The History of IACAPAP

The International Association for Child and Adolescent Psychiatry and Allied Professions

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Spring 2012
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For many years I have thought of writing the history of our Association. In my capacity as Archivist with access to all assembled data and collected documents, not least the minutes of meetings of the Executive Committee and the General Assembly (though missing quite a lot of information before 1975), no one else would have had a better chance to do so. An international organization such as The International Association for Child and Adolescent Psychiatry and Allied Professions, like all large organizations, should be aware of its history for better accomplishment, decision-making and effective function. A written history of the Association will certainly promote the standing of our discipline amongst others in medicine and especially in psychiatry. As our former president Donald Cohen put it in 1993 "Child psychiatry is under so much threat from various directions that a historical perspective might help give us a sense of momentum".

Already in 1958, Hermann Stutte from Germany in a letter to Moritz Tramer in Switzerland expressed his regret that there existed no history of child psychiatry. He was of the opinion that "such a history would benefit the reputation and the good name of our specialty". Eventually this was put right in the book "Geschichte der Kinder- und Jugendpsychiatrie in Deutschland in den Jahren 1937 bis 1961", written by Rolf Castell et al. in 2003 (1). I mention this book because it is where I have found information about the earliest times of our Association (not available in our own files in the Archives).

According to previous minutes of the Executive Committee, the writing of the history of the Association was discussed and planned several times over the years but only once realized in a shorter version by Caplan, Jensen and Lebovici in 1985 and 1986 (2, 3), published again in the IACAPAP Newsletter in 1994 (4).
In 1935 a group of European child psychiatrists started off to establish and expand contacts between psychiatrists working in the new medical field of child psychiatry. These pioneers were: Georges Heuyer (France), Moritz Tramer (Switzerland), Hermann Stutte (Germany), Carlos de Sanctis (Italy), Nic Waal (Norway) and Emanuel Miller (UK).

What we call IACAPAP today started in 1937 as The International Committee for Child Psychiatry. This committee aimed to organize a scientific congress and to promote and support the scientific approach to the mentally ill child. A "Bureau du Comité International" consisting of three presidents – past, current and elect - was instituted as well as a "Comité executif", the latter with 12 members besides the president and the secretary. Georges Heuyer, head of the "Clinique annexe de neuropsychiatrie infantile" in Paris, organized and chaired the first congress in Paris in 1937, officially called the First International Conference of Child Psychiatry; Moritz Tramer (Switzerland) was also involved in the organization. Delegates from 26 countries, mostly European, took part.

Heuyer was subsequently appointed to the first European chair of child psychiatry in 1948 in Paris. (World-wide, the first chair of child psychiatry was held by Lanfranco Ciampi in Rosario, Argentina, in 1920!)

Ten years and a World War later, the second international congress took place in London in 1948. At this meeting the International Committee was renamed The International Association for Child Psychiatry (IACP). Representatives from 30 national societies took part. It was decided all countries were to have access to IACP, however a Credentials Committee was set up to verify the qualifications of each applicant. Eventually, after several years of debate, it was accepted that each country would decide the constitution of its representative society in accordance with its dominant values and professional ideology. Thus the International Association came to consist of a consortium of heterogeneous national societies, some strictly medical and some with a multidisciplinary membership.

The name of the Association was changed again during the Lisbon congress in 1958, this time to...
The International Association for Child Psychiatry and Allied Professions (IACAPAP). Not until the 9th Congress in 1978 in Melbourne, Australia, were adolescents incorporated into today’s official name: The International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP). There was disquiet about changing the name of the Association and concerns about a possible splitting of our discipline – a threat reinforced years later, when separate international organizations for adolescent psychiatry (the International Society of Adolescent Psychiatry, ISAP in 1984, now the International Society of Adolescent Psychiatry and Psychology or ISAPP) and infant psychiatry (the World Association for Infant Psychiatry and Allied Disciplines, WAIPAD in 1992, now the World Association for Infant Mental Health, WAIMH) were created.

Thus, the movement towards international child psychiatry began in Europe amongst medical specialists in child psychiatry. However, with the migration of child mental health professionals to the United States before and during the Second World War, North America also became involved at early stages of the international association. From the 1970s professionals from other parts of the world began to be elected to the Executive of IACAPAP, reflecting the global distribution of its member organizations.

In 1954 the Association was officially designated in Massachusetts, USA, as a tax-exempt organization. Currently IACAPAP is registered in Geneva, Switzerland, as a non-government organization (NGO), structured as a corporation and empowered as a juridical entity according to articles 60 ff. of the Swiss Civil Code and the Constitution of IACAPAP. It is the international professional body that serves as an umbrella organization for child and adolescent mental health associations throughout the world. It is an advocate for troubled children and their families.

AIMS OF THE ASSOCIATION

If networking with like-minded professionals was the initial driving force for the Association, the emphasis soon evolved into its current objectives, namely: “To advocate for the promotion of mental health and development of children and adolescents through policy, practice and research. To promote the study, treatment, care and prevention of mental and emotional disorders and disabilities involving children, adolescents and their families through collaboration among the professions of child and adolescent psychiatry, psychology, social work, paediatrics, public health, nursing, education, social sciences and other relevant disciplines”.

To achieve these aims one of the main activities of IACAPAP has been to organize international congresses for its members to meet with colleagues, to learn from each other and to promote ethical child and adolescent mental health services and practices. From the beginning, the Constitution stipulated that congresses were to be held every four years but in 2008 a decision was taken that the Association shall organize a world congress every two to four years, circumstances permitting. In addition to this, regional conferences devoted to specific topics have been organized regularly over the years. During the last decades, activities such as study groups (seminars) in low income countries, international research seminars for young scientists and since 2004 the Donald J. Cohen Fellowship Programme have broadened the services offered by IACAPAP to mental health professionals. Publications such as the Bulletin, the IACAPAP book series and Declarations complete the picture. The IACAPAP website www.iacapap.org is the portal to access much of this material.

MEMBERSHIP

The Association was founded by psychiatrists. Initially membership was open only to members of the medical profession working with children. However, from early on, attendance to meetings was also open to non-medical professionals working in the field. Membership of the Association was a much discussed topic at the Assembly in 1948. As a result those working in allied professions such as clinical psychologists, child psychoanalysts and psychotherapists, psychiatric social workers and others engaged in the psychiatric treatment of children were invited to participate in meetings of the Association – though they were not initially admitted as members. Eventually eligibility for membership came to include registered medical practitioners with psychiatric qualifications or training but also non-medical professionals technically qualified to work in child guidance clinics and institutions or who were engaged in

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the psychiatric treatment of children, thus including psychologists, psychotherapists and social workers. The interdisciplinary nature of the Association was stressed from the beginning, but the current multi-disciplinary membership took some years to develop.

The main members of IACAPAP, but for the very beginning, have been national bodies involved in child and adolescent psychiatry. However, each country was free to determine which professions should be included in its own organization. The category of associate (individual) members was established in 1954. These individual members, both child psychiatrists and other professionals, were quite numerous at early stages despite their mostly simultaneous membership of their national organizations and this was probably led by a wish to be more closely connected with the Association. Today individual membership is only possible from one and the same country.

More than one national organization can be considered for membership from one and the same country. However, it was decided that any such country could not exceed 15% of all members with a voting right at assemblies. Currently, the wording of the constitution regarding this issue has been changed to the effect, that no country will have more than one vote. National member organizations from that country will have to share this vote.

Today the Association has 58 full members from all continents and is steadily continuing to reach out to countries where our membership is either thin or non-existent.

THE EXECUTIVE COMMITTEE

Officers of the Executive Committee (EC) serve as individuals and do not represent their country nor their national member association. They serve over a period of four years between General Assemblies.

