Minutes

Present:
1. Dr Maria Fé Bravo Ortiz, Spanish Association of Neuropsychiatry; **Honorary Treasurer** (incoming)
2. Dr Andrew Brittlebank, Royal College of Psychiatrists (UK); **Vice President for Training**
3. Mr Elen Cook, Royal College of Psychiatrists (UK); **Administrator**
4. Dr Rachael Cullivan-Elliott, The College of Psychiatry of Ireland
5. Dr Lia De Picker, EFPT* (President-Elect)
6. Dr Jozef Dragasek, Slovak Psychiatric Association
7. Dr Luiz Carlos Gamito, Portuguese Medical Association
8. Dr Dan Georgescu, Swiss Society for Psychiatry and Psychotherapy; **Vice President for CME**
9. Professor Edvard Hauff, Norwegian Medical Association
10. Professor Thea Heeren, Dutch Psychiatric Association; **Officer**
11. Dr Tordis Höifødt, Norwegian Psychiatric Association
12. Dr Marc Hermans, Belgian Professional Association of Medical Specialists in Psychiatry; **President**
13. Dr Olle Hollertz, Swedish Medical Association
14. Professor Fritz Hohagen, German Society of Psychiatry, Psychotherapy and Neurology
15. Dr Torsten Jacobsen, Danish Psychiatric Association; **Honorary Secretary**
16. Dr Krzysztof Krysta, Polish Psychiatric Association
17. Dr Brigitte Mauthner, Austrian Medical Chamber
18. Professor Michael Musalek, Austrian Society for Psychiatry and Neurology
19. Dr Joergen Nystrup, Danish Psychiatric Association
20. Dr Anastasios Papakonstantinou, Hellenic Association of Professional Psychiatrists
21. Dr Olga Paravaya, EPA ECPC**
22. Professor Alexey Pavlichenko (Observer)
23. Dr Mariana Pinto Da Costa, EFPT* (President)
24. Dr William Pitchot, Royal Society Of Mental Medicine Of Belgium
25. Dr Tanja Svirskis Finish Psychiatric Association
26. Dr Catalina Tudose, Romanian Psychiatric Association

*European Federation of Psychiatric Trainees
** European Psychiatric Committee Early Career Psychiatrists Committee

Apologies:
1. Dr Raisa Andrezina, Latvian Psychiatric Association
2. Dr Argyris Argyriou, Cyprus Psychiatric Association
3. Dr Mohamed Fouad Benchekroun, Moroccan Psychiatric Society
4. Dr Mohamed Amine Benjelloun, Moroccan Psychiatric Society
5. Dr Bejaminsas Burba, Lithuanian Psychiatric Association
6. Professor Luis Caballero, Spanish Society of Psychiatry
7. Dr Brendan Cassidy, Irish Medical Organisation; **Treasurer** (outgoing)
8. Dr Jean-Marc Cloos, Luxembourg Society of Psychiatry Pedopsychiatry and Psychotherapy
9. Dr Sándor Fekete, Hungarian Psychiatric Association
10. Dr Tsvi Fischel, Israeli Psychiatric Association
11. Dr Cécile Hanon, European Psychiatric Association
12. Professor Silvana Galderisi, European Psychiatric Association
13. Dr Nikolina Jovanovic, Croatian Medical Association and EPA Early Career Psychiatrists Committee
14. Dr Anne Kleinberg, Estonian Psychiatric Association
15. Dr Biruta Kupcha, Latvian Psychiatric Association
16. Dr Simon Kyriakides, Cyprus Psychiatric Association
17. Dr Klára Látalová, Czech Psychiatric Association
18. Dr Zoltan Makkos, Hungarian Psychiatric Association
19. Dr Matthijs Muijen, World Health Organisation
20. Dr Maria Nilson Markhed, Swedish Medical Association
21. Dr Blanka Plesnicar, Psychiatric Association of Slovenia
1. Welcome

The President, Dr Marc Hermans, welcomed Delegates to the Section meeting which was being held in Mechelen. The President gave particular welcome to three new Delegates; Dr Livia De Picker, the new President Elect of the EFPT; Dr Tordis Haifødt, the new Norwegian Delegate; Dr Olga Parava, representing the EPA Early Career Psychiatrists Committee; Dr William Pitchot, new Delegate for Belgium and Professor Alexey Pavlichenko, invited observer from Russia.

