EDITORIAL COLUMN

Welcome to the July issue of “World Child and Adolescent Psychiatry,” an official journal of the WPA (World Psychiatric Association) Child and Adolescent Psychiatry Section.

First, I would like to thank the WPA leadership: Prof. P. Ruiz, WPA President (USA), Prof. D. Bhugra, WPA President-Elect (UK), Prof. N. Sartorius, WPA Past President (Switzerland), Prof. T. Akiyama (Japan), Prof. A. Javed (Pakistan) and Prof. L. Kuey (Turkey) for their support to the WPA Child and Adolescent Psychiatry (CAP) Section and this journal. I also would like to thank my colleagues: WPA CAP section officers Prof. B. Leventhal, Chair (USA) and G. Milavic, Co-Chair (UK) for their encouragement and support to “World Child and Adolescent Psychiatry.”

“World Child and Adolescent Psychiatry” is a product of good teamwork. My special thanks go to Prof. Anthony Guerrero, Assistant Editor. I can only imagine how many hours he must have spent, working on our joint projects instead of enjoying his native Honolulu. My sincere thanks also go to all members of the extensive Editorial Board: Dr. J. Abdulmalik (Assistant Editor, Nigeria), Prof. D. Fung (Singapore), M. B. Moyano (Argentina), Dr. M. Tateno (Japan), Prof. S. Malhotra (India), Prof. S. Honjo (Japan), Prof. P. Szatmari (Canada), Prof. L. Viola (Uruguay), Prof. S. C. Cho (S. Korea), Prof. D. Puras (Lithuania), Dr. V. Storm (Australia), Dr. J. Fayyad (Lebanon), Dr. S. Tan (Malaysia), Dr. N. V. Tuan (Vietnam). I would like to also welcome new members of the editorial board: Prof. Paramjit Joshi (USA), President-elect of the American Academy of Child and Adolescent Psychiatry and Prof. Andre Sourander (Finland).

In this issue you will find several papers from around the World, about training in CAP. I am very pleased to include a paper on ‘The Consortium on Academic Child and Adolescent Psychiatry in the Far East’, which was created with the help of the WPA CAP Group on Teaching and Learning. I know that the consortium is already very active, and many prominent child and adolescent psychiatrists have joined it. Last year Japan was hit by a very powerful earthquake, a destructive tsunami, and a subsequent nuclear disaster in Fukushima. Many Japanese colleagues have told me how important it is for them that the rest of the World should know about what has happened and the current state of affairs. This Edition of “World Child and Adolescent Psychiatry” provides this unique insight with a brief report: "Japan: A Year After the Disaster." I am delighted that the WPA CAP has built a special relationship with Dr. Shin-Ichi Niwa, Professor of Psychiatry at Fukushima Medical University, Japan. I sincerely hope that Prof. Niwa will share his findings about the mental well being of children in the affected areas in one of the symposiums initiated by WPA CAP. And as you will learn from this issue, WPA CAP has a very strong presence at almost all major Psychiatry meetings and conferences across the Globe.

We are already planning future editions it is my and my team goal to reach out to readers and connect them to programs, projects, experiences or people in a bid to improve the mental wellbeing of children all over the world. Happy readings!

Norbert Skokauskas
Editor, “World Child and Adolescent Psychiatry”
Secretary, World Psychiatric Association, Child and Adolescent Psychiatry Section

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Chair’s Column:

The 9th Annual Research Seminar in Child and Adolescent Psychiatry

The 9th Annual Research Seminar in Child and Adolescent Psychiatry Research was held at Monastero Santa Croce in Bocca di Magra, Italy on 24-29 June 2012. The Seminar was co-sponsored by the WPA Section on Child and Adolescent Psychiatry and Foundation Child. Professor Ernesto Caffo (WPA Child Section member, Italy) and Professor Bennett Leventhal (USA) co-chaired the Seminar with WPA CAP Section Chair, Bennett Leventhal also serving as Scientific Director of the Seminar. Forty trainees from Italy, Slovenia, Croatia, Albania, Spain, Portugal, UK, Ireland, Poland, Macedonia, Lithuania, Belgium, USA, Guatemala, India, S. Korea, Tunisia, Libya, Egypt, Turkey and Switzerland were selected from a very competitive application process to participate in a rigorous week-long training course. Topics included research methods such as statistics, study design, epidemiology, neuro-imaging and genetics as well as discussions about the application of these methods to specific clinical entities such as depression, eating disorders and ASD, to mention a few. Stimulating keynote addresses were delivered by Professor Judy Cameron from the USA (Developmental Neuroscience), Professor Jennifer Lau from the UK (Cognitive and Affective Neuroscience) and Professor Norman Sartorius from Switzerland (Ethics in Psychiatric Research). Other faculty included Professors Neal Ryan (USA), Fabio Macciardi (Italy), Pietro Pietrini (Italy), Young Shin Kim (Korea/USA), John Walkup (USA), Rony Berger (Israel), Daniel Le Grange (USA), David Shaffer (USA), Tim Wilens (USA), Jeremy Veenstra-Vanderweele (USA). In addition to enjoying a strong didactic program, trainees also participated in research workshops with the faculty. During the workshops, the trainees worked with the faculty to review and refine their research projects so that they can return home and continue with their research careers. This was a very productive (and tiring) week for trainees and faculty alike.
Global issues in children’s mental health - a topic close to my heart

Prof. Paramjit T. Joshi, M.D.,
President-Elect: The American Academy of Child & Adolescent Psychiatry

I am very much looking forward to AACAP’s 59th Annual Meeting in San Francisco, October 23-28 and hope to see many of our international colleagues and friends at the meetings. The program provides the breadth and depth of current issues in clinical practice, cutting edge research, public policy, education and advocacy. In just the last two weeks The US Supreme Court upheld the Affordable Care Act in its entirety - a landmark legislation that would have a sweeping impact on the provision of medical care in the US. This historic decision is going to change the way we provide care to our patients; who provides the care; and who is eligible to receive care. At the same time we need to be collaborative, fiscally prudent, and show positive outcomes of the care that we provide. In addition, very soon we will be facing another major change in our field and that has to do with the publication of the DSM-5.