From the start the EC was composed of the president, the secretary-general, the treasurer, one or two vice presidents and one assistant secretary-general. From 1948, with the Association known by its first official name of IACP, the EC was larger with five vice presidents (including the past-president) and one assistant secretary-general. The position of an Immediate Past-President ex officio was instituted in 1954. From 1978 and to the present day there have been six vice presidents and three assistant secretaries-general.

Within the EC, a Bureau consisting of the President, the Secretary-General, the Treasurer and the Immediate Past-President manages the day-to-day affairs, the main issues and projects.

This is the list of Presidents from 1937, elected at General Assemblies:

- 1935 Georges Heuver, France
- 1937 Paul Schröder, Germany
- 1945 John R. Rees, UK
- 1948 Frederik H. Allen, USA
- 1954 Jenny Aubry, France – succeeded by Victor Fontes, Portugal
- 1958 Arn van Krevelen, Netherlands
- 1962 John Bowlby, UK
- 1966 Serge Lebovici, France
- 1970 E. James Anthony, USA
- 1974 Albert J. Solnit, USA
- 1978 Lionel Herson, UK
- 1982 Colette Chiland, France
- 1986 Reiner Jensen, Denmark
- 1990 Irving Philips, USA – succeeded by Donald Cohen, USA
- 1994 Donald Cohen, USA
- 1998 Helmut Remschmidt, Germany
- 2004 Myron L. Belfer, USA
- 2006 Per-Anders Rydelius, Sweden
- 2010 Olayinka Omigbodun, Nigeria

When reading the files of IACAPAP over the years two names stand out:

Gerald Caplan:

Gerald Caplan, MD (1917 - 2008) was born in the UK and after his training in London moved to a professorship at Harvard in the United States. Later on, in 1977 he moved to Israel. G Caplan was one of the founding members of the Association in 1945 and he served as an officer on the Executive Committee for about 25 years: as secretary-general one term and as treasurer for five terms. In 1970 at the congress that took place in Jerusalem he was appointed Honorary President. He had worked for the Association from its start and had made a major contribution to its transformation into an international and multidisciplinary body and to ensuring its high standards. He had established contact with important foundations, especially the William T. Grant Foundation, which awarded the Association a total of 158,000 USD over a 25-year period to support the meetings of the Study Group (see below) – and the Field Foundation, which over a period of 16 years made it possible for International Study Groups to meet in-between the international congresses of IACAPAP. To honour Gerald Caplan, the Grant Foundation made funding available to make it possible to invite “an outstanding expert within child psychiatry to lecture during the first part of future congresses” - usually a senior member of the Executive Committee, often the past president - and give the “The Gerald Caplan
Colette Chiland:
The Association’s Bulletin number 17 was a very special issue to honour Colette Chiland, who for more than 30 years has held positions on the IACAPAP Executive Committee. C Chiland was trained as a child psychiatrist, psychologist and psychoanalyst. Her predominant international activities have been connected to our Association, where she started as vice president in 1974, was then elected president in 1982 and organized the 11th world congress in Paris in 1986 – and is doing so again in 2012. In 2002 she was elected Honorary President of our Association. In 1973 she started to work as co-editor of the IACAPAP books and took over as editor-in-chief around 1990 until 1994. She is still going strong within the EC of IACAPAP, and she is a member of a current ad hoc Constitution revision group.

The EC’s structure looked pretty much the same during the period 1978 to 1994, with the Bureau (President, Secretary-General and Treasurer), six Vice Presidents and three Assistant Secretaries-General; altogether 12 elected officers plus the Immediate Past President ex officio. (See appendix: Table of officers, elected at General Assemblies).

Then, in 1994, the composition of the EC was changed to include additional secretaries and counsellors appointed by the President. The demands on IACAPAP internationally and regionally were seen to require some expansion of the EC to meet different tasks and a perceived need for diversification in terms of gender and profession. Donald Cohen formally created two new EC member categories, individuals to be appointed by the President: adjunct secretaries and counsellors. At the EC-meeting of July 1994, prior to the General Assembly in San Francisco, he proposed “within a new thinking of an administrative core….to enhance better communication with all countries through more active persons. These appointed administrators should be invited to the meetings of the Executive Committee”. This led to the appointment of three adjunct secretaries and two counsellors. In 1998, following an animated discussion within the EC about the implementation of these new positions and the appointment of five counsellors, Donald Cohen emphasized the need to increase the diversity of the EC in order to “make up for the uneven distribution of profession and gender” (the nominating committee had not adhered to this constitutional aspiration). The ensuing recommendation by the EC was that “the new Bureau over the next years appoint to the EC two women who would not be child psychiatrists”. In 1999 two female psychologists were appointed, one attended the EC twice, the other not at all. Then both withdrew from the EC within a couple of years for different reasons. Their appointments were never taken to the General Assembly for approval.

From 1994 to 2010 there were three to eight non-elected “adjunct secretaries” in addition to two
to five “counsellors” appointed by the President to join the EC-meetings. This made the Executive too large, expensive and difficult to manage. Therefore a decision was made to keep to the original regulations again without any additionally appointed officers. This was put into effect by the Nominating Committee with the elections at the General Assembly in Beijing in 2010, where the return to a strict constitutional state with twelve elected officers in addition to the past-president ex officio was endorsed. However, again in accordance to the President’s wish, three counsellors were also appointed.

- The Honorary Presidents, the IACAPAP book editors, the Bulletin editor and the organizers of the Donald Cohen Fellowship Program and the Helmut Remschmidt Seminars are invited to join the meetings of the EC as well as the archivist.

The EC has an important role in promoting, integrating and co-ordinating professional work for the exchange of scientific information and for fostering research in our field throughout the world.

CONSTITUTION

We can assume there must have been some regulations for the International Committee for Child Psychiatry to follow in 1937, but no copies have survived. In 1948 when the IACP was founded, there must similarly have been a written constitution – but again no copy has survived. The oldest by-laws to be found in the Archives of IACAPAP are from 1954. The guiding principles were set already at that time and have remained valid over time.

The name of the Association was changed to IACP&AP in 1958 (see above). At the General Assembly in Scheveningen in 1962, a revision was proposed aiming to divide the Association into two sections, one for the medical profession and another for the allied professions. However, this proposal was rejected. In 1967 a new set of by-laws compiled by the EC was circulated to all members – mainly addressing financial issues related to subscription dues. This shows that the by-laws, or constitution as we prefer to call it today, have been the subject of revisions several times over the years:

• to place the annual subscription dues of all member associations onto a sliding scale depending on the number of members of any association (1966) and to run the fiscal year from July 1st unto June 30th
• to differentiate categories of membership more effectively, bring in affiliate and associate membership besides full membership and to vary membership fees according to these categories (1967)
• to admit other professional groups as members. The groups of full, affiliate and associate members were instituted (1970)
• to incorporate adolescents into the name of the Association and to increase the number of vice presidents from six to seven (one of them to be the past-president) in order to “allow for better geographic representation”. Also to constitute an international study group to assist between Congresses in preparing the next Congress theme and to make this group an official component of the IACP&AP (1978)
• to decrease the number of vice presidents again to six (1982)
• to change the way of deciding membership dues (1986)
• to set itself up as a corporation, empowered as a juridical person according to articles 60 ss CCS (Constitution de la Confédération Suisse) to be registered in Geneva, Switzerland (1986)*
• again to adjust the dues structure to make it more in-keeping with the WHO/World Bank Country Income Classification (2004)
• a decision to organize a World Congress every two to four years, circumstances permitting – but to continue to have General Assemblies only every four years (2006)

*The Association has to be registered somewhere, otherwise legal difficulties may arise (responsibi-
Conferences are multi-disciplinary, have a particular theme and are often preceded by working group activities in the host country, designed to provide an educational exchange and opportunity for teaching and learning. By rotating congresses around the world, the national associations and colleagues from different regions become engaged in the work of IACAPAP, which in turn contributes to the exchange of knowledge and ideas. Congresses and the study groups are complemented by a series of books or monographs associated with the congresses.

