A New Resource in Spanish

15th International Training Research Seminar in Child and Adolescent Psychiatry

A School-based Mental Health Program in Indonesia

7th World Congress on ADHD, Lisbon
CONTENTS

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IACAPAP: Making Practice Accessible Globally

IACAPAP Bureau Joins South African Child & Adolescent Psychiatry Conference in Johannesburg

The 15th International Training Research Seminar (TRS) in Child and Adolescent Psychiatry

A School-based Mental Health Program in Indonesia

A New Resource In Spanish

7th World Congress on ADHD in Lisbon

What to Expect at IACAPAP 2020 in Singapore
The last 3 months have been a whirlwind of trying to understand the systems and processes for managing
1) the overall direction that IACAPAP should take.
2) IACAPAP’s effectiveness in delivering on its objectives listed in our constitution.
3) the monitoring and accountability of IACAPAP’s executive committee.

I have been using all the technological means at my disposal, mostly through video conferences, meeting with every Vice President to discuss their needs in the part of the world they represent. The Bureau consisting of the President, Secretary General, Treasurer and Immediate Past President has decided on appointing several Councillors and two Presidential Fellows.

In a way, we are setting the governance structure for IACAPAP in the next four years of this term of office.

The councillors are senior members of our fraternity, namely Gordon Harper (our longstanding previous treasurer), Fusun Cetin (our past Secretary General) and Zheng Yi (our former Vice President) to help monitor and advise our aims and activities. The Presidential Fellows represent two important areas that we are the focus of our planning moving forward, that of Fundraising and Education. Let me explain.

Fundraising will form the foundation for our work. In order to achieve our aims and stay relevant, we need resources.

However, fundraising is not just about money. The term philanthropy is defined as a desire to promote the welfare of others, expressed especially by the generous donation of money to good causes. It is important to realise that the spirit of philanthropy is about promotion of the welfare of others and good causes.

Apart from improving the financial position of IACAPAP, philanthropy can help develop our strategic priorities by mapping needs and the resources necessary to meet those needs as well develop sustainable, scalable projects.
It can create an engagement of an international support base and recognise the efforts of a global team. The professionals can also be seen as partners in the process.

I am very aware of the philanthropy of many of the existing Executive Committee members who have contributed in money as well as in kind towards the work of IACAPAP. IACAPAP should be seen as an opportunity for people to give in support and we must show that we are a good cause to give to.

Liu Jing will help spearhead this fundraising effort by exploring various funding sources from individuals, foundations, and governments. Prof Liu is Professor and Chief of the Mental Health Center at Peking University and also heads the department at the Sixth Hospital in Beijing. She is one of the chief movers of child psychiatry in China.

We will also look at gifts beyond just money, such as voices (speaking up for our cause), influence (introduction to important opportunities) and time (providing professional services pro bono). We will also need to explore the various methods and techniques to engage and recognize donors.

If fundraising is the foundation, education is probably the most important tool for building on that foundation. We have collected an impressive array of educational products in the last decade or so.

➢ It started with our regular world congresses encapsulated by monographs consistent with our themes. These publications have, over the years covered the breadth of Child and Adolescent Mental Health.

➢ We have also produced, largely through the efforts of Joseph Rey, an extensive and dynamic textbook that is online and open access, which now also provides a virtual curriculum of additional educational resources--including slide presentations, end of chapter questions, and clinical exercises.

➢ We have an affiliated peer review journal to share important research findings.

➢ We have a massive open online course on child and adolescent mental health.

➢ We have also developed a process of supporting regions of the world needing training with the development of Henrikje Klasen’s iCAMH (international Child and Adolescent Mental Health) programme

It is now time to connect these various efforts to make this a global educational effort. While Julie Chilton’s main role is further development of the textbook into a virtual curriculum, she will also incubate new resources and prototype these related initiatives into a feasible, flexible educational package for global needs, both in well-resourced as well as poorly resourced areas. Julie is an Assistant Clinical Professor at the Yale Child Study Center and also has a thriving private practice who is passionate about education.