The Annual Meeting attracts increasing numbers of international colleagues and we have seen a marked growth both in the number and quality of presentations that address global issues in children’s mental health – a topic close to my heart.

The scientific program at the Annual Meeting provides attendees an opportunity to hear about all of these issues in various forums.

Please see p. 19 for a listing of coming attractions at the Annual Meeting that might peak your interest. I look forward to seeing you all in San Francisco!

WPA CAP Assembly will take place during AACAP meeting: 25 October, 2012, 5.30 pm.
Consortium on Academic Child and Adolescent Psychiatry in The Far East (CACAPFE)

Prof. Daniel Daniel Fung (Singapore), Dr. Norbert Skokauskas, (Ireland/Japan), Prof. Anthony Guerrero, (USA), Dr. Masaru Tateno(Japan)

The Consortium on Academic Child and Adolescent Psychiatry in the Far East (CACAP-FE) has been recently established with the support of the WPA (World Psychiatry Association) Group on Teaching and Learning in Child and Adolescent Psychiatry (Chair, Dr. Norbert Skokauskas). The Far East region comprises the countries and territories of East Asia, namely China, Japan, North Korea, South Korea, Mongolia, Taiwan, Russian Siberia, the Philippines, Hong Kong, Vietnam, Cambodia, Laos, Thailand, Malaysia, Singapore, Myanmar, Brunei, Indonesia, East Timor and Macau. Needless to say, this region is one of the most dynamic and rapidly developing regions not only of Asia but also the World.

The aim of the CACAP-FE is to acknowledge achievements and to identify the needs of Child and Adolescent Psychiatry in the region. The Consortium puts the emphasis on the mapping of CAP training programs and the optimization of education programs for future child and adolescent psychiatrists.

The Executive Board of the Consortium includes Prof. Daniel Fung, President (Singapore); Dr. Norbert Skokauskas, Acting Manager (Ireland/Japan); Prof. Anthony Guerrero, International Advisor (USA); Dr. Masaru Tateno, Secretary (Japan). The Executive Board is extremely grateful to all members and international advisors of the Consortium for their input:

Prof. Sotheara Chhim (Cambodia),
Dr. Say How Ong (Singapore),
Prof. Yi Zheng (China),
Prof. Suporn Apinuntavech (Thailand),
Dr. Tuan van Nguyen (Vietnam),
Prof. Bungnyun Kim (S.Korea),
Dr. Chou Po-Han and Prof. Tsai Chia-Jui (Taiwan),
Prof. Shuji Honjo and Dr. Hitoshi Kaneko (Japan),
Dr. Evgeni Koren (Russia),
Prof. Susan Tan (Malaysia),
Dr. John Sik-nin Ko and Dr.Annis Fung (Hong Kong),
Dr. Abang Bennett (Brunei),
Dr. Manivone Thikeo (Lao),
Prof. Bennett Leventhal (USA),
Dr. Linn Kyaw (Myanmar)
Dr. A. Oyunsuren (Mongolia)

If you would like to learn more about the Consortium on Academic Child and Adolescent Psychiatry in the Far East please email Dr. Norbert Skokauskas at N_Skokauskas@yahoo.com
WPA CAP Group on Teaching and Learning Column

Prof. Anthony Guerrero (USA)

WPA CAP Group on Teaching and Learning aims to optimize child and adolescent psychiatric education through innovations in medical education, including problem-based learning (PBL) and other progressive learning strategies, and remains responsive to national and international contexts and concerns relating to accreditation. In this issue I am pleased to interview Prof. Samy Azer, an Australian medical educator who has contributed significantly to medical education internationally.

A.G. You are a very well known and highly regarded medical educator. Can you tell us a little bit about yourself – particularly, the teaching programs you have established in many countries throughout the world?

S.A. Thank you. I am not sure that I am well known. I have made a humble contribution to medical education. I am an Australian medical educator who migrated to Australia about 30 years ago. I started my career as a medical graduate and completed my training in gastroenterology. After serving as a clinician for a few years, I realized that I have a passion for research and medical education. I enrolled at the University of Sydney to complete a Ph.D. with the aim of exploring the use of individual serum bile acids in patients with a liver transplantation. I also completed a Masters in Education while completing my PhD. Although it was difficult to work on two degrees as well as fulfill other work commitments, I realized that there were mutual connections between the two areas of learning and thus, I was motivated to further pursue my interests. Interestingly, I was able to publish 11 papers from my PhD work, and within a month after submitting my thesis, I joined the University of Kansas Medical Center as a Postdoctoral Fellow. However, I felt more passionate about medical education. I returned to Australia and joined the University of Sydney as Senior Lecturer in Medical Education. At that time, 1997, the University of Sydney was introducing a graduate-entry program in medicine and moving to a hybrid PBL curriculum. I had the opportunity to work with Australian leaders in medical education: Prof. A. Sefton, J. Gordon, and M. Field. Two years later, I was invited to join the Medical Education Unit at the University of Melbourne as the school of medicine was introducing major reformation changes to its medical curriculum. My work at Melbourne enabled me to introduce changes to the PBL model and work with a great team on developing the new curriculum. At that time, I wrote a book on learning basic sciences through cases. About seven years later, the University of Toyama in Japan invited me as a Visiting Professor of Medical Education. The university was interested in adopting PBL and introducing changes in medical education. My work at the University of Toyama helped in establishing a unit for medical education and building links with the team there. Also, a team of three academics translated my book into Japanese, and it was subsequently published by Elsevier Japan. The publication of this book was a great honor, and it helped in introducing cases to medical education in Japan. At that time, I started working on my second book on PBL, which was published by Elsevier Australia. I also received an invitation from the Universiti Teknologi MARA (UiTM) in Malaysia from the Vice-Chancellor and the Dean of Medicine to join the Faculty of Medicine. My main work at UiTM aimed at introducing an integrated PBL curriculum in the preclinical years, chairing the curriculum review workshop, and helping in the process of curriculum review. I also played a significant role in the process of curriculum accreditation by the Malaysian Accreditation Agency. During my time in Malaysia, I received an invitation from King Saud University, asking me to join the Medical Education Department as the College of Medicine was introducing a new integrated PBL curriculum. I have been in Saudi Arabia for about two years, and I believe the experience I am gaining during these years is invaluable.
A.G. The WPA CAP Group on Teaching and Learning began as a conference-specific special interest study group on problem-based learning, which is a topic that you have published a great deal in. Can you explain why PBL is such an important innovation in medical education, particularly from a global perspective? 