The 1st Congress in Paris, France 1937.
This first international congress for child psychiatry was initiated by Georges Heuyer (France) and Moritz Tramer (Switzerland). Heuyer was to be the congress president. The congress' main topics were “Conditioned reflexes – Pedagogics and child psychiatry – Juvenile criminality” (W. Healy from Boston USA, the founder of the Child Guidance Clinics, presented a paper on “Intellectual disability and Criminal Responsibility”). The number of participants was 350 from 49 mostly European countries, although no lists of child psychiatrists in various countries existed at the time and therefore the difficulties in organising this congress were obvious. Official languages in addition to French were English and German. There were simultaneous translations. Paris was chosen as a venue because the World Exhibition was going on at the same time. Other large conventions also took place concurrently, amongst them The International Mental Hygiene Conference and The International Congress on Psychology – which made the organizers of our congress hope that lecturers would be attracted to present papers at all these different meetings.

The second Congress was planned to take place in 1941 in Leipzig, Germany. However, World War II made it impossible to arrange any international meetings and, besides, the elected congress president Paul Schröder had died earlier that year. In September 1945 in Zürich, Switzerland, at a meeting of the International Committee for Child Psychiatry under the leadership of Georges Heuyer, it was decided to hold the next congress in London in 1948. The recently finished World War cast a shadow over this meeting. In recognition of the enormous achievement of Great Britain during the war, an Englishman was unanimously elected as president, John Rees, who was then allowed to select his secretary-general, Gerald Caplan from London, UK.

The 2nd Congress in London, UK 1948.
The President of the International Conference on Child Psychiatry was therefore John R Rees, who was also president of the International Conference on Medical Psychotherapy and the International Conference on Mental Health – all three meetings taking place in London at the same time.
time! As proposed by Moritz Tramer, the name of the Committee was changed to the International Association for Child Psychiatry, IACP. The theme of the congress was "Personality development and its individual and social aspects with special reference to aggression" – a theme recommended by an ad hoc committee including amongst others John Bowlby, Anna Freud and Donald W.Winnicott – well-known authorities within child psychiatry! At the business meeting (General Assembly) 30 countries were represented, not only from Europe. Hans Asperger, another well-known name, represented Austria. Participation in this congress was open to medical professionals working in Child Guidance Clinics, e.g. psychologists, psychoanalysts and psychotherapists, and social workers working within psychiatry. In his opening address John Rees pointed at the very special significance of this post-war congress with regards to the situation of children and aggression in childhood. In his own words: "We can, and we must, see to it that children are more wisely handled, so that with better understanding they may grow up as people, free to make positive and useful contacts with their fellows, rather than suffer from all the negative qualities that lead to individual unhappiness and just as certainly to tensions and stresses in the larger groups of society". He also stressed the essential co-operation of different vocations among child psychiatry: "We in child psychiatry have recognised, more readily perhaps than other groups of our colleagues, that we must work together as a team …" Since 1948 there have been another seven congresses in Europe, two in the USA, two in Australia and one each in Canada, Israel, Turkey, Japan and China.

The 3rd Congress in Toronto, Canada 1954. The 3rd Congress was planned to take place in the USA in 1952, but was postponed until 1954 and eventually took place in Toronto. The President was Frederick Allen and the theme was "Emotional problems of early childhood - up to the age of six years". The International Preparatory Commission had planned the congress at a meeting in Copenhagen earlier that year to give speakers sufficient time for preparation. About 800 delegates were present. The main contents were divided in four sections of interest: childhood psychoses, general prevention, psychosomatic disorders and mother-child separation. The contributions to the congress were characterized by psychoanalytical thinking. Special emphasis was put on the preventive role of child psychiatry, in line with Gerald Caplan's work and his textbook called "Emotional Problems of Early Childhood"; which was published in 1955 and became highly influential worldwide.

The 4th Congress in Lisbon, Portugal 1958. The President was Victor Fontes. It should have been Jenny Aubry who for personal reasons had resigned during her term and was replaced by Fontes. The theme was "The emotional life of the child 6-12 years", a follow-up of the theme in Toronto. Five special fields of interest were addressed: Emotional deprivation of children 6-12 years old – Teamwork in child psychiatry – Education of child therapists – Psychotherapeutic methods – Somatic aspects within child psychiatry. This last theme was especially requested by Georges Heuyer, who insisted on giving special attention to somatic causes of child psychiatric illnesses. He insisted that one full day of the congress be devoted to more eclectic child psychiatry, not just psychoanalysis. At the closure of the congress Léon Michaux from France emphasized that both psychosomatics and psychoanalytic theories and techniques contributed to the field of child psychiatry and that these different approaches should enrich each other. Nic Waal from Norway talked about teamwork within our specialty, pointed at difficulties to integrate different views in the best interest of the child and the family and stressed the necessary feeling of security and identity in all team members to create a true means of democratic co-operation. – A final plenary session was organized, moderated by Gerald Caplan, at which group discussions and symposia were reviewed and discussed by a panel.

Within the frame of this congress a symposium arranged by the UEP (Union Européenne des Pædopsychiatres) on the training situation of child psychiatrists in Europe led to the creation of a commission to work towards the goal of harmonizing the training of specialists in Europe – later to be fulfilled by the UEMS (Union of European Medical Specialists).

The 5th Congress in Scheveningen, The Netherlands 1962. The President for this Congress was Dick Arnold (Arn) van Krevelen. The theme "Primary prevention of mental disorders in children", for the first time recognized and addressed at this congress, was divided into: general prevention, prevention of somatic etiologic factors, prevention of psychosocial etiologic factors and prevention of mental disorders in the social environment. Discussion groups were formed, dealing with topics such as: the dynamics of a team – group dynamics in society – co-operative work in medicine – co-operation with day care centres, with schools, with legal services – training of child psychiatric staff – training of social services involved in prevention. The highlight of the congress was, according to the majority of participants, an evening session with three pioneers in child psychiatry: Moritz Tramer, Georges Heuyer and Leo Kanner, discussing the future of child psychiatry. Tramer called attention to the fact that adult psychiatry and paediatrics were the "mothers" of child psychiatry and pointed at the necessity of independence for our discipline. Heuyer stressed his opinion that child psychiatry among all other medical disciplines was most complex and challenging since it had to bear responsibility for the future mental
health and social development of children. Kaner expressed his hopes for the establishment of child psychiatry as an internationally orientated special discipline of medicine. There was not much discussion about psychoanalysis.

The 6th Congress in Edinburgh, United Kingdom 1966. The President was John Bowlby. The theme was “Puberty and Adolescence”. There were four plenary sessions. Forty discussion groups took place and were to “feed” the final plenary. There were simultaneous translations into English, French and German. One innovative session addressed the status and training of the child psychiatrist. There were visits to centres of interest and a pre-congress publication: “Fundamental concepts of puberty and adolescence” was made available to each Congress participant.

The 7th Congress in Jerusalem, Israel 1970. The theme was “The Child in his Family” and the Congress President was Serge Lebovici. The scientific work was organized by an international study group together with the Executive Committee. There were six simultaneous daily symposia on the following themes: 1. The family as a psycho-social unit. 2. Mental disorders in the family. 3. The influence of physical illness of the child or the parents on the child’s mental equilibrium. 4. The family and its environment.

The 8th Congress in Philadelphia, USA 1974. The President was E. James Anthony. Very little information about this meeting is available except for the theme: “Children at Risk. The vulnerable child – psychiatric risk and mastery in childhood”. The main theme was divided into symposia on: The child as an individual - The child and the family - The child and the school - The child and the community. In addition informal meetings were arranged with top leaders in child psychiatry and allied professions, as well as an evening of home hospitality and field demonstration visits.