With regret the President reported that since the previous meeting two Delegates had passed away. Those present held a minute’s silence in remembrance of Professor Florin Tudose and Dr Veiko Vasar.

2. To approve the minutes of the last meeting

The minutes from the previous meeting, held in Madrid, were approved with 2 changes.

3. Report from the President

The President provided a written summary of his activities from the previous months (paper PS10) which included attendance at the UEMS Council meetings in Brussels and Geneva. These meetings had included discussion on the EACCME fee arrangements which would be discussed at greater length later in the meeting. A WPA meeting in Turkey had provided an opportunity for leaders in the main psychiatric associations in Europe (EFPT, EPA, UEMS PS and the WPA) to meet and it was hoped that such meetings would be repeated at other major international conferences. During the WPA meeting in Madrid Professor Tasman invited Dr Hermans to join the Education Section of the WPA. Dr Hermans accepted and said that he would inform the Education Section about the work of the UEMS Psychiatry Section and vice versa.

The President had also attended an EU funded conference on transition psychiatry in Venice. There had been many discussions about transition and youth psychiatry in Europe, including a (rejected) suggestion that a separate specialty for “youth” psychiatry should be set up. Delegates agreed that the Section’s input was needed in discussions on how transition psychiatry should be organised in Europe. There was a discussion about how inadequate transitions from CAP to adult services often led to poor outcomes. Dr Andrew Brittlebank said that a task force on transition psychiatry between the Psychiatry Section and the CAP Section of the UEMS had previously been discussed. The Terms of Reference for such a group would need to be approved by both Sections before it could proceed. Dr Brittlebank suggested that the Officers would consider this topic at their next meeting. This issue would also be placed on the agenda at the next Section meeting.

The President gave an update on the EPA project on psychotherapy, which Delegates from the Section have been supporting. Two weekend long training sessions had taken place in Zagreb in January and February 2015 and 25 Croatian trainees had attended. A multinational group presented a variety of guidelines, and papers on the different branches of psychotherapy had been presented at the meeting.

Delegates thanked the President for all his hard work on behalf of the Section.
4. Report from the Acting Treasurer, Professor Thea Heeren

Professor Heeren explained that while it was usual for the financial statements from the previous year to come to the spring meeting of the Section, the transition of the Section’s accounts from Ireland to Belgium had caused delays in their production and the statements would not be available until the next meeting. Once the accounts had all been moved to Brussels it should be easy to obtain statements as the Psychiatry Section’s accounts would be one of many UEMS accounts. Professor Heeren recommended that the new Treasurer, once elected, travelled to Brussels in order to clarify the financial arrangements of the Section.

The President explained that financial issues were of concern to many of the Sections of the UEMS. He explained that Sections have no legal standing and only the UEMS is recognised as an account holder in law. This means they can keep control of all Section accounts. All Sections have been requested to transfer their monies to the UEMS Brussels account. But arrangements that some Sections have in place in order to finance themselves have made this quite difficult.

The President explained that this new arrangement would affect the way Delegates claimed expenses. Delegates should now address invoices to UEMS Brussels – including their address and VAT code - and send them original receipts. Copies of the invoice and receipts should also be sent to the Section Treasurer who will arrange payment of any expenses.

There were discussions about the dissatisfaction felt by many National Associations with the financial governance of the UEMS. Dr Torsten Jacobsen explained that the Section Officers were also dissatisfied with financial arrangements and the lack of transparency. Officers would continue to seek clarification and transparency and would keep Delegates informed of discussions and outcomes.

5. Report from the Vice President (CME), Dr Dan Georgescu

Dr Dan Georgescu reported that he had carried out 25 assessments of conferences and congresses for EACCME since the last meeting and 14 from January 2015 (31 had been carried out during 2014). Dr Georgescu explained that his dealings with EACCME continued to be unsatisfactory. After requesting a schedule of all work, Dr Georgescu was advised on 4th April 2014 that he would be supplied with a list every 6 months. To date no list had been received. Emails querying details of particular events also went unanswered. The President reported that other Sections also had concerns about the administration of EACCME. At the UEMS Council meeting it had been reported that the fee that was paid to the Section carrying out the assessment may stop due to a lack of central funds. This would make development work very difficult for some Sections. Dr Georgescu commented that the assessments of conferences were done on a voluntary basis and that this work was undertaken for the benefit of the Section. To carry out this time consuming work and not to know where the fees charged to meeting organisers was sent was very de-motivating. Many Delegates commented that their National Associations would have serious concerns about their membership of the Section if this lack of transparency continued. Delegates said that they would be taking these issues back to their National Medical Associations so that they could continue to be fed back to the UEMS Council. The President commented that during the last UEMS Council meeting he had suggested that Group 3 (of which the Psychiatry Section is a Member and Dr Hermans is the Chair) make a formal request to the UEMS Council for transparency in all matters relating to UEMS business.