S.A. I think PBL has presented students, teachers, and researchers with several thought-provoking challenges in relation to the meaning of learning. Although PBL was introduced by H. Barrows about 50 years ago, the evolution of PBL has been a continuous process. This process is evident from the progressively larger number of research and publications on PBL. The reasons for this growth are related, I believe, to the wide range of educational outcomes that can be achieved through PBL, such as enhancing student’s skills in: generating hypotheses, making an inquiry plan, looking for supportive evidence for their views, using basic sciences to interpret patient’s symptoms and signs, interpreting laboratory findings, constructing a management plan, applying knowledge learnt to a new problem, developing skills in self-directed learning and enforcing deep learning. In addition, PBL enforces teamwork and collaborative learning skills (interviewer’s comment: such skills are particularly important in a specialty like child and adolescent psychiatry). Therefore, there are several differences between lectures and PBL tutorials. PBL emphasizes student centered learning, motivates students to apply knowledge learnt, and provides opportunities for the learners to make decisions and handle uncertainty.

A.G. What would you say are the most important mistakes to avoid making in using PBL to teach a specific specialty like child and adolescent psychiatry? 

S.A. I believe as we introduce a PBL program, we should realize key principles that ensure successful design and implementation of the program. Among these principle are: preparing teachers and students for the PBL design, establishing committees and working groups that oversee the curriculum, establishing processes for assessment and evaluation, creating templates for the PBL cases to meet the learning outcomes of the curriculum and the level of learners, and obtaining consultation and expert advice. It is also important to train teachers on facilitation skills. Moreover, if the program is designed for online learning, it is important to create mechanisms that facilitate learning of challenging components: for example, a consult button that enables learners to seek help when they feel unable to address new or difficult concepts.

A.G. Can you suggest any resources that might be helpful for colleagues hoping to incorporate PBL in teaching? 

S.A. There are a number of textbooks on PBL such as “Lessons from Problem-based Learning” by Berkel, “Problem-based Learning: an Approach to Medical Education” and ”PBL in Health Sciences Education” by Barrows (A.G.’s comment: to this list, I might also add “Navigating Problem-based Learning” by Azer). I would also recommend the Guides and Series prepared by the Association for the Study of Medical Education in the UK and the Association for Medical Education in Europe (AMEE) Educational Guides such as "On teaching and learning," "E-learning in medical education," "Effective small group learning and PBL." Other useful resources are papers published in Medical Teacher, Medical Education, BMC Medical Education, Academic Medicine, Medical Education Online and etc.
WPA Co-sponsored Joint XIV National Congress of the Serbian Psychiatric Association and III Congress of The Psychiatric Association for Eastern Europe and the Balkans – "Psychiatry for a Changing World"
18-21 April 2012  Belgrade, Serbia

Dr. Gordana Milavic, Co-Chair, WPA CAP
The WPA Child and Adolescent (CAP) Section co-sponsored symposium took place within the context of the larger Congress. More than 20 countries were represented at the entire meeting in Belgrade, Serbia. The WPA CAP symposium set out to address current topics in service provision and organization of child and adolescent mental health with the aims of comparing theory and practice in different settings and cultures and bringing evidence-based practice into focus. Michel Botbol from Brest University, France presented work related to the identification of child and adolescent psychological problems that lead to school violence. Gordana Milavic described the use of evidence-based treatments for childhood depression in everyday clinical practice. An outline of cognitive-behavioral therapy, administered on its own or in combination with medication, as practiced in the Mood Disorder Clinic of the national and specialist services at the Maudsley Hospital in London, was presented. Smiljka Popovic Deusic described a number of studies currently being carried out at the Institute of Mental Health in Belgrade, Serbia in the context of challenges faced by youth growing up in times of transition and societal changes. By adjusting current resources to the presenting problems, the Institute has successfully implemented new services and educational programs for the prevention of mental health disorders and promotion of mental health. Dimitris Anagnostopoulos, from the University of Athens and the Community Mental Health Centre Byron-Kesariani, outlined a program addressing learning disorders in a community sample of children and adolescents in a district of Athens. The interesting discussion that followed his talk referred to cultural factors influencing the diagnosis of psychiatric disorders in the Greek sample. Mirjana Trkulja, from Hospital St Louis in Paris, gave a detailed case description of the treatment of autism integrating a psychotherapeutic perspective with milieu therapy in the face of established practice of psycho-educational, pharmacotherapeutic, cognitive and behavioral modalities currently used in the treatment of autistic spectrum disorders. The symposium was well attended, with many positive comments about the lectures exchanged during the symposium itself and during the duration of the rest of the Congress.
Japan: A Year After the Disaster: part I

Dr. BLinda Semlitz (Japan)

The magnitude 9 Great East Japan Earthquake on March 11, 2011 was the most powerful earthquake in Japan's recent history and resulted in a destructive tsunami and a subsequent nuclear disaster in Fukushima, with nearly 20,000 people declared either dead or missing.