The 9th Congress in Melbourne, Australia 1978. Albert Solnit was the President and Winston Rickards the Chairman of the Congress Organising Committee. The theme was “Children and Parents in a Changing World”. There were 647 participants from 27 countries and all continents.

The 10th Congress in Dublin, Ireland 1982. The President was Lionel Hersov. The theme was “Children in Turmoil – Tomorrow’s Parents”. There were 14 parallel sessions taking place most days, 36 symposia, 15 workshops and 388 open papers, as well as 3 discussion groups. There were scientific sessions on: Child and adolescent development under conditions of turmoil – Family turmoil and change – From infancy to late adolescence: responses to stress and disadvantage – The transformation of child and adolescent into parent – Parenthood. The congress took place at Trinity College. There were some organizing difficulties as there were two main headquarters, in Dublin and in London, but these were ironed out thanks to the generous hospitality of Irish colleagues of the Local Organising Committee and “a good humoured level of toleration on both sides”. Philip Graham gave a marvellous summing-up of the congress and the President “dismissed” the participants with the following Irish blessing, bringing tears to many eyes:

May the road rise to meet you
May the wind always be at your back
May the sun shine warm upon your face
The rains fall soft upon your fields
And until we meet again
May God hold you in the palm of his hand.

The 11th Congress in Paris, France 1986. The President was Colette Chiland and the theme “New approaches to infant, child, adolescent and family mental health”. There were sections addressing the broad spectrum of child and adolescent psychiatry: The concept of mental health – Perinatal factors – Aids and obstacles to development related to changes in life styles – A new look at adolescence – The new shape of mental health and mental pathology – The inequality of mental health – New forms of services for new problems, and Meet the author sessions. Volume 9 of the IACAPAP series “The Child in the Family” was based on this congress.
The President was Donald J. Cohen. The theme was: "Trauma and recovery – Care of Children by 21st Century Clinicians". There were 1,132 participants from 63 countries, among them 28 invited Eastern European child psychiatrists and psychologists, sponsored by the Swedish East European Committee. Every congress day started with a "IACAPAP-Lecture", preceded by an artistic introduction, an "emotional event" lasting a few minutes, related to the topic of the lecture. Torsten Wiesel, then President of the Rockefeller University New York and Nobel Prize Winner, spoke about "Brain Development – Nature and Nurture", Urie Bronfenbrenner about "Growing chaos in the lives of children, youth and families: consequences and counter-strategies", Sir Michael Rutter about "Resilience versus vulnerability – which is most important in prevention?" and James Garbarino about "Making sense of senseless youth violence". Symposia, seminars and poster sessions filled the rest of the days, including all aspects of child and adolescent psychiatry. To help all participants and presenters find their way there were "angels" in yellow t-shirts, called the "Crew", spread all over the site. The congress contained some unusual, special features: children and adolescents were introduced and performed music, art and dancing, not only at the opening and closing ceremonies but continuously during the congress in between sessions and during lunch breaks. Congress participants themselves would take part in music, dance and art therapy events. A huge congress painting was produced by all who wanted to contribute. The congress dinner was arranged in the Opera restaurant with a bright view on the Royal Palace and a magnificent firework that, however, was to honour another event.

Seven presidents: Reimer Jensen, Al Solnit, Serge Lebovici, Colette Chiland, Donald Cohen, Lionel Hersov & James Anthony were assembled at this congress in 1994.

The President was Donald J. Cohen. It should have been Irving Philips who, however, died in 1992. The theme was: "Violence and the vulnerable child". There were 1,132 participants from 63 countries, over 500 abstracts. 10 plenary or key lectures and 39 organized scientific symposia, some sponsored by international organizations. Through French funding 25 representatives from Eastern European countries, child psychiatrists as well as child psychologists, were invited to this congress and to a pre-congress seminar. These colleagues had become known to IACAPAP at a study group in Budapest in 1992. About 10 of them were involved in a refugee project in ex-Yugoslavia with Rune Stuvland from Norway as leader and gave their reports. The social highlight was a buffet in the courtyards of the Asian and Young Art Museums in Golden Gate Park.

Kosuke Yamaizaki, Shigeta Sato, Reimer Jensen, Koichiro Marahashi & Kiyoshi Ogura.

World Health Organization (WHO). On the last day Richard Lansdown presented an evaluation of all contributions. The congress was sited in the Kyoto International Conference Hall.

Ginger Anthony, Colette Chiland, Kari Schleimer, Andreas Warnke, Helmut Remschmidt & Mary Philips.

The 12th Congress in Kyoto, Japan 1990.
The President was Reimer Jensen and the theme: "Child rearing, education and psychopathology". There were 1,391 participants from 41 countries and 624 presentations: 9 plenary sessions, 91 symposia, 6 poster sessions, case reports and video sessions. Symposia were presented by a number of other organizations including the World Association for Infant Psychiatry and Allied Disciplines (WAIIPAD), the International Society of Adolescent Psychiatry (ISAP), the American Association for Child and Adolescent Psychiatry (AACAP), the World Psychiatric Association (WPA) and the
The Jerusalem meeting in 2000, a joint venture of IACAPAP, ISAPP (The International Society of Adolescent Psychiatry and Psychology) and WAIMH (The World Association for Infant Mental Health).

This meeting with the theme “The Promised Childhood” would have served as a useful focal point for developing relationships and promoting the fields of child mental health throughout the Middle East. Donald Cohen, who was especially keen on this millennium meeting, pointed at ways to minimize differences and accentuate shared concerns and he drew attention to the need to involve Palestinian professionals. However, the meeting had to be cancelled because of serious political events in the region. The three international organizations felt they could not recommend to theirs members to go to Israel at the time when the congress was scheduled. Subsequently, this meeting took place in Tel Aviv as an Israeli meeting with some international attendance.

The 15th Congress was to be held in New Delhi, India 2002.

The congress, planned to take place in India in 2002, could not be held under the aegis of IACAPAP. It was cancelled by a collective decision of the Executive Committee at the late hour because of unfavourable political circumstances in India where there had been an army built up at the border with neighbouring countries. Travel warnings were issued by a number of countries and by the UN when the tension was at its height. The meeting turned into a regional congress with a different title and under different circumstances but was allowed to hold the number 15 in the list of IACAPAP congresses by request of the organizers.

It was then decided to hold the 16th Congress in Berlin, Germany, already in August 2004 and the next in 2006 in Melbourne, Australia, in order to get back to the pattern of a congress every fourth year.

The 16th Congress in Berlin, Germany 2004.

The President was Helmut Remschmidt and the theme: “Facilitating pathways – care, treatment and prevention in child and adolescent mental health”. There were about 2000 participants. The Donald Cohen Fellowship Programme was started at this congress (see below). Olayinka Omigbodun, who was to become IACAPAP President some years later, won a poster session price. Michael Hong was honoured with the International Contribution Award sponsored by the Korean Academy of Child and Adolescent Psychiatry and five colleagues were awarded the IACAPAP medal for support of the Association in special ways and for the promotion of child and adolescent psychiatry internationally. The Congress remembered deceased colleagues: - Serge Lebovici, Donald Cohen, Albert Solnit, Luis Prego Silva and Richard Harrington.

Olayinka Omigbodun got a poster price from Savita Malhotra.

The 17th Congress in Melbourne, Australia 2006

The President was Myron L Belfer and the theme: “Child and Adolescent Mental Health: Nurturing Diversity”. There were more than 1400 delegates from 65 countries, half of them from outside Australia, 850 presentations and 28 invited speakers. There were plenary sessions, state of the art lectures, symposia, workshops and poster presentations. The Donald Cohen Fellowship Programme was again active at this congress. Bringing together the perspectives of professionals and researchers, of consumers, parents and carers and of young people themselves, the congress encompassed all dimensions of diversity. Brian Robertson was honoured with the International Award.