Action:
Andrew Brittlebank to prepare Terms of Reference for the working group on transition psychiatry.
Professor Heeren commented that there were two issues relating to finances that needed clarification; the first was to do with the EACCME and the second concerned the Sections own Finances which would be unravelled in the coming months.

It was agreed by all Delegates that all concerned bodies should keep pressure on the UEMS and request that they carry out their work in a fair and transparent way.

6. **Election of a new Honorary Treasurer**

Dr Hermans explained that the term of office of the previous Honorary Treasurer, Dr Brendan Cassidy, had now come to an end. While Dr Cassidy had been unwell his duties had been carried out first by Dr Hermans and then by Professor Heeren.

Dr Torsten Jacobsen invited Delegates to make nominations for the role of Honorary Treasurer to the UEMS Psychiatry Section.

Dr Maria Fe Bravo Ortiz was nominated by two Delegates.

Dr Maria Fe Bravo Ortiz was elected unopposed as the new Honorary Treasurer for the Psychiatry Section.

Dr Bravo Ortiz commented that it was an honour to be chosen for this role and that she was pleased to take on this important responsibility at a difficult time. Dr Bravo Ortiz said that she would ensure that her duties were carried out with transparently and with equity.

7. **Report from the Vice President (Training), Dr Andrew Brittlebank**

Dr Brittlebank explained that he would be reporting on three areas; the Standing Committee on Training (SCT), the EPA and CESMA.

- **SCT:**

Dr Brittlebank thanked his colleagues for moving the time of this meeting to the Thursday evening and explained to Delegates that he would bring the report from the SCT meeting to the Saturday meeting of the Section. The SCT work plan was established at the last meeting and resources were now being allocated to specific areas of work.

- **EPA**

Dr Brittlebank explained that he, Dr Hermans and Dr Mariana Pinto da Costa were working with Professor Rutger van der Gaag from the EPA to produce UEMS and EPA guidelines on training in psychiatry. The standards would be both broad, in terms of standard setting, and specific on matters such as cultural aspects of psychotherapy.

Dr Brittlebank had also attended the EPA Education Meeting in March 2015. Other members of the Section were involved in this committee; Dr Hermans was involved in the “Psychotherapy to go” initiative (see item 9) and Dr Cecile Hannon was involved in setting up academic events and e-learning initiatives. The committee was under pressure from the EPA to reduce its’ costs and the committee would need to carry out a SWOT analysis in order to ensure that it was utilizing its’ expertise to best effect.

- **CESMA**

Dr Brittlebank reported that he had attended a CESMA meeting in Brussels in December 2014. He explained that CESMA was within the UEMS structure and that it was concerned with organising assessments and delivering examinations in medical specialties. It has been proposed that CESMA should become a “thematic section” of the UEMS. During the meeting Dr Brittlebank gave a presentation on the UK’s approach to performance and knowledge based assessments. The meeting had covered practical elements of arranging exams and included examples of knowledge based exams and competency based tests from other Sections. Other
non-craft based specialties were now carrying out such assessments through CESMA. The costs of running these exams, and of sitting them, were varied. For example the Neurology exam was running at a loss and they were looking at ways of reducing costs. Dr Brittlebank had asked for business plans and forecast for CESMA but these had not been provided. CESMA was also in the process of setting itself up as the appeal board for candidates.

Delegates thanked Dr Brittlebank for this feedback. Professor Edvard Hauff asked how tasks and finances were arranged in the EPA Education group and in CESMA. Dr Brittlebank explained that the Education Committee was in transition due to a change in membership and that it would take some time for a work plan to be developed. Dr Tanja Svirskis had been appointed as a new member of the committee and would be another Delegate who could bring the influence of the Section to bear. There was a discussion about the European Board of Psychiatry exam and it was agreed that the Section should not consider moving forward with this if CESMA did not have a strong business case that outlined the benefits, risks and required investment. There was agreements that any such exam would need to be of benefit to psychiatrists and their patients and that these, and not financial aspects, should be the main consideration. Dr Jacobsen and Dr Hermans reported that in some specialties exam candidates from outside Europe were taking CESMA exams. Dr Hermans reported that the WPA was exploring the possibility of running psychiatry courses for countries where no state psychiatry exam was offered.