A disaster of this scale required a multi-prong approach to mental health and psychosocial support. At a panel titled, “Mental Health Tsunami: a Panel Discussion,” hosted by the American Chamber of Commerce in Japan, representatives from the Japan NIMH, the National Defense College, and TELL (Tokyo English Life Line) presented their mental health responses to the affected population in the one year since the disaster. Prof. T. Akiyama chaired the meeting. J. Shigemura, M.D., Ph.D., of the Department of Psychiatry, National Defense Medical College has been supporting national defense personnel first responders. Survivors of natural disasters have an increased risk of developing mental health problems, although the majority eventually recovers on their own, with appropriate support. Tohoku is an area with a previously high suicide rate, an aging population, and scarce mental health professionals. Unlike aid workers following 9/11, Japanese workers, particularly those who risked their lives battling with the reactor explosions and meltdown in Fukushima, are now met with criticisms and struggle with self-blame.

Y. Kim, M.D., Ph.D., President of the National Information Center of Disaster Mental Health at the Japan National Institute of Mental Health, spoke of the initial collaboration amongst government, academia, and professional associations to respond to existing mental health patients in the affected area. More than 1000 inpatient beds were lost, requiring transfer of psychiatric inpatients to other hospitals. Japan will focus on three main areas in the future: research regarding effective trauma psychotherapy, placement of mental health teams in all prefectures on a permanent basis, and training of trainers to deliver Psychological First Aid to first responders. L. Semlitz, M.D., Executive Officer and Clinical Director of TELL, discussed TELL’s response to the disaster. TELL is a registered and accredited non-profit organization that provides counseling and support to the international and Japanese community. TELL has a confidential, anonymous English language lifeline, a professional counseling center, and numerous outreach programs. TELL maintained the English language life line without interruption; disseminated information on coping with disasters in 17 languages; provided onsite psycho-education to international schools, associations, and multinational corporations; and provided Psychological First Aid training to over 400 individuals with 20 non-governmental organizations and associations working with the affected population in Tohoku.

WHO and the Interagency Standing Committee (IASC) recommended that all workers who interact with the affected population in the event of a disaster be trained in Psychological First Aid (PFA). The PFA training was organized and implemented by TELL with technical assistance from the International Medical Corps (IMC), a global humanitarian non-profit organization that delivers mental health and psychosocial support in countries affected by disaster and crises worldwide. Psychological First Aid was translated and localized by TELL PFA certified trainers who are western trained bilingual professional psychotherapists. Results of PFA pre-and post-training demonstrated increased competence and confidence amongst humanitarian relief workers interacting with the affected population. Nonetheless, aid workers were experiencing exhaustion, compassion fatigue, and distress and many international teams had to be replaced by local teams, including survivors. TELL is now offering a pilot project delivering workshops on compassion fatigue and distance counseling.
Japan: A Year After the Disaster (2):

*a photo reportage from Soma and Minami Soma, Fukushima prefecture*

Sōma is a coastal city located in Fukushima. The Eastern, sea-side part of Sōma was inundated by devastating tsunami flood waters following a magnitude 9.0 earthquake off its coastline on March 11, 2011. The tsunami reached up to approximately 4 km inland in Sōma. The tsunami was measured to have been 9.3 meters or higher in Sōma. Minamisōma (Soma South) is about 16 miles north of Fukushima Nuclear Power Plant. Much of the city lies within the mandated evacuation zone near the plant, and thus most of the residents were forced to leave. As of 9 April 2011, 400 residents were confirmed dead, with 1,100 missing.

A former psychiatric hospital, built on the cost of the Pacific Ocean and destroyed during the disaster

"a temporary town" for refugees

A Rebuilt Soma City’s Mental Health Team

References available on the request, photos - Norbert Skokauskas
Child and Adolescent Psychiatry in South America: regional representative’s report

Dr. Maria Beatriz Moyano (Argentina)

It is my pleasure to update you on news from South America, for “World Child and Adolescent Psychiatry.” During the last WPA meeting in Buenos Aires, Argentina (Sept 2010), I had the honor of being nominated as the Regional Representative from South America to the WPA Child and Adolescent Psychiatry Section. Since then, I have been hard at work organizing a regional network of child and adolescent psychiatrists. Prof. Laura Viola, a renowned Child and Adolescent Psychiatrist from Uruguay, has also joined me in representing the South American Section at Toronto during the meeting of the CAP-WPA Section.

As members of the Latino American ADHD League, (LILAPETDAH, a group of ADHD experts who conduct and promote regional research on ADHD in Latin America), we are in close contact with a number of well-known child and adolescent psychiatrists from Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, the Dominican Republic, Ecuador, Mexico, Paraguay, Peru, Uruguay, and Venezuela. We invited all of them to join our network and to add other regional colleagues to the WPA Child and Adolescent Psychiatry Section’s network. We were pleasantly surprised and very grateful for their enthusiastic acceptance (with an immediate flood of positive e-mails) in the aftermath of the invitation. Moreover, Dr. Eduardo Barragan, the recent past president of the LILAPETDAH and Dr. Juan David Palacios, the current president, have also confirmed their complete support for our regional efforts. Since then, the list of colleagues in our South American WPA CAP Network has continued growing. Prof. Viola is the President of FLAPIA, (Federación Latinoamericana de Asociaciones de Psiquiatría de la Infancia y la Adolescencia), which allows us to be in contact with an important number of colleagues in all of Latin America who are enthusiastic about working together for the benefit of the Child Psychiatry. What more could we ask for?

In Argentina, the “Asociacion Argentina de Psiquiatras Infantojuveniles” (AAPI) is the leading association for child and adolescent psychiatry. The AAPI is made up of most of the heads of the principal child and adolescent mental hospitals (public and private) in Buenos Aires as well as resident physicians and child and adolescent psychiatrists from other provinces in Argentina. As a member of the AAPI executive board, I have formally communicated to my fellow board members the WPA CAP’s aims and initiatives. The executive board has decided that the AAPI will be one of the principal associations through which Argentina would convey our local needs and suggestions to the WPA in terms of children and adolescents’ mental health. The AAPI has also pledged complete support for any of the WPA CAP’s initiatives.