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Olayinka Omigbodun got a poster price from Savita Malhotra.
The 19th Congress in Beijing, China 2010
The President was Per-Anders Rydelius and the theme: “Improving child mental health: Increasing awareness and new pathways for care”. There were 1,696 participants from 81 countries. This congress was a true joint venture between International and Regional organizations: it was hosted by the Chinese Society of Child and Adolescent Psychiatry (CSCAP) and it doubled up as the 6th congress of the Asian Society of Child and Adolescent Psychiatry and Allied Professions (ASCAPAP). It was held at the China National Convention Centre. There were 8 keynote lectures, 21 state-of-the-art lectures, and many oral- and poster presentations were given. Satellite symposia were organized by pharmaceutical firms. The Donald Cohen Fellowship Programme was active as well. Five child psychiatrists were given the IACAPAP medal and Myron Belfer was honoured with the International Contribution Award, sponsored by the Korean Academy of Child and Adolescent Psychiatry. The Chinese government attached great importance and was represented in the congress.

The Executive Committee of IACAPAP has approved the following future Congresses:

The 20th Congress in Paris, France 2012
The President will be Olayinka Omigbodun and the theme: “Brain, mind and development”.

The 21st Congress in Durban, South Africa 2014

The 22nd Congress in Calgary, Canada 2016

lectures, 21 state-of-the art lectures, and many oral- and poster presentations were given. Satellite symposia were organized by pharmaceutical firms. The Donald Cohen Fellowship Programme

Nese Erol & Colette Chiland on a boat tour before the congress dinner.

The three organizers of the Congress in Beijing 2012: PA Rydelius, Daniel Fung & Yi Zheng, presidents of IACAPAP, ASCAPAP and CSCAP respectively.

The 18th Congress in Istanbul, Turkey 2008
The President was Per-Anders Rydelius and the theme: “Carrying hope between East and West for 3 C’s: Children, Cultures and Commitments”. There were about 2000 participants. One full day was devoted to Clinical Syndromes. Sir Michael Rutter presented recent findings on autism spectrum disorders. Research and current opinions on bipolar disorders were discussed. The fourth day was devoted to Psychosocial and Cultural Issues, and addressed children’s wellbeing and violence against women and children. Many aspects of clinical practice were outlined by important contributions from the allied professions. The Donald Cohen Fellowship Programme was part of the Congress. Sir Michael Rutter was honoured with the International Contribution Award.

The 23rd Congress in Istanbul, Turkey 2008
The President was Per-Anders Rydelius and the theme: “Carrying hope between East and West for 3 C’s: Children, Cultures and Commitments”. There were about 2000 participants. One full day was devoted to Clinical Syndromes. Sir Michael Rutter presented recent findings on autism spectrum disorders. Research and current opinions on bipolar disorders were discussed. The fourth day was devoted to Psychosocial and Cultural Issues, and addressed children’s wellbeing and violence against women and children. Many aspects of clinical practice were outlined by important contributions from the allied professions. The Donald Cohen Fellowship Programme was part of the Congress. Sir Michael Rutter was honoured with the International Contribution Award.

The 17th Congress in Melbourne, Australia 2006


Winston Rickards & Myron Belfer in Melbourne 2006.

Nese Erol & Colette Chiland on a boat tour before the congress dinner.

The three organizers of the Congress in Beijing 2012: PA Rydelius, Daniel Fung & Yi Zheng, presidents of IACAPAP, ASCAPAP and CSCAP respectively.
Asperger was the author of another paper introducing the Kanner Syndrome, while Hans was the author of the first chapter of the journal. Of special interest is the fact that Leo Kanner special interest were published on a regular basis. Thematic issues covering topics ofceedings from international congresses as well as information from our Association including pro-tential abstracts in the other languages. It conveyed written in the author’s language but had substan-lish, French, Italian and Spanish), articles were written in the author’s language but had substan-tial abstracts in the other languages. It conveyed information from our Association including pro-cedings from international congresses as well as other news. Thematic issues covering topics of special interest were published on a regular ba-sis. Of special interest is the fact that Leo Kanner was the author of the first chapter of the journal introducing the Kanner Syndrome, while Hans Asperger was the author of another paper descri-bing the syndrome later to be called the Asperger syndrome.

In 1953 the journal changed its name to "Acta Pa-edopsychiatria - Zeitschrift für Kinderpsychia-trie – Revue de Psychiatrie Infantile" and from 1960 to simply "Acta Paedopsychiatria" with eight issues per annum. An international advis-ory board included Annell (Sweden), Bollea and de Sanctis (Italy), Donner (Finland), Fontes (Portugal), Heuyer and Michaux (France), Nassar (Chile), Spiel (Austria) and Wergeland (Norway) among others. Tramer held the editor-in-chief position, and after his death in 1963 this was taken over by Arn van Krevelen, former president of IACP&AP. The number of papers in English increased in the 1960s and in addition to Swit zerland, where the journal was the official organ for our discipline, it was also accepted as such in Germany, Finland, Sweden (already from 1953), Norway and Spain.

Acta Paedopsychiatria got into financial diffi-culties in the 1970s and was discontinued. It re-appeared but finally came to an end in 1994.

**PUBLICATIONS**

**Reports:**

From 1948 congress reports were published in The Acta Paedopsychiatria. One of these, "Pre-vention of Mental Disorders in Children" published alongside the 1962 congress with the same theme and edited by Gerald Caplan, became widely used as a textbook and is available in the IACAPAP Archives.

**Newsletters and Journals:**

In 1990 Irving Philips, president at that time, started a President’s Newsletter which was distributed to all members of the Association – by ordinary mail and therefore at quite some cost! In 1994 the Newsletter was considerably expanded following a proposal from Jocelyn Hattab. It was given a new format and entitled the Journal of IACAPAP.

The editors in those days were Jocelyn Hattab from Israel and Cynthia Pfeffer from the US. They were succeeded by Phyllis Cohen and Andrea Martin both from the US assisted by Myron Bellcr, IACAPAP treasurer at the time. Since the spring 2008, Joseph Rey from Australia has been the editor of what had become known as the IACAPAP Bulletin.

The Bulletin: Since January 1997 the Journal has been named the Bulletin. It aims to inform about recent, current and future IACAPAP activities and related information. In the last decade reports of world congresses have been expanded and this has allowed participants from different countries to give their opinion about the congress and also report on their contribution and that of others to the develop-ment of our discipline in their home country. Nowadays the Bulletin is distributed on the ho-mepage of IACAPAP www.iacapap.org. It is published three times a year with Joe Rey from Australia as editor. To ensure a steady stream of contributions, since 2010 more than 20 cor-respondents from as many countries have been appointed to deliver a minimum of two contribu-tions per year to the Bulletin. This has been very successful and resulted in a broadening of the contents, variety and geographical distribution of contributions.

IACAPAP Facebook page: This came into effect in 2011 and is managed by the Secretary-General with the help of the corres-pondents contributing to the Bulletin.

IACAPAP homepage: www.iacapap.org has been live since 2010 and ex-panded over time. The main information about the Association is to be found there.