8. **2014 Annual Report for Approval**

Dr Jacobsen took Delegates through the 2014 Annual Report (PS4). Dr Jacobsen explained that in the future Delegates will be asked to approve an annual plan for the coming year with specific targets that can be used to check progress against at regular intervals.

The 2014 Annual Report was approved with 2 changes relating to EFPT activity.

The 2016 Annual Plan would be considered at the October 2015 meeting in Berlin. Suggestions for 2016 activity should be sent to the Officers for consideration.

**Action:**

All Delegates wishing to add items to the 2016 Action plan to send them to Elen Cook

9. **Report on the “Psychotherapy to Go!” project**

Delegates received the report from this project (PS11). Dr Hermans explained that Portugal, Bosnia and Moldova had all asked to host training events in the future.

Delegates discussed the sustainability of this project which relied on volunteers giving up their time to teach for free. The project was currently being funded by the EPA who discussed the funding at their last meeting in Vienna. It was suggested that the EU Director General for Education may be able to assist in funding the project.

Delegates discussed some of the issues surrounding training and delivery of psychotherapy in Europe including allocation of time for training, different approaches to psychotherapy as central or peripheral to psychiatry, the balance of psychotherapy and neuroscience, time allocated to patients of psychiatrists and psychotherapists and the need to convince health insurance companies of benefits and outcomes.

Dr Pinto da Costa explained that the EFPT had made a statement on psychotherapy which stated that trainees should receive intensive training in one recognised branch of psychotherapy and have knowledge of the others. Delegates agreed that the Section’s message that
Psychotherapy was integral to psychiatric practice should be continued. Dr Brittlebank said that these discussions would inform the SCT meeting and that the new draft requirements for psychiatric training would include a strong statement on psychotherapy.

10. Communication Strategy

Dr Brittlebank asked Delegates to consider the draft Mission and Vision statement and decide if it captured what the Section wanted to achieve. Delegates broke into 3 small groups to consider the Vision and Mission statement.

Following Discussions, delegates approved the following Vision and Mission statement for the Section:

**Vision**
The purpose of the UEMS Section of psychiatry is to promote the highest standard of care for people who are affected by mental health problems in Europe through postgraduate training and continuing medical education of psychiatrists.

**Mission**
The Section will achieve this by encouraging excellence in psychiatric education and training, from the undergraduate phase through to continuing professional development.

The Section conducts its work by:
- Contributing to the harmonisation of professional standards in Europe
- Setting standards for education and learning across all stages of professional development in Europe
- Producing evidence based guidance on training and service related matters and
- Offering to Monitoring these standards

The Delegates broke into small groups again and considered the Section’s strategy and main objectives for the next 5 years. The small groups reported on their discussions:

**Group 1:**
Objectives:
Well-conceived webpage: More professional in appearance. Update more regularly. Easy to navigate.
95% trainees aware of standards of training set by UEMS
All NA should be informed on documents.
Regular and confident contact with all collaborating organizations.

**Group 2:**
Integration of neuroscience, medical humanities and good clinical practice.
Audience: Politicians, medical professions. Focused on content?
Key word: communicate. What? We need high quality MH services. How? Training and education? Who?: UEMS.
Measurement: psychiatrists need to recognize UEMS as the brand of training in Europe.

**Group 3:**
Raise awareness of UEMS and their documents. All institutions involved in training to be aware in 5 years.
This awareness transforms into action so – all training schemes adapted to meet these guidelines.
In house communications – encourage all delegates to give report to their NAs. So information is circulated.
Newsletter – circulated in member countries? Is the newsletter for internal or external audience?

Dr Brittlebank said that these comments would be taken and incorporated into the Section’s strategy which would be brought for consideration to the next meeting.

11. Paper on Involuntary Treatment for approval

Dr Rachael Cullivan-Elliott presented the final version of this paper (PS13). The Section approved this paper. Delegates suggested that Dr Cullivan-Elliott might like to submit the paper to European Psychiatry for publication. Delegates thanked Dr Cullivan-Elliott and all members of the working group on involuntary treatment for producing this paper.