The AAPI has also aimed to establish consensus about what our special needs are in Argentina and how the WPA CAP can help us. I would like to share with you how amazing it has been to see the enthusiasm and productivity that this initiative has generated within the AAPI. We have formulated a number of priority needs in Argentina and possible solutions, including international support with training, policy development and implementation, and/or research. I hope to present this list to the Executive Board of the WPA CAP at the upcoming meeting in Paris. As Secretary of the Research Chapter of the Asociacion de Psiquiatras Argentinos (APSA), I also presented to all members the WPA CAPS’s aims and initiatives, and everyone, including the Chapter President, Dr. Graciela Onofrio, has expressed their full commitment to collaborate in common future research efforts. There is consensus in both the APSA Research Chapter and the AAPI that Argentina especially needs support for epidemiological research to better inform the detection of the most common child and adolescent mental health problems and the formulation of rational mental health policies.
Child and Adolescent Psychiatry in South America (cont.)

In preparation for the upcoming XXVII Congress of the Latino American Psychiatric Association (www.apalcongreso2012.org), to be held November 16 to 19, 2012, Dr. Viola and I have been collaborating with Dr. Alfredo Cia, Vice-President and Upcoming President of APAL (Asociacion de Psiquiatras Latino Americanos) and of APSA (Asociacion Argentina de Psiquiatras), the main adult psychiatric associations in Argentina, already closely linked to the WPA.

Prof. Viola is the upcoming President of the Child and Adolescent Section of the APAL (Association of Psychiatrists of Latin America) At this point, we are happy to report that we already have the institutional commitment from the APAL to host at least four WPA CAP-sponsored international symposia at their upcoming congress. These symposia will aim to express the different Latin American countries’ strengths and weaknesses as a starting point for future actions. To give priority to the few regional epidemiological studies available, in one of the symposia, we selected two epidemiological studies, one from Chile and another from Uruguay. The Argentinean presenter in this symposium will speak about basic needs in Argentina and possible solutions. Since I have dedicated my last fourteen years to treating and providing psychoeducation on Tourette’s Syndrome (TS) and related disorders, I have made it my mission to spread the word about TS in Latin America. Thus one of the symposia will update TD in Latin America.

Therefore, the three WPA CAS symposia I have organized at the APAL Congress are:  
1. “The Importance of Epidemiological Studies for the Detection of Basic Needs in Child and Adolescent Mental Health in South America,” in which Dr. Flora De la Barra from Chile will speak about “Psychiatric disorders prevalence: an epidemiological community study in Chilean children and adolescents”; Dr. Adriana Martinez Schiavo will speak about “Characteristics of the Suicide Attempt in Uruguayan children and adolescents”; and Dr. Nora Leal Marchena from Argentina will speak about “Mental health, public health and psychiatry: complementary or contradictory disciplines?”
2. “Update in Tourette Syndrome and tic-related OCD subtype in Buenos Aires, Sao Paulo and New York,” in which I (Dr. Beatriz Moyano from Argentina) will speak about “Epidemiology and phenomenology of TS and cultural aspects in Argentina”; Dr Barbara Coffey from the USA will speak about “Treatment of Tourette Syndrome and comorbidity and cultural aspects in New York”; and Dr. Pedro Gomes Alvarenga from Brazil will speak about “Phenomenology, diagnosis and treatment of tics & TS-related OCD subtype and cultural aspects in Brazil.”
3. During a research symposium co-organized between WPA C&A-Section and by the APSA Research Chapter, Dr. Coffey and I will present our study, “A cross-cultural comparative study of Tourette Syndrome in children and adolescents from New York and Buenos Aires,” and analyze with the audience interesting possible cultural factors that explain the epidemiological and clinical differences, such as the delay in the specialized consultation in Argentina, and the higher rates of anxiety, mood and externalizing disorders found in Buenos Aires versus New York.

Prof. Laura Viola has organized the fourth symposium that will be titled, “The Impact of Sleep Disorders in Early Child Psychiatry,” with the participation of Prof. Chaskel de Colombia, Assistant Prof. Dr. Andrea Abadi (President of AAPI) from Argentina and Prof. Viola from Uruguay.

In terms of future actions, we are organizing the V Consensus Latino American ADHD League and the Congress of FLAPIA in 2013 in Colonia, Uruguay and we will happy if you can join us.
WPA CAP Section participation at the 108th Congress of the Japanese Society of Psychiatry and Neurology, in Sapporo, Japan

Dr. Masaru Tateno (Japan), Dr. Jibril Abdulmalikia (Nigeria), Dr. Norbert Skokauskas (Japan/Ireland)

The serene but historic city of Sapporo, which is the largest city in Hokkaido Island, Japan, was host to the 108th Congress of the Japanese Society of Psychiatry and Neurology, from the 24th to the 26th of May, 2012. The conference attracted approximately 5000 participants largely drawn from Asia, but also sprinkled with a significant presence from other continents. Professor Tsuyoshi Akiyama, who is also a member of the WPA EC, led international program. State of the art key note lectures were delivered by leading scholars including Prof. Dilip V. Jeste, the President-elect of the American Psychiatric Association, whose lecture “Successful Cognitive and Emotional Aging” provided unique insights into the mental health needs of an aging population and with useful tips to guide this path. Prof. Helen Herrman spoke about “Youth Mental Health in Australia.” Prof. Pichet Udomratn, Ex-Co-Chair of the WPA Task Force on undergraduate and graduate psychiatric education (including CAP training), gave a lecture entitled “Tomorrow’s Asian Psychiatrists: Recommendations on Postgraduate Training in Psychiatry.” Prof. Udomratn reported recent activities of the WPA and introduced a core curriculum in psychiatry that can be used as a template by various countries. The Secretary to the WPA CAP Section, Dr Norbert Skokauskas, made a comprehensive presentation about the Section’s activities which was titled “WPA, Child and Adolescent Psychiatry Section perspectives on ADHD: the challenges ahead.” He also conveyed the good wishes of the Chair and Co-Chair of the WPA CAP Section, Prof. Bennett L. Leventhal and Gordana Milavic, who were also co-authors of the paper, but were unavoidably absent. Dr. N. Skokauskas’ second presentation focused on education in child and adolescent psychiatry, and among other things he spoke about the WPA CAP Group on Teaching and Learning’s activities. Two regional WPA CAP Section Representatives were also in attendance at this symposium, Dr. Masaru Tateno (Japan) and Dr. Jibril Abdulmalik (Nigeria). Dr. Tateno, a founding member of the Japan Young Psychiatrists Organization (JYPO), was a member of the local organizing committee and chaired a symposium session. Dr. Abdulmalik presented a paper on the comorbidity of substance use with depression among adolescent students in Nigeria. The conference was a hugely successful outing, which helped to further enhance the ties of friendship with our Japanese colleagues, whose hospitality was first-rate.
Child and Adolescent Psychiatry in West Africa