IACAPAP e-book: This will be published in 2012 and be available freely on the web, for the special benefit of countries...
outlined optimal management approaches. The declarations are meant to be widely circulated as advocacy documents to ministries of health and education, key decision makers, professionals and others, with the aim of improving the situation of mentally and behaviourally impaired children and their families. Special attention has been given to the promotion of the rights of children. Ethical issues have always been a major concern of the Association and the last "IACAPAP Ethics" declaration was edited in 2006. Published declarations so far are listed below:

- Budapest 1992
  Assuring the Mental Health of Children
- June 1992
  Bill of Rights for Children in Institutions
- Venice 1996
  Principles for Organizing Mental Health Systems for Children and Adolescents
- Venice 1998
  Autism and Pervasive Developmental Disorders
- Sharm El Sheik 2000
  On the Founding of the EMACAPAP (East Mediterranean Association for Child and Adolescent Psychiatry and Allied Professions)
- Modena 2000
  Genetics of Autism
- Jerusalem 2000
  Children's Rights
- Rome 2003
  Caring for Children affected by Maltreatment, War, Terrorism and Disaster
- Berlin 2004
  Assuring Mental Health for Children and Adolescents
- Principles of Ethics in Child and Adolescent Mental Health
- Spring 2005
  Statement on Responses to Natural Disasters
- Melbourne 2006
  IACAPAP Ethics 2006 (revised). The Melbourne Declaration on Nurturing Diversity
- January 2008
  Declaration of the Consortium for Global Infant, Child and Adolescent Mental Health (IACAPAP together with WAIMH, ISAPP, WFMH and InterCAM HS)

Over the years the appointed editors have been sequentially: James Anthony, Cyrille Koupernik, Colette Chiland, Gerald Young, Pierre Ferrari, Elena Garralda, Martine Flament and Jean-Philippe Raynaud – working together in different combinations. After the congress in Paris in 2012 Elena Garralda will cease and Matthew Hodes (UK) and Susan Gau (Taiwan/US) will step in as co-editors with Jean Philippe Raynaud.

Declarations:
Advocacy has become increasingly important and is manifest through the publication of declarations/statements by the Association. These have addressed areas of concern related to the development and mental health of children and they have

where textbooks cannot be purchased by all. The chief editor is Joe Rey.

Books:
IACAPAP commissioned books, originally called yearbooks, have been edited since 1970 and either given to participants at congresses or published as a post-congress book. Altogether 18 volumes have been edited so far:
- The Leadership Series 1998-2004 (3 volumes)
- The Working with Children & Adolescents Series 2006 – (4 volumes so far).

Terms like The Yearbook of IACAPAP, The Book Series, The Mentor Series and The Monograph Series have all been used over the years, but it seems more expedient to refer to them as simply “IACAPAP books”.

Volume 12 “Designing Mental Health Services and Systems for Children and Adolescents: a shrewd Investment” (1998) was honoured with the 1998 Books of the Year Award by the American Journal of Nursing.

Volume 14 “Facilitating pathways: care, treatment and prevention in child and adolescent mental health” (2004) was edited by IACAPAP officers instead of the book editors. However, this volume had an obvious connection with IACAPAP, linked as it was to the Berlin Congress, where it was distributed as the congress book.

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The Bureau elected in London in 1948 (Allan, Barhash and Caplan) decided to set up a commission to prepare congresses. So, the International Preparatory Commission included members from the Executive Committee of IACAPAP and other outstanding professionals in the field, an international faculty and local child psychiatrists, invited as guest consultants with expertise in relevant areas. The meetings of the Commission, in between the congresses, were financed by the Grant Foundation and the Field Foundation of New York, thanks to Gerald Caplan who by then had moved to Boston. The Commission met for the first time in Copenhagen in 1954 to review current research on the theme of the 3rd congress, and to select plenary session topics and speakers who would present the material at the congress. In 1963 the name of the Commission was changed to the International Study Group (ISG). The ISG met in different parts of the world, most commonly by invitation from the host country of the upcoming congress, with a group of selected professionals together with one or two world authorities on the problems to be discussed. A major purpose was to learn from the sharing of information and to provide a perspective, informed by the experience of different countries. The William T. Grant Foundation sponsored these meetings for many years. Over time there was a change in policy: instead of meetings primarily aiming to work on the content and format of the up-coming congress, the ISG began to focus on providing scientific material for the yearbooks, initially published every second year. Although these books continued to be geared to the central theme of the congress, the planning of the latter became detached to a local organizing committee. This resulted in a new format for the preparation of a congress:

a) A Local Organizing Committee (LOC) was instituted to prepare, plan for and manage a congress, and

b) the International Study Group (ISG) took further the congress theme by organizing a series of small meetings of experts in selected countries, through site visits and discussions with local faculty, in order to gain first hand impressions of local conditions in the designated areas.

The concept of a “working” congress with active participation in discussion groups and similar activities began in 1970. It was hoped “that trans-cultural discourse would eventually become a recognized mode for investigating the many facets of developmental psychopathology across the world” (Anthony & Koupernik).

In April 1991 a group of four IACAPAP officers: Irving Philips, Reimer Jensen, Helmut Remschmidt and Kari Schleimer by invitation of the Hungarian Child Psychiatric Society (president Agnes Vétro) visited Budapest, and by invitation of the Section of Child and Adolescent Psychiatry of the Czechoslovakian Psychiatric Association (president Eva Malá) visited Prague to familiarise themselves with the status of child and adolescent psychiatry in these countries and to meet with colleagues working in our field. The aim was also to discuss and prepare a future meeting with leading child and adolescent psychiatrists from all the Eastern European countries. We decided to have this meeting in Budapest the following year. However, it was not easy to find names of leading child psychiatrists in countries cut off from the Western world for so many years. We provided tickets to help them come to Budapest by plane or by train. However, none showed up from Estonia because the plane, for financial reasons, could not refuel!

Eventually, a historic meeting, a very special International Study Group was organized in Budapest in April 1992 on the initiative of Irving Philips and during his presidency. The purpose was to present new research from the West as well as to discuss ways in which to help these countries develop a different type of independent child psychiatry, with a reduced biological perspective for understanding and treating mental disorders in children. Stress was also put on the development of psychotherapies and especially socio-therapeutic attitudes and therapeutic environments. The meeting became a great success.
not only because of IACAPAP members meeting with East European colleagues, but also by Eastern colleagues meeting and discussing with each other, something they had had little chance to do until then, coming as they did from countries as wide apart as Latvia in the north and Albania in the south. Their common language was Russian. Thus, this ISG was part of the important process of developing new lines of communication with and bringing Eastern European colleagues and their national societies into contact with IACAPAP. Two years later, at the world congress in San Francisco in 1994, a large group of Eastern European colleagues participated with financial help from a French sponsor. Later, at a meeting of the European Society of Child and Adolescent Psychiatry (ESCAP) in Utrecht, the Soros Foundation assisted another group from Eastern Europe to make it possible for them to attend. And at the IACAPAP congress in Stockholm in 1998 a Swedish organization (Östeuropa kommittén) brought in still more Eastern European colleagues. Today many of the national societies of child psychiatry in these countries are full members of our Association.

In between congresses International Study Groups have been arranged, quite often in the country due to host the next congress. These regional study groups stimulated research within our field, arranged meetings with local colleagues and other mental health officers and prepared presentations for the next congress. In later years the study groups have been complemented by research seminars with the aim of stimulating younger colleagues to engage in research work. Study groups have been led by officers of the Executive Committee of IACAPAP and by invited experts.
In addition, regional study groups have also been arranged. Thus, IACAPAP has been supportive of the EMACAPAP (East Mediterranean Association for Child and Adolescent Psychiatry and Allied Professions) study groups in Alexandria, Egypt in 2007 and in Beirut, Lebanon in 2008, later also in Tunisia.

DEVELOPMENT OF EDUCATIONAL PROGRAMMES

International Study Groups (ISG) have existed almost since the beginning of our international organization. In later years the ISGs have been aimed to further and strengthen an interest in child and adolescent psychiatry in economically less favoured countries, and to facilitate and improve the development of good clinical practice, based on research and clinical experience and on the United Nation declaration of Children’s rights.

