

CORRESPONDENCE

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Sir: The professional life of psychiatrists can be divided into several phases, among which the transition period from psychiatric training to independent practice is one of the most important. This phase usually determines not only the choice of subspecialisation but also the rest of a professional's working life within psychiatry, including related aspects such as migration on either professional or financial grounds (Riese *et al.*, 2013). Psychiatrists who are in the first years of their professional career have been defined as 'early career psychiatrists' (ECPs): the term relates to medical doctors who are trainees in psychiatry or specialists within 5 years of completion of their psychiatric training (Giacco, 2011).

Comprehensive data on psychiatric training in Europe, including the numbers of psychiatric trainees, have been already reported (Kuzman *et al.*, 2012), but no data are available on even the approximate number of ECPs from the reports of relevant national authorities for postgraduate training (e.g. national ministries or institutes of public health, etc.). Such data, if available, would better inform efforts to harmonise policies and practices of training in psychiatry around Europe. With this objective in mind, two transcontinental bodies – the Early Career Psychiatrists Committee of the European Psychiatric Association (EPA-ECPC) and the European Federation of Psychiatric Trainees (EFPT) – have undertaken a survey.

While the results of this survey will be reported to the relevant European organisations, it is crucial that stakeholders at European national and continental level who are already engaged in monitoring the decline in recruitment of trainees into the field of psychiatry review its results with urgent attention. The interpretation of the data will have implications for planning and establishing retention strategies focused on the pool of ECPs across Europe and for planning specific developmental

activities based on the actual number of ECPs in each country. Moreover, prevention strategies and additional investments in primary and public mental health could be prioritised in countries with relatively low or declining numbers of ECPs. Furthermore, some countries with higher numbers of ECPs may provide examples of good recruitment strategies, although one might speculate whether these high numbers are actually not caused by 'imported' psychiatrists (e.g. in Ireland and the UK).

To conclude, the harmonisation of mental healthcare delivery across Europe must be grounded in the reality of workforce dynamics, especially utilising forward-looking indicators such as the numbers of trainees and ECPs. This survey should add valuable data that we implore national and European organisations to take note of.

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Rizgar Amin, 1958–2013

The Editor and Board of *International Psychiatry* are saddened by the death of their esteemed colleague, on 15 April 2013.

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