Dr. Jibril Abdulmalikaria  (Nigeria)

It was a privilege for me to have been nominated to join the Executive Committee of the WPA CAP, as the regional representative for West Africa, at the last WPA Congress. Indeed, these are exciting times for child and adolescent mental health in my region, and it is my pleasure to share some of these developments.

Gloomy climes
It is however, pertinent to contextualize the current realities for child and adolescent psychiatry in my region, and indeed most of the continent. The majority of countries in this region tend to pay far greater attention to conditions with a high fatality rate, such as maternal and child care, infections like HIV/AIDS and Malaria, to the detriment of conditions with high morbidity and potential disability, if interventions are not provided. While these conditions should rightly be accorded due attention, it is unfortunate that this is usually accompanied by very low priority, if not outright disregard for mental health conditions, which are wrongly perceived to be less important. All of which translate into poor funding and the absence of specific attention to child and adolescent mental health in the national health policies and programs. Furthermore, the continent’s population is predominantly youthful, but there are very few mental health professionals and resources to cater to their mental health needs. The availability of Child Psychiatrists and other allied professionals interested and trained to work in this subspecialty is also greatly impaired by the widespread unavailability of training programs in many countries, often a direct consequence of the absence of qualified personnel to conduct such training programs. Notable exceptions include Egypt and South Africa.

Rays of light
The formation of the African Association for Child and Adolescent Mental Health (AACAMH) and the untiring efforts of the pioneering Chairman, Professor Brian Robertson (South Africa) started the process of harmonizing the available resources and organizing periodic study groups as avenues for the provision of short-term trainings in various regions. The first edition took place in Kenya, in 2007. The second Child Psychiatry Study Group took place under the leadership of the current Chairman of AACAMH, Professor Olayinka Omigbodun (Nigeria) in Abuja, Nigeria in 2009. This was in conjunction with the WPA and the International Association of Child and Adolescent Psychiatry and Allied Professions (IACAPAP). The communiqué arising from the meeting highlighted the need for advocacy efforts and continuous collaboration with International Bodies like the WPA, IACAPAP, WHO and WFMH; while seeking innovative ways to improve access to training for child and adolescent mental health professionals on the continent.

I am happy to report that the latter objective is now being realized with the launching of the Center for Child and Adolescent Mental Health (CCAMH), situated within the University of Ibadan, Nigeria (http://ccamh.ui.edu.ng/). The Director of the Centre, Professor Olayinka Omigbodun, who is also the current President of IACAPAP, envisions the centre as an important platform for “Building up Child and Adolescent Mental Health capacity in the African region and beyond”. The Centre is currently receiving applications into academic programs leading to the award of Masters (Msc) or Diploma in Child
Child and Adolescent Psychiatry in West Africa

Dr. Jibril Abdulmalikaria (Nigeria)

and Adolescent Mental Health. The core faculty of the program will come from within the University of Ibadan, but will additionally be boosted with guest faculty from the four continents of Africa (University of Cape Town), Asia (Sangath, India), Europe (Imperial College, London) and North America (Boston University).

Furthermore, the Centre will work in partnership with other Academic Institutions in the region (Kwame Nkrumah University, Kumasi, Ghana and the University of Sierra Leone). In Nigeria, the Association for Child and Adolescent Psychiatry and Allied professions in Nigeria (ACAPAN) has also been formed with Dr Oluwayemi Ogun, a senior colleague and Teacher, as the Foundation Chairman, while I serve as the Secretary.

Open Invitation
While we are very excited about these developments in our region, we are also keen to seek for more partnerships and collaborations, to further strengthen capacity for the continued development of child and adolescent mental health services. This could be in the form of training opportunities, research collaborations among others. I hope to advocate passionately for the commitment of the WPA CAP in this regard, while appreciating the expressed willingness of this Board, under the Leadership of Dr Bennett Leventhal to help in any conceivable manner.

Commitment
The commitment of several personalities (within and outside the region) to the improvement of child and adolescent mental health in our region is most gratifying and it is a pleasure to work with them, and to be able to count on the support of the WPA Child and Adolescent Section, IACAPAP, AACAMH and other organizations to provide constructive synergy, moving forward.
Co-morbidity within Psychiatric disorders and Medical Illnesses

Dr. Mohamad Khalid (KSA) and Dr. Norbert Skokauskas (Japan/Ireland)

The 8th international Conference, “Co-morbidity within Psychiatric disorders and Medical Illnesses” was organized by the Saudi German Hospital, Saudi Psychiatric Association, and Motmaenna Psychiatric Centre in collaboration with the World Psychiatric Association, Okasha Institute of Psychiatry - Ain Shams University, and the Egyptian Psychiatric Association in April 2012, Jeddah, KSA.

This Psychiatry Congress in Jeddah has become one of the largest and most important international meetings in the Middle East, with a strong World Psychiatric Association presence. Prof. Dinesh Bhugra, WPA President-Elect (UK); Prof. Ahmed Okasha, WPA Past President (Egypt); and Prof. Hans-Jurgen Möller, Past President of the European Psychiatric Association (Germany), gave the main keynote presentations. Altogether there were 50 lectures and 34 workshops, and more than 60 percent of all presenters came from overseas. Several sessions were dedicated exclusively to Child and Adolescent Psychiatry, and Norbert Skokauskas, secretary to WPA Child and Adolescent Psychiatry, gave two lectures.