I look forward to building this home we call IACAPAP together with everyone who believes in our cause: the promotion of mental health and development of children and adolescents through policy, practice and research around the world.

We hope each of you can join us in supporting the mission of IACAPAP. Whether you decide to contribute financially, attend our congresses and events, share your knowledge with others, amplify our voice on social media or whatever way you see fit, you are making a difference in the wellbeing of children around the globe!
IACAPAP Bureau Joins South African Child & Adolescent Psychiatry Conference in Johannesburg

By Prof. Petrus J de Vries
Department of Psychiatry and Mental Health, University of Cape Town; IACAPAP Treasurer

The South African Association of Child & Adolescent Psychiatry and Allied Professions (SA-ACAPAP) held their 22nd Conference from May 23rd-25th, 2019 in Johannesburg. The conference theme was ‘Sustaining Development in Child & Adolescent Mental Health’, inspired by the Sustainable Development Goals, and close to 200 delegates attended.

SA-ACAPAP invited three IACAPAP Bureau Members (Profs Daniel Fung, Bruno Falissard and Christina Schwenck) to join me, as current IACAPAP Treasurer, at the conference. The Bureau was joined by Prof Maretha de Jonge, Professor in Orthopedagogics from Utrecht/Leiden Universities as invited international speakers.
As part of the conference we also held an emerging researcher workshop for early career mental health professionals. I was delighted that all the IACAPAP Bureau members and Prof de Jonge offered their time and expertise to join Prof Linda Theron, Dr Eugene Davids and Dr Liezl Schlebusch, all from South Africa, in a highly successful workshop.

Prof Petrus de Vrie
At the conference, he was elected as President of SA-ACAPAP for the 2019-2021 term.
The 15th International Training Research Seminar (TRS) in Child and Adolescent Psychiatry

By Jane Pei-Chen Chang

Department of Psychological Medicine, Institute of Psychiatry, Psychology and Neuroscience, King’s College London
Department of Psychiatry, China Medical University Hospital, Taiwan

I was thrilled to participate in the 15th International Training Research Seminar (TRS) in Child and Adolescent Psychiatry (CAP), which was held from 12th to 17th of May, 2019 in Rome, Italy. In this article, I would like to share with you my exhilarating experience.

TRS was founded by Professor Ernesto Caffo of University of Modena and Reggio Emilia (Italy) and organized by Fondazione Child.

Professor Bennett Leventhal from the University of California San Francisco (UCSF, USA) was the main organizing faculty this year, and the rest of the faculty (20 in total) came from top universities from around the world. They are all leading experts in areas of CAP and research. Moreover, a total of 44 CAP trainees/psychiatrists from 26 countries (Afghanistan, Albania, Argentina, Armenia, Belgium, Costa Rica, Egypt, India, Indonesia, Italy, Japan, Jordan, Kenya, Lithuania, Malaysia, Nigeria, Philippines, Qatar, Russia, Slovakia, Spain, Sri Lanka, Sudan, Taiwan, Turkey, Uganda, UK) attended the seminar this year.
The 15th International Training Research Seminar (TRS) in Child and Adolescent Psychiatry

TRS consisted of 24 lectures and 4 colloquiaums within the first 4 days and a 10-minute presentation of the current or proposed research projects of each trainee on the last day.

Within the 5-day training seminar, we also had 3 sessions of small group meetings, each session lasted 2 hours. The main goal of the small group meeting was to discuss about our proposed or on-going research projects and how to present our ideas/study to the rest of the trainees on the last day. The lectures ranged from fundamental talks on statistical analysis and diagnosis in CAP, to development of community interventions, to psychotherapy research methods, and to reviews on genetics and brain imaging.

On the other hand, the colloquiaums consisted of topics on brain development activities, ethics, internet and technology, and genetics.

One of the most memorable lectures was by Professor Bruno Falissard, previous president of IACAPAP, about public health and mental health in children and adolescents. I think this is very important for all early career child and adolescent psychiatrists.