12. Endorsement of External Documents

Dr Brittlebank asked Delegates to consider these guidelines (PS6) for Section endorsement of papers produced by other organisations.
Dr Cullivan-Elliott suggested that the document in question be sent to all Delegates in case they have any comments. It was agreed that two Delegates would be asked to carry out a specific review of any document seeking Section endorsement but that it would also be sent to all Delegates for comment.
Delegates considered the ROAMER document which had received Section endorsement. Dr Jacobsen explained that the UEMS Psychiatry Section had been invited to join ROAMER as a stakeholder and the Officers had agreed that endorsing the document was a natural conclusion to that process.

13. Premature Termination of Officer’s Term of Office

Dr Brittlebank asked Delegates to consider the draft recommendations for terminating an Officer’s term of Officer prematurely (PS14). Delegates agreed that when voting on the removal of an officer there should be a two thirds majority amongst voting members before a decision could be made, as is set out in the UEMS Rules of Procedure. Delegates also agreed that clear and objective rules of procedure would be helpful in difficult situations.
The draft document was accepted and would be considered further at the next Officers meeting.

**Action:**
Officers to consider document at their next Officers’ meeting

14. Psychiatry in Russia

Dr Olle Hollertz explained to Delegates that he was involved in mental health projects in Estonia and Russia and invited Professor Pavlichenko to the Section meeting as there were many issues concerning mental health training that the Section may be able to advise and assist on.

Professor Alexey Pavlichenko gave a presentation on challenges and perspectives in psychiatric training in Russia (available at: [http://uemspsychiatry.org/meetings/previous-meetings/](http://uemspsychiatry.org/meetings/previous-meetings/)). The presentation covered public perceptions of psychiatry in Russia, the undergraduate and postgraduate training systems in Russia and common teaching methods. At present there were many differences in training across Russia and Professor Pavlichenko hoped this was one area that could be changed so that national guidelines and standards could be introduced. Professor
Pavlichenko also commented that training on psychotherapy was very diverse in Russia and most psychotherapists were not doctors.

Dr Pinto Da Costa asked about training that took place after qualifying and Professor Pavlichenko said that he had noticed a trend amongst those psychiatrists whose training had been short (only one or two years) to seek additional psychiatric training in order to support their professional development.

Delegates thanked Professor Pavlichenko for the presentation.

15. Collaboration with Other Organisations
   a. EPA
      This item had already been covered on the agenda (see item 7)

   b. EFPT
      Dr Pinto da Costa gave a presentation on the activities of the EFPT (available at http://uemspsychiatry.org/meetings/previous-meetings/). Dr Pinto da Costa gave an update on the brain drain study which showed common migratory routes in Europe and explored the common reasons why psychiatric trainees decided to move to another country. Another project was the Trainees Experiences and Opinions on UEMS Psychiatric competencies in National training programmes. This trainee led study showed how trainees felt about how useful and relevant the competencies would be after training. Dr Pinto da Costa also gave an update on the EFPT exchange programme which was continuing to grow, as well an overview of the EFPT working groups including the Image of Psychiatry working group which had recently produced short film clips addressing common perceptions of psychiatry and psychiatrists.
      The EFPT had also collaborated with the ECNP Junior Member Advisory Panel to offer internships in psychiatric research. During the pilot in 2014 the project had supported 5 internships. EFPT members continued to be represented at many psychiatric conferences in Europe and their communication strategy was also being put into action through the development of a new signature and newsletter. The EFPT continued to fundraise in order to support its activities and donations can be made on the EFPT website. Dr Pinto da Costa highlighted the upcoming EFPT conference in Porto in June 2015.

   c. EPA Early Career Psychiatrists Committee
      Dr Olga Paravaya gave a presentation on the work of the EPA ECPC (available at http://uemspsychiatry.org/meetings/previous-meetings/). The EPA ECPC focused its work on 4 task force groups; publications, professional development, meetings and research. The EPA ECPC had succeeded in getting 4 papers published and compiling a recommended reading list for Early Career psychiatrists, they continued to collaborate with the leading psychiatric associations in Europe. The EPA ECPC had also become involved in Europe wide research projects including the psyLOG project which uses smartphone technology to help doctors understand and monitor adverse effects produced by antipsychotics.

   d. UEMS CAP Section
      Dr Hermans explained that he had been in contact with the UEMS CAP Chair (Professor Sue Bailey) and that she had proposed a joint Officers meeting to discuss issues around transition psychiatry.
e. UEMS MJC on Sexual Medicine

Dr Joergen Nystrup explained that this MJC met twice a year and held exams every other year. In the first exam there had been more than 300 applicants. The second exam had 70 applicants and the MJC was considering having a break before holding any more exams. The MJC was considering how it could monitor and support practitioners in the field.