There were more than 1200 attendees not only from the KSA and the Middle East but also from many European, African and Asian countries, as well as Canada and the USA. Interestingly, there was a big group of psychiatrists from China.

For the first time, our psychiatry Congress was on air in the Internet, and everybody in the world was able to follow it online. In fact, more than 150 “virtual” attendees in Egypt were sitting in Dr. Adel Sadek Hospital and watching the Congress online. The Congress has received massive positive attention from the local and international media including Almadina, Alhaiaa, Okaz, Alarabia, Al-Majd, MBC, and Saudi channel.

The Congress was a great success, and we would like to take this opportunity to thank all speakers, attendees, organizing committee members and 85 volunteers from different universities for their valuable input.
WPA CAP initiated and supported sessions at IACAPAP Congress:

*WPA CAP symposium ADHD across the World*

**TIME: 8AM, 25/07/2012**

Attention-deficit Hyperactivity Disorder (ADHD) is one of the most prevalent mental disorders of childhood (with prevalence rates varying from 5% to 10%) and it can continue through adolescence and adulthood. ADHD is also one of the most common causes of referral to family physicians, pediatricians, pediatric neurologists, and child psychiatrists. ADHD’s impact on society is enormous in terms of financial cost, stress to families, disruption in schools, and the potential for leading to criminality and substance abuse.

There is an extensive literature on ADHD, but relatively little emphasis has been placed on regional and cultural differences and diversity variables, such as ethnicity. Moreover, services and interventions available for children with ADHD and their families vary from country to country.

This session aims to describe a diversity of approaches in diagnosing and treating ADHD across the World. A complex ADHD case will be presented, and speakers from all WPA regions will describe how they would assess and manage such a case in their region. In addition to this case discussion, brief overviews of the latest and the most important developments on ADHD will be presented from each region. The organizers hope that this WPA session will serve as a platform for future collaboration.

Learning Outcomes:
- Participants will learn about the diversity of approaches in diagnosing and managing ADHD.
- Participants will become aware of the latest studies on ADHD across the World.
- Participants will learn about the best ways to manage ADHD using limited recourse.

Chair: Bennett Leventhal (USA); Co-Chair: John Fayyed (Lebanon)

Speakers:
3. “ADHD in WPA Region II. Europe,” Evgeni Koren (Russia)
4. “ADHD in WPA Region III,” Africa and Middle East. John Fayyed (Lebanon)
5. “ADHD in WPA Region IV,” Australasia. Savita Malhotra (India)
6. “ADHD in WPA Region IV,” Far East Asia. Young-Shin Kim (South Korea)
Major Upcoming Events

WPA CAP Symposium: “Tourette’s Disorder in a Child: Diagnosis and Treatment: An International Perspective"

TIME: 13.45 AM, 24/07/2012

Tourette’s Disorder (TD) is a relatively common childhood onset, complex neuropsychiatric developmental disorder with mean prevalence of 1%, varying from 0.5 to 4%, in the school age population. TD typically continues through early adolescence and attenuates by early adulthood, but may be disabling and may persist into adulthood. Almost 90% of clinically referred TD patients have comorbid psychiatric disorders such as ADHD, OCD, Impulse Control Disorders, Academic Underachievement, Learning Disorders and/or Non-OCD Anxiety and Mood Disorders.

Although TD is still defined by the presence of motor and vocal tics that persist more than a year, it is the psychiatric comorbidity that is the primary concern in clinically referred patients. Unfortunately, there is very little information on the complexity of the disorder throughout the world; as a result, there is often a delay in diagnosis and treatment for both tics and the associated disorders.

TD’s impact on society, patients and families is great, in terms of financial cost, stresses such as bullying and social isolation, disruption, and academic underachievement, which may result in mood disorders and possibly substance use later in life for these patients. It is clear now that professional education is needed to help clinicians all around the world to recognize, diagnose and treat TD and related conditions.

Although there is an extensive literature on TD, there is a relative scarcity of studies of cultural and regional differences in assessment of tics, and types of treatment. During the upcoming IACAPAP World Congress in Paris, the Symposium, “Tourette’s Disorder in a Child: Diagnosis and Treatment: an International Perspective,” will be presented. This session aims to describe a diversity of approaches in diagnosis and treatment of TD in Argentina, Japan, the Netherlands, and the United States. A complex TD case will be presented, and each presenter, an expert in TD diagnosis and treatment, will discuss his/her current approach to evaluation and treatment, reflecting state-of-the-art practices in the countries represented. Similarities and differences in approach will be highlighted.

Learning Objectives: Participants will learn about the diversity of approaches to diagnosis and treatment of TD from the perspective of experts in Argentina, Japan, the Netherlands and the US. Speakers will integrate relevant research into their clinical presentations.

Chair: Barbara Coffey, M.D. M.S. (USA); Co-Chair: M. Beatriz Moyano, M.D. (Argentina)

Speakers:
1. TD in Argentina: Dr. M. Beatriz Moyano (Buenos Aires, Argentina)
2. TD in Japan: Dr. Yukiko Kano (Tokyo, Japan)
WPA CAP initiated and supported sessions at IACAPAP Congress:

*Problem-Based Learning (PBL) in Child and Adolescent Psychiatry and allied disciplines*

**TIME:** 13.45 AM, 25/07/2012

**SPEAKERS:** Prof. Jeff Hunt (USA), Prof. Susan Tan (Malaysia), Prof. Prof. Anthony Guerrero (USA), Dr. Norbert Skokauskas (Ireland/Japan)

PBL represents a major development and change in educational practice in medical education, and reviews of its efficacy suggest advantageous short-term and long-term outcomes. Child and adolescent psychiatry, because of its inherently integrative, bio-psycho-social nature and emphasis on teamwork and collaboration, is a specialty learned optimally through PBL.