Professor Falissard emphasized that due to the resistance and stigma of psychiatry in the general public, the terms psychiatry and mental illness have been in the gray zone. Thus, we should clarify the definition of mental health, well-being, mental illness and psychiatry, and help the general public to recognize that psychiatry is a medical specialty and mental illness is just like all other diseases. In addition, child and adolescent mental health is now a major public health issue, therefore it is important to re-examine the role of the child and adolescent psychiatrist within society.

Group Photo of the 15th TRS
Another interesting talk was by Professor Michele Colajanni from the University of Modena and Reggio Emilia (UNIMORE) in Italy about how to manage our future when internet meets psychology. It is shocking to learn how much data we share online without awareness during each day of our lives, thus now is the time to think about how to use this internet information to make advancement in our lives, clinical practice and research.

Lastly, I had great fun during the colloquium with Professor Judy L. Cameron from the University of Pittsburgh, which is to build a brain with straws and pipe cleaners with your team and see how childhood protective factors and adverse events will affect how well the brain is structured, and our team built the sturdiest brain! This Brain Architecture Game is developed by The National Scientific Council (NSC) on the Developing Child Working For Kids: Building Skills. This section of NSC helps to work within communities to teach adults on how to help children build sturdy brain circuits for cognitive skills, social-emotional skills and stress management.

One of the main highlights of this year’s TRS is that we were able to visit the Ministry of Health of Italy (Ministero della Salute) to discuss how we can help improve services and research in CAP. This was super exciting for me to know that so many CAP professionals were in the room with policymakers with the same goal in mind, which is to improve child and adolescent psychiatry services around the world.

Although TRS ran on a tight schedule, there was always time for us trainees to explore Rome, throw coins in Trevi Fountain, and visit the Sistine Chapel and Vatican Museum together. I believe the most valuable thing that I have taken away from TRS is not only the knowledge of CAP from the lectures and colloquiums, but also the mentorship and friendship developed during TRS, which will definitely help me in my career as a child and adolescent psychiatrist. It’s definitely a work hard and play hard training seminar full of wonderful memories!

We the trainees are all looking forward to the IACAPAP World Congress in Singapore next year to present the findings of the research we have developed during this TRS and have more fun together at IACAPAP!

If you wish to apply in the future, visit: http://www.fondazionechild.it/
A School-based Mental Health Program in Indonesia

By Isa Multazam Noor, MSc, MD (Child Psych)
Vice Chairperson of the Indonesian Psychiatric Association Jakarta Chapter 2016 - 2019

At Dr Soeharto Heerdjan Mental Hospital in Jakarta (the capital city of Indonesia), ADHD cases are the most commonly encountered with 26% of all cases seen, followed by autism and intellectual disability at 19.5% and 16% respectively. Most referrals to child and adolescent mental health services come from the primary health care sector or are based on a recommendation from a teacher at school.

A school-based mental health program that has been carried out in Indonesia focused both on training activities as well as mental health promotion. The program targeted general practitioners, primary health carers and school teachers and trains them to recognize signs of emotional and behavioral problems in children and adolescents.

The program was started by the Dr Soeharto Heerdjan Mental Hospital in 2010, Initially in the form of mental health Q & A and developed to a “Mental Health Early Detection Training.”

General practitioners in the primary health care sector also get additional training in the form of a workshop on the use of the SDQ (Strengths and Difficulties Questionnaire). The program was developed as a form of collaboration between community mental health units in psychiatric hospital together with primary health care programs and school partners.

The program also includes counselling and education about contemporary issues of child and adolescent mental health, for example: game addiction, internet addiction, and healthy sexual behavior. Screening efforts are also an important component of the program.
The training and mental health screening for child and adolescents have now developed in the form of inter-island services in a thousand islands farthest from the Jakarta province of Indonesia. These efforts involved various parties-ranging from mental hospitals, provincial health office tribes, professional psychiatric organizations in Jakarta (Indonesian Psychiatric Association Jakarta chapter) and primary health care stakeholders.

The promotion part of the program included events at community festivals and at “car free days” where no cars are allowed on one of the main streets in Jakarta. Since our work is in a metropolitan city, these social activities focused on raising awareness about urban mental health. This effort intends to bring people closer to understanding mental health issues and combat the stigma of mental disorders.