Seminars have been arranged since the 1990s. There has been some confusion of the terms “study group” and “seminar” which sometimes have been used indistinctly. Whatever the name, IACAPAP has taken a special role in fostering the growth of research capacity in child and adolescent psychiatry in developing countries. Special mention is due to the Helmut Remschmidt Research Seminars and the Donald Cohen Fellowship Programmes. But, IACAPAP has also sponsored research training in the Eastern Mediterranean region and in Africa on a regional basis. The Helmut Remschmidt Research Seminar

In 1998 Helmut Remschmidt arranged a European Research Seminar under the sponsorship of the European Society of Child and Adolescent Psychiatry (ESCAP) in his capacity as the President of ESCAP at that time. The idea was to support young colleagues, who intended to pursue a scientific career, with their research projects. This first seminar and the subsequent ones, now under the leadership of IACAPAP, have in the main all had the same structure, as follows:

• The seminar takes place about 6 months prior to a IACAPAP congress in the geographical area where the next congress will take place
• Participants are proposed by the presidents of their national organizations and are selected by the Bureau
• Not more than 30 young scientists are to be included
• The faculty consists of experienced clinicians and scientists, who present papers in the morning and act as mentors in the afternoon, when projects by the participants are discussed
• The seminar lasts five days, with two lectures in the morning by mentors followed by discussions.

The first seminar took place in Heidelberg, Germany, in June 1998, sponsored by ESCAP. The second to sixth seminars took place in two different locations in Italy and were sponsored by ESCAP, the Foundation Child (Italy) and IACAPAP. The seventh seminar was scheduled to take place again in Italy in 2007 but was cancelled because of the upcoming congress of ESCAP in Florence in the same year. Disagreements within ESCAP made further co-operation between IACAPAP and ESCAP unworkable at the time and the IACAPAP Executive Committee decided to continue to support the seminars on its own, under the name of “The Helmut Remschmidt Research Seminars”. The purpose remains one of inspiring young colleagues from our and from allied disciplines to engage in research – and to provide basic knowledge in key aspects of research design in child and adolescent psychiatry, skills in presenting research to colleagues and in discussing research with others and to enable participants to carry out their own research projects under the specific conditions of their own department. The following research seminars have taken place:

1. First European Research Seminar, June 1998, Heidelberg, Germany
2. Second European Research Seminar, September 2001, Camposampiero, Italy
3. Third European Research Seminar, September 2002, Camposampiero, Italy
4. Fourth European Research Seminar, March 2004, Camposampiero, Italy
5. Fifth European Research Seminar, April 2005, Camposampiero, Italy
6. Sixth European Research Seminar, May 2006, Bocca di Magra, La Spezia, Italy
7. Seventh European Research Seminar planned for May 2007 had had to be cancelled
8. First South-American Research Seminar, June 2007, Porto Allegre, Brazil
9. 1st IACAPAP Helmut Remschmidt Research Seminar, December 2007, Istanbul, Turkey in cooperation with the Turkish national association and the EMACAPAP
10. 2nd IACAPAP Helmut Remschmidt Research Seminar, February 2010, Beijing, China

These seminars will go on, basically to build up research capacity in the field of child and adolescent psychiatry in the region, where the next world congress will be held. Participants are invited from neighbouring countries and faculty brought in from around the world.
The Donald J Cohen Fellowship Programme

To honour the memory of the late Donald Cohen, the former president of IACAPAP, Helmut Remschmidt initiated the Donald J Cohen Fellowship Programme at the world congress in Berlin in 2004. This programme aimed to support the participation of highly promising young child psychiatrists from around the world at IACAPAP congresses. The programme is partly sponsored by IACAPAP and enables selected fellows to discuss their projects and other topics in meetings led by mentors, mostly members of the Executive Committee of IACAPAP. The Programme has so far involved:

- Daily meetings in small groups with leading experts
- Dedicated poster presentations attended by senior faculty members
- Seminars for fellows and other interested attendees
- Social activities
- Free registration plus support for lodging and travelling

Since 2004 these DCF Programmes have taken place regularly during – mostly but not exclusively – IACAPAP world congresses where they have been a welcome event:

- in Berlin 2004 together with a group of invited Eastern European Fellows
- in Melbourne 2006
- in Istanbul 2008
- in Budapest 2009 at a European meeting, supported by ESCAP
- in Beijing 2010

Reports on the DCF Programmes, both by the coordinators Andres Martin from the US and Joaquín Fuentes from Spain and by fellows attending, have been published in the Bulletin. After the 2006 congress in Melbourne a special Bulletin Supplement was edited with contributions from participants. In 2011 two assistant coordinators to the DCF have been appointed: Naeef Gadour from Tunisia and Ayesha Mian from Pakistan/US, both child psychiatrists.

AWARDS

Since 2004 the Korean Academy of Child and Adolescent Psychiatry (KACAP) has sponsored The International Contribution Award to be conferred by IACAPAP at a world congress in recognition of the accomplishment of a senior individual in promoting child and adolescent psychiatry in the developing world. The award consists of a plaque and 1.500 USD. This award is not only for child and adolescent psychiatrists but also for allied professions. Five awards have been funded by the KACAP, which reserves itself the right to continue or cease the awards in the future. So far the award has been given to:

- 2004 Kang-E Michael Hong, South Korea
- 2006 Brian Robertson, South Africa
- 2008 Sir Michael Rutter, UK
- 2010 Myron L. Belfer, USA
- 2012 Amira Seif Eldin, Egypt

The IACAPAP Medal with the logo of our Association has been given to individuals who have worked for or supported the Association in special ways and promoted child and adolescent psychiatry internationally. In the past, members of the Executive Committee were given the medal when leaving their positions. This tradition was discontinued when Irving Philips in the early 1990s started to honour persons, irrespective of their profession and position, for their achievement and engagement with the major aims of our Association.

Knowledge of recipients of this award is available only from 1998:

- 1998 Luis E.Prego-Silva, Uruguay
- 2004 Winston Rickards, Melbourne, Australia
- Ahmed Okasha, Cairo, Egypt
- Giovanni Bollea, Rome, Italy
- Jack Davis, Madison, USA
- Kari Schleimer, Malmö, Sweden
- 2005 Kuo-Tai Tao, Nanjing, China
- 2008 Dainius Puras, Vilnius, Lithuania
- 2010 Barry Nurcombe, Brisbane, Australia
- Colette Chiland, Paris, France
- Helmut Remschmidt, Marburg, Germany
- Kang-E Michael Hong, Sungnam-si, Korea
- John B. Sikorski, San Francisco, USA
- 2012 Ginger Anthony, Chevy Chase, USA
- Elena Garralda, London, UK
- Joseph M. Rey, Sydney, Australia

AICAFMHA  
Australian Infant, Child, Adolescent and Family Mental Health Association (founded in 2000)

World wide organizations include:

WAIMH  
World Association for Infant Mental Health  
(started as W AIPAD, World Association for Infant Psychiatry and Allied Disciplines in 1992)

ISAPP  
International Society of Adolescent Psychiatry and Psychology (started as ISAP, International Society of Adolescent Psychiatry in 1984)

WHO  
World Health Organization

WPA  
World Psychiatric Association

WFMH  
World Federation for Mental Health

The IACAPAP Plaque has over the years been bestowed upon several officers of the Executive Committee in recognition of their work for the Association.

RELATED LINKS

IACAP collaborates with national and regional organizations and co-operates with partner organizations that pursue similar goals all over the world.