The workshop is proposed by the WPA CAP Group on Teaching and Learning. The Group has organized successful educational events at major CAP congresses in Europe, North America and Asia.

In this 85 minute workshop, we will first complete introductions and also orient the audience to the topic. The remainder of the workshop will impart specific skills – including faculty training, case development, and management of common challenges – that are part of contemporary best practices in PBL and will benefit both beginning and advanced learners. Additionally, the participants will experience PBL facilitation utilizing a selected case. The participants are expected to leave the meeting not only with a better understanding of the basic steps of implementing PBL, but also with ideas for future research and collaboration.
Clinical Perspectives 1: Juvenile Delinquency, Juvenile Justice: Global Perspectives (open)
Tuesday, October 23, 2012: 9:00 a.m.-12:00 p.m.
Presenters: Rama RaoGogineni, M.D., Andres J. Pumariega, M.D., SobharaniSungum–Paliwal, M.D., Preeti Jacob, M.D., Yoshio Ono, M.D., Ayesha Mian, M.D.

Clinical Perspectives 2: The Pediatric Consultation Liaison Service: A Multidimensional Model for Integration of Care (open)
9:00 a.m.–12:00 p.m.

Symposium 5: International Symposium: Examining Youth Suicide and Prevention Programs IV (open)
Tuesday, October 23, 2012: 1:00 p.m.-4:00 p.m.
Presenters: Norbert Skokauskas, M.D., Ph.D., Paul Plener, M.D., Say How Ong, M.D., Anthony Guerrero, M.D., Alan Apter, M.D., H. Victor Storm, FRANZCP

Networking for International Attendees (by invitation only)
Tuesday, October 23, 2012: 5:30 p.m.-7:00 p.m.

Symposium 17: Simon Wile Symposium on Consultation Psychiatry (open)
2:30 p.m.–5:30 p.m.
Presenters: Robert J. Hilt, M.D., Barry Sarvet, M.D., Jennifer Havens, M.D., Patricia Ibeziako, M.D., Maryland Pao, M.D.

Clinical Perspectives 14: Global Perspectives on Child Protection and Children’s Rights (open)
Thursday, October 25, 2012: 8:30 a.m.-11:30 a.m.
Presenters: Norbert Skokauskas, M.D., Ph.D., Fiona McNicholas, M.D., ParvathyPathy, Master of Medicine (Psychiatry), M.B.B.S., MilicaPejovicMilovancevic, M.D., DrPH, Barry Nurcombe, M.D.

Thursday, October 25, 2012: 8:30 a.m.–11:30 a.m. Presenters: Daniel Pine, M.D., Darrel A. Regier, M.D., M.P.H., Helena Chmura Kraemer, Ph.D., Prudence Fisher, Ph.D., David Shaffer, M.D., F.R.C.P.
International sessions at AACAP 2012

Symposium 23: DSM–5 Criteria Changes Important to Child and Adolescent Psychiatrists (open)
Thursday, October 25, 2012: 2:00 p.m.–5:00 p.m.
Presenters: Daniel Pine, M.D., Bryan King, M.D., F. Xavier Castellanos, M.D., David Shaffer, M.D., F.R.C.P., F.R.C.Psych., Gabrielle A. Carlson, M.D.

International Medical Graduate Caucus (open)
Thursday, October 25, 2012: 5:30 p.m.–7:30 p.m.
Presenters: Zheya Yu, M.D., Ph.D., Ayesha Mian, M.D.

Symposium 30: International Perspectives in Bipolar Disorders (open)
Friday, October 26, 2012: 8:00 a.m.–11:00 a.m.
Presenters: Gordana Milavic, M.D., F.R.C.Psych., Cesar Soutullo, M.D., Ph.D., Muideen O. Bakare, M.D., Paramala J. Santosh, M.D., Ph.D., Laura Viola, Ph.D., Evgeny V. Koren, M.D., Ph.D., Boris Birmaher, M.D.

Workshop 25: Collaboration with Primary Care: Developing Clinical Skills, Overcoming System Challenges (ticket)
Friday, October 26, 2012: 8:00 a.m.–11:00 a.m.
Presenters: Barry Sarvet, M.D., L. Read Sulik, M.D.

Special Interest Study Group 10: Pediatric Consultation–Liaison Psychiatry (ticket)
Friday, October 26, 2012: 5:00 p.m.–6:30 p.m.
Presenters: Claire M. De Souza, M.D., FRCPC, Tyler Pirlot, M.D., FRCPC, Lisa L. Giles, M.D., Maryland Pao, M.D.

Special Interest Study Group 12: Problem-Based Learning in Child and Adolescent Psychiatry (ticket)
Friday, October 26: 5:00 p.m.–6:30 p.m.
Presenters: Norbert Skokauskas, M.D., Ph.D., Anthony Guerrero, M.D., Jeffrey Hunt, M.D., Peter Szatmari, M.D., Cynthia Santos, M.D., Mark Hanson, M.D., Shuji Honjo, M.D., Ph.D., Xavier Coll, M.D., Say How Ong, M.D., Enrico Mezzacappa, M.D., Daniel Gorman, M.D., Kaneko Hitoshi, Ph.D., Alexis Aplasca, M.D., Moli Paul, M.D., Ph.D., and Gwendolyn Jones, M.D.

Clinical Consultation Breakfast 17: Master Clinician Myron L. Belfer, M.D., M.P.A.: Global Child Mental Health: An Unexpected Adventure (ticket)
Saturday, October 27, 2012: 7:00 a.m.–8:30 a.m.

Clinical Perspectives 35: Telemental Health Collaboration in the Medical Setting (open)
Saturday, October 27, 2012: 12:45 p.m.–3:45 p.m.
Presenters: Kathleen Myers, M.D., M.P.H., M.S., Daniel Alicata, M.D., Carol M. Larroque, M.D., Ginger Nicol, M.D., Mary I. Dobbins, M.D.