To respond to the increased referrals that can come with increased awareness,

Dr. Soeharto Heerdjan Mental Hospital in Jakarta also began to improve child and adolescent mental health services by opening a new national center for ADHD, autism and learning difficulties in Indonesia. The center provides assessments, periodic evaluations, and the latest therapies such as play therapy, neurofeedback, Transcranial Magnetic Stimulation (TMS), and Test of Variables of Attention (TOVA) therapy.

The next steps in the school mental health program currently being prepared will involve a broader audience including the education office at the provincial level. This supports continuing education programs for teachers in the junior and senior high schools in Jakarta. Other elements of the program include developing brochures and leaflets on variety of topics including internet gaming disorder, alcohol and substance abuse, self-harm and suicide behavior, sexual behavior, coping with stress, and developing social skills and problem-solving skills in adolescents.
To further compliment these efforts, the 4th national scientific meeting of the Indonesian Association of Child and Adolescent Mental Health (IACAMH) will take place on 19 - 21 July 2019 in Jakarta Indonesia with the main theme being “Recent Facts in Adolescents and Adults with Autism Spectrum Disorder".
A New Resource in Spanish

By Flora de la Barra Mac Donald
Adjunct professor in Child and Adolescent Psychiatry. East Medical Faculty. University of Chile

The third Edition of the Textbook of Child and Adolescent Psychopathology in Spanish has been published in Chile. The first two editions have proved to be very useful and have reached a wide audience of Spanish speakers including mental health professionals, other professionals working with children and adolescents, as well as members of the lay community interested to know more about the topic.

As was the case in the previous editions, the editors are Professors Dr Carlos Almonte and Psychologist María Elena Montt, who had invited authors from around the world to contribute to the 75 chapters of this book.

Within a developmental psychopathology framework, this book integrates new research findings in neuroscience, neuroimaging and molecular genetics to the understanding of normal development, psychopathology and resilience throughout the lifespan. The areas of prevention, mental health promotion and treatment of psychiatric disorders are discussed.

To learn more about the book, follow this link: https://mediterraneo.cl/products/psicopatologia-infantil-y-de-la-adolescencia-3-ra-edicion
The 7th World Congress on ADHD took place from 25th to 28th April 2019 in Lisbon, Portugal. The congress was organised by the World Federation of ADHD.

A total of 1600 delegates from 64 countries attended 49 scientific sessions and the poster exhibition, which showed 295 posters of various topics.

The top 10 countries with participants were Brazil, Germany, Spain, Switzerland, The Netherlands, United Kingdom, Sweden, Norway, Portugal, and Denmark.

The scientific programme consisted of outstanding Plenary Lectures, parallel Hot Topic and Research Consortium Symposia, Late breaking News, a Grand Round, a Pro and Con Debate as well as 28 guided poster tours.

Furthermore, there were additional Educational Seminars and Meet the Expert Sessions, which took place during afternoon sessions.

There were more than 1000 abstracts submitted by young scientists; the best 8 were selected to give a presentation as part of the two Young Scientist Sessions. With this approach the committee intended to emphasize the importance of original scientific contributions by young scientists in the ADHD field.

Of special note and interest was the Pro and Con Debate on the topic “Do we need to treat subthreshold ADHD?”, where Joseph Biederman and Prof David Coghill debated each other. Children were defined as “with subthreshold ADHD” if their age of onset of ADHD was >12 years, or if the presented with four or if...
the presented with four or more symptoms of ADHD, but less than six as it is required for the DSM-5 criteria.

Prof Biederman supported the treatment for subthreshold ADHD, stating that prevalence of subthreshold is around 17%, and that scientific studies showed how subthreshold ADHD, in comparison with controls, have higher rates of family dysfunction, cognitive impairments, temperament problems, academic failure and juvenile justice system involvement. In addition they also present with higher rates of psychiatric comorbidity.