Several delegates shared their experiences on specialty of sexology in their countries and expressed an interest in this MJC. The President suggested that those with an interest in this field should contact each other to see what support the MJC could offer.

f. UEMS MJC on Pain

The President explained that he was attending the meetings of this MJC but that another representative from the Section was still needed. The MJC had recently published Training Requirements for the Core Curriculum of Multidisciplinary Pain Medicine (PS15). It was agreed to postpone a decision on approval of this paper until the next meeting.

The MJC was considering dissolving itself and becoming a Thematic Section of the UEMS. This would allow other professionals (for example, nurses) to become members and contribute to their work.

g. WHO

Dr Jacobsen explained that he had been in contact with Dr Matt Muijen from the WHO Regional Office in Europe and that they had discussed workforce and quality issues. Dr Jacobsen had passed on the relevant UEMS Documents and he had expressed an interest in developing work in these fields.

h. WPA

Discussions on a WPA observer at UEMS meeting were continuing. The President reported that the WPA was eager to engage with the Section.

i. ROAMER

Dr Jacobsen reported that the EU had not awarded ROAMER the necessary funding for it to move forward with its roadmap for research. It may be awarded funding in the EU 2020 agenda.

16. Feedback from the Standing Committee on Training

Dr Brittlebank explained that following the SCT meeting the previous evening the work-plan would shortly be available on the Section Website.

Dr Brittlebank said that he and Dr Hermans would set up a working group with the CAP Section to look at the issues surrounding transition.

Dr Hollertz asked if environmental issues should be considered in the Section curricula. Following discussion Delegates agreed that such a large issue should be considered at the Council level and that National Associations could be asked to place it on the agenda for consideration.

The President explained that the system offered to UEMS by the University of Sheffield in order to support the use of portfolios needed €120,000 in investment and this was making delivery of planned projects more difficult. UEMS had asked the Sections to contribute to this funding
shortfall but as many Sections had their own separate accreditation systems the funding had not been forthcoming.

Dr Jacobsen reported that documents from the UEMS Council were now available on the Section website for information: http://uemspsychiatry.org/meetings/uems-council-papers/ (Password: uems)

17. Brief feedback from delegations on professional, training or service matters

This item is not minuted.

18. Administrative Matters

Mrs Elen Cook asked all Delegates to complete and return the new membership details form (PS8) so that the Section could have details of Delegates areas of expertise.

**Action:**

All Delegates to complete and return the new membership details form

19. Dates of the Next meeting

15 – 17 October 2015, Berlin

Professor Hohagen said that he was looking forward to welcoming Delegates to Berlin for the next meeting. Arrangements for the meeting, including a trip to a clinical setting, were being made.

Spring 2016, Warsaw

Dr Krzysztof Krysta explained that he would be arranged for 7 – 9 April or the 14 – 16 April 2016. A visit day would be arranged as well.

Autumn 2016, Vienna

Dr Brigitte Mauthner explained that Austria would be hosting the autumn 2016 meeting on 13 – 15 October 2016. The meeting would take place at the Austrian Medical Chambers headquarters and a visit day would be arranged.

The President asked those interested in hosting a meeting in 2017 to contact the Officers.

20. AOB

a. ADHD

Dr Hollertz commented that in Sweden they were seeing a trend for closing prisons as they did not have enough prisoners to fill them. One theory for this development was the success in their treatment of ADHD across the lifespan. Dr Hollertz hoped this trend would continue across Europe.

b. Close

Dr Hermans thanked Delegates and Officers for their commitment to the Section and expressed his pride in Chairing a group that was producing such high quality documents. Dr Hermans also commented the one of the projects that the Section was involved in, the “Psychotherapy to Go!” project was an example of how the UEMS Psychiatry Section could bring about equity in Europe; the economic investment in some European countries following the second world war, and not in others, meant that there was still huge disparity in medical training in Europe and those countries which had benefited had an obligation to spread knowledge and expertise where it was needed.
Dr Hermans closed the meeting.