

traditional remit of research ... be included ... in what is valued and therefore valuable for career progression”.

We would, however, continue to maintain that research opportunities are there for those who seek them, even if they are not exactly handed out on a plate although the position for registrars and senior registrars is different. Senior registrars are given sessions (usually two per week) to carry out research. What are they doing with this time?

As a comparison may we give as an example students on a part-time Masters in Community Care course run by one of us (JMA). These students are in full-time jobs, may or may not be given one day a week to do research and (as part requirement for the degree) in a 12 month period plan, carry out and write a 20,000 word thesis on a piece of research of their own choice. Yes, they have a university supervisor but many receive little or no support (practical or psychological) in their job. Maybe the carrot of MCC after their name (but without the flashy tie!) is enough to motivate them. Or maybe they are looking for career advancement, an opportunity to learn and develop new areas and skills, maybe they are all masochists ... whatever their motivation it does demonstrate what can be accomplished in a limited period of time, with limited resources – given the will.

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DEAR SIRs

The paper by Atkinson and Coia on ‘Trainees and Research’ (*Psychiatric Bulletin*, June 1993, 17, 355–356) makes some valuable comments on the issues, but I believe omits some of the main reasons for trainee research. In SW Thames successful applicants for senior registrar posts have at least one publication and usually more; however, it is important to examine the skills which have been acquired in the publication process, rather than the research *per se*. Compared to trainees who have not published, trainees with a list of publications will have picked up some computer skills, be familiar with word-processing, have carried out literature searches, and improved their writing skills. Perhaps most importantly, they will approach their everyday clinical work with the same level of mental scrutiny as they would a research problem.

I agree with the benefits to be gained from being part of a larger research group and also see this as a means of acquiring the above skills. Often there is a body of knowledge which the trainee may not be a party to, such as who to approach for some basic

teaching in computer skills. Joining an established group can ease the acquisition of such knowledge.

The original research paper is rightly quoted as being unrepresentative of trainee publications as a whole, and review articles, case histories and audit are also mentioned as sources for publication. In addition, general practice journals and student journals generally welcome articles on psychiatric topics and there is a ready market for articles on management or administrative approaches in which trainees may be involved. Everyone will have an opinion on the articles that appear each week in the journals, so why not submit these opinions to the editor in the form of a letter?

The advantage of publications on a CV should be seen as evidence of skill acquisition and continue to be rewarded as such.

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Reply

DEAR SIRs

Dr McClintock makes a number of points with which we would agree. Certainly we would see the skills obtained through publishing to be part of ‘research’ in its widest sense but such skills need not be dependent on research-as-collecting-new-data, a point we make. We would simply reiterate that if these skills are valued, whether gained through research or publication, then thought must be given first to identify what the skills are, then how best trainees in all clinical situations, not just the main academic centres, can develop them.

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DEAR SIRs

As trainees working “in the periphery”, we were interested to read the article by Atkinson and Coia (*Psychiatric Bulletin*, June 1993, 17, 355–356). In particular, from our viewpoint as psychiatric trainees, their advice on what counts as research is useful. However if the emphasis on research in order to progress up the career ladder is to continue, the College needs to urgently address this issue which marginalises a large number of trainees.

Wherever one works some of the problems are the same. The first being one of juggling the priorities between clinical work, examinations and research (not to say family and other normalising social demands on one’s time). As pointed out, there are