According to Prof. Bierderman, children with subthreshold ADHD have patterns of comorbidity and dysfunction that are significantly worse than children without ADHD, and that closely resemble the patterns identified in children with full ADHD and a clinical diagnosis. Interestingly, children with subthreshold ADHD had a significantly higher proportion of females, were older, of higher social class and had lower perinatal complications compared to full ADHD.

Prof Coghill’s position was against the treatment of subthreshold ADHD.

Firstly, he emphasized on a systematic review of 18 studies by Balas and Kereszten in 2014, which noted that different definitions of subthreshold ADHD exist, that a large variety of instruments are used, and that because of these discrepancies the prevalence of subthreshold ADHD is wide-ranging from 0.8 to 23.1% and therefore non-reliable.

He noted that there is a considerable cross national variability in prescribing medications for ADHD, ranging from 0.6% in the UK to 6.7% in the US, with other countries showing cross sectional prevalence of 1.4% in Australia, 1.8% in Canada, 1.9% in Northern Europe, and 0.9% in Asia Pacific countries.

Finally, Prof Coghill insisted that treating ADHD symptoms with medication is not without clinical risks, and used a study published in 2018 by Curtin and colleagues that showed an increased risk of diseases of the basal ganglia and the cerebellum in patients treated with stimulants.

Overall, the Pro and Con debate gave participants plenty of food for thought, which was very much appreciated.
What to Expect at IACAPAP 2020 in Singapore

By A/Prof Ong Say How
Chairman of the Organising Committee of IACAPAP 2020, Chief & Senior Consultant, Department of Developmental Psychiatry, Institute of Mental Health (Singapore)

And Dr Lim Choon Guan
Scientific Program Committee Chair of IACAPAP 2020, Senior Consultant and Deputy Chief, Department of Developmental Psychiatry, Institute of Mental Health (Singapore)

The Year 2020 marks 50 years of child psychiatry in Singapore, a significant milestone in the history of psychiatry in the country. Organizing the 24th edition of IACAPAP hence is particularly meaningful for Singapore as well as for the department of child & adolescent psychiatry.

Child psychiatric service has come a long way - from an ad hoc, part-time service in 1970 to a full service with a complement of nearly 100 staff comprising consultant psychiatrists, psychiatric residents, psychologists, social workers, occupational therapists and nurses. From 550 children and families seen in 1980, our child clinic now sees about 2500 new cases a year. Child psychiatric units have also been set up in two medical hospitals (both with a well established pediatric department) to provide faster access to child psychiatric services. Within this crucial defining period, child psychiatrists have recognized the importance to work closely and collaboratively with various ministries and institutions involving education, social welfare and judiciary systems. This relationship has led to great success in shaping Singapore’s mental health service landscape. Despite being a developed country with high quality of life, education and healthcare standards, Singapore faces its own challenges in terms of rapid changes in family structures and values alongside problems such as excessive screen time among the young, and higher prevalence of self harm and new psychoactive substance use in its youth population.
Consequently, the topics offered by this edition of IACAPAP will place emphasis on these growing trends in mental health in a modern society. However, issues plaguing developing countries are not forgotten. The congress hopes to strike a balance in its spread of discussions on relevant and current topics seen by child psychiatrists and mental health professionals worldwide.

This is the first time that the IACAPAP will be held in Southeast Asia, and we hope to ensure as much representation from each Asian country as possible, while also ensuring representation from the global community. In line with the lifespan view in psychiatry, we wish to emphasize the importance of early assessment and intervention with our congress theme ‘Starting from the Beginning – Laying the Foundation for Life Long Mental Health’. Children spend the most time at home and in school, and families are supported within their own community.

As such our conference aims to bring together professionals and individuals from all sectors (including mental health, education, social…etc.) so that we can share and learn from one another, in addition to networking.

Please refer to our congress website which we will start to update along the way as the scientific programme slowly shapes up. We welcome those who are interested to organize symposiums or make oral/poster presentations to make their application through our website (www.iacapap2020.org)

Abstract submission will open on 16 July 2019! Find out more on: www.iacapap2020.org
Want to share important events, programs or activities from your country with a wide international audience?

SUBMIT AN ARTICLE TO THE IACAPAP BULLETIN!

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