiet, yet possessing a great sense of humour, he was universally popular with his medical colleagues and patients". And still wearing a 'J'* on his identify disc, he helped as some of the Nazi concentration camps were opened to the horrified world.

These strengths were carried into civilian work. As a consultant psychiatrist since 1953, his influence and inspiration throughout the NHS in Buckinghamshire has been unquestioned. In medical and senior managerial roles, and later in forensic psychiatry, he maintained a stature and versatility, a belligerence and cynicism – and always, a touch of class. These qualities will be sorely missed by all those who knew him, and by those that loved him. He is survived by a large family and by Hazel, his wife of 43 years.

Career summary

Irving Shribman, consultant psychiatrist, NHS, 1953–1981; consultant in forensic psychiatry, Home Office, 1981–1994. Born, Limerick, 1 June 1917, died 10 February 1994. Educated at Haberdasher Askes and Trinity College Dublin (MA; MB; BCh; BAO 1942). Royal Army Medical Corps, Acting Major, 1944–45. Appointments to Maudsley, Banstead and Napsbury Mental Hospitals unit 1953. Consultant Psychiatrist at St Johns, Stoke Mandeville, Amersham and High Wycombe Hospitals, Buckinghamshire (1953–1981). JP 1974; General Commissioner of Taxes 1981. Home Office appointments to Huntercombe Borstal; Grendon Underwood Open Prison; Aylesbury Prison; Broadmoor Hospital (Medical Advisory Committee).

JONATHAN SHRIBMAN

*'J' denoted Jew as a religious denomination