Regional organizations include:

ESCAP  
European Society of Child and Adolescent Psychiatry (founded in 1954 as UEP, Union Européenne des Pédiopsychiatries, and named from 1983 as ESCAP)

AACAP  
American Association for Child and Adolescent Psychiatry

EMACAPAP  
East Mediterranean Association for Child and Adolescent Psychiatry and Allied Professions (founded in 2000)

ASCAPAP  
Asian Society of Child and Adolescent Psychiatry and Allied Professions (founded in 1996)

FLAPIA  
Latin-American Federation of Infant, Adolescent and Family Psychiatry (founded in 1995)

AICAPAP’s relations with the WHO  
IACAPAP has been recognized as a non-governmental organization (NGO) officially linked to the WHO since 1961, and this has continued to our days, except for a short break in the late 1990s. To keep this position we have to present a report on our activities to the WHO every second year. As an NGO we are invited to regional WHO office meetings and to the General Assemblies in Geneva, Switzerland. Since its inception IACAPAP has sponsored meetings all over the world and involved WHO staff in these activities. In collaboration with international child psychiatric consultants this has led to projects on quality of life measures, the development of a life skills programme and the promulgation of a rights framework for child mental health. Close working relationships with WHO regional offices have resulted in the foundation of EMACAPAP, training initiatives in Eastern Mediterranean countries as well as in Eastern European countries, where the discipline of child psychiatry after 1989 was in great need of support and development alongside accepted, modern lines of assessment and treatment. Initiatives also focused on training in developing countries.

During the period 2000 – 2005, for almost six years, the WHO supported a full-time child psychiatrist to develop a Global Programme on Child and Adolescent Mental Health (2008), a joint project of WHO, IACAPAP and WPA. Three task forces were created: on Awareness, on Services and on Primary Prevention. This programme had a worldwide dimension and was a good illustration of cooperation between IACAPAP, WPA and WHO. Professor Myron Belfer from Boston, US, served as Senior Adviser for child and adolescent mental health at the WHO headquarters in Geneva these years, and during that time with support from IACAPAP members, the WHO
had a more prominent role in child mental health activities than ever before. Among these activities it is worth mentioning the ATLAS project in 2005, a mental health policy initiative to develop a worldwide resource database. Together, the WPA, IACAPAP and WHO have focused on prevention, treatment and awareness in a collaborative initiative, culminating in a WPA conference in Cairo in 2005, devoted to child and adolescent mental health. “The synergy between the WHO and IACAPAP has benefited the field of child and adolescent mental health. It has provided opportunities for education, program development and policy initiation that would not otherwise have been possible for either alone” (Belfer).

IACAPAP has helped to found national and regional organizations in child mental health that have served as important contact points and collaborators for WHO programmes. Worth mentioning is the creation of the Eastern Mediterranean Association for Child and Adolescent Psychiatry and Allied Professions representing nearly all Arab countries and Israel. The creation of associations in many former Eastern Block countries has similarly been supported.

At a WHO-meeting in Geneva in early 2002 on “Caring for children and adolescents with mental disorders: setting WHO directions”, IACAPAP was represented by Helmut Remschmidt and Myron Belfer, then president and treasurer of our Association respectively. IACAPAP financially supported the production and distribution of the report of the meeting.

At the WHO/EU ministerial conference in Helsinki, Finland in 2005, IACAPAP was represented by Per-Anders Rydelius, secretary-general at that time.

PERMANENT SECRETARIAT AND THE ARCHIVES

As reported in the minutes of Executive Committee meetings, the issue of maintaining permanent Archives of the Association was discussed a number of times, but proposals to that effect for stationing them in Washington D.C., Geneva, Paris or other sites were never materialised.

Eventually in 2002 the Executive Committee decided to keep a permanent secretariat linked with the Archives, to be hosted at the Karolinska Institute (KI) in Stockholm, Sweden with Per-Anders Rydelius, professor of child and adolescent psychiatry at the KI and Kari Schleimer as permanent secretary and archivist. This was made possible by the fact that the department of child and adolescent psychiatry at the KI already had a good number of records pertaining to the Association.

CLOSING REMARKS

What, then, really does IACAPAP do? To summarize: through world congresses, we offer our members an opportunity to meet and learn from each other about new trends in child and adolescent psychiatry. We publish books with content in line with upcoming congress themes, we produce a Bulletin with information about the Association and with participation of colleagues from all over the world. Declarations which are virtually State of the Art documents convey our standing on different issues. Study groups and seminars for younger colleagues encourage their active participation and learning through discussions, lectures and research seminars. The Donald Cohen Fellowship Programme allows young professionals to meet and share under the leadership of mentors. And – not least – all those who collaborate with IACAPAP activities stimulate each other, have fun and are pleased to meet whenever possible!

Our aims are to a large extent encapsulated in the following quotation by our former president Myron Belfer in his presidential letter to the Association in 2006:

“Among the most important lessons I have learned in my presidency are:
1. the child mental health professions must find ways to collaborate more effectively
2. we need to embrace more of a public health perspective in order to address the needs of populations affected by war, natural disaster and displacement
3. the child mental health professions must reassert their primary role as the provider of clinical information which has now been eclipsed by the pharmaceutical and other business interests
4. child psychiatrists, in particular, but other child mental health professionals as well need to demonstrate more publicly the willingness to engage in frontline work in situations brought about by disaster and conflict
5. all child mental health professions must continue to demonstrate the importance of proper diagnosis and rational care”

The history of IACAPAP reveals a continuing process of growth and development, that periodically has been characterized by creative conflicts between protagonists of different ideologies on the international scene, much as in any international organization. It is essential that the Association continues to have a high international profile as an umbrella organization and that it strives to constantly modernize and reform its own structures and functions to meet future challenges.

Clearly there would be much more to say about the history of our Association. This could include links to historical events and for instance references to the decades after “the fall of the Berlin wall” in 1989, leading to IACAPAP’s becoming involved in the situation in Eastern Europe. Efforts to involve colleagues and countries in South-East
Asia, Africa and South America could also be mentioned. The task could have been approached quite differently. My main purpose, however, was to save historical documents and describe the course of events. I have given the premises and now leave it to the reader to draw conclusions.

ACKNOWLEDGEMENTS

Many colleagues have stimulated me to write the history of our Association and I am most thankful to their suggestions and advice. However, there is one person who has devoted hours of her precious time to work with the manuscript from a linguistic point of view. I am very grateful to Professor Elena Garralda of the Imperial College of London, who has turned my manuscript into, hopefully, quite a readable story.

REFERENCES


4. Gerald Caplan, MD, Reimer Jensen, fil.dr.r.h.c. and Serge Lebovici, MD: History of The International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) in the Newsletter of IACAPAP, January 1994, 4-8.

Documents in the Archives of the IACAPAP, kept at the Department of Child and Adolescent Psychiatry, the Karolinska Institute, in Stockholm, Sweden.

APPENDIX:

- Table of EC officers elected at General Assemblies since 1937 (and appointed officers during the period 1994-2010)
- Table of world congresses
- List of IACAPAP books
<table>
<thead>
<tr>
<th>Year</th>
<th>Location</th>
<th>Theme</th>
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<tbody>
<tr>
<td>1937</td>
<td>Paris</td>
<td>Planned 3rd Congress in the USA 1952 never realized.</td>
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<tr>
<td>1940</td>
<td></td>
<td>The cancelled Congress in New Delhi 2002 was to be numbered the 15th.</td>
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<tr>
<td>1945</td>
<td>London</td>
<td>The Berlin Congress in 2004 was arranged after an interval because of a cancelled congress in 2002.</td>
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<tr>
<td>1949</td>
<td></td>
<td>From 2006 it was decided to arrange congresses every second year but to keep the General Assemblies every fourth year.</td>
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* A planned second international congress 1941 in Leipzig, Germany, under the leadership of Paul Schröder did not take place because of WW II.
** It should have been Irving Philips – however, Donald Cohen had to act as president because of the unfortunate death of Irving Philips in 1992
*** The 15th World Congress was scheduled for New Delhi/India but could not take place as an IACAPAP event due to external reasons. Therefore the congress was carried out as a regional meeting with international attendance under the leadership of our colleagues in India. It was agreed to put into writing in the IACAPAP annals, that the 15th Congress could not be held as planned under the aegis of IACAPAP and that the Berlin Congress will be counted as the 16th World Congress of our Association.