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WPA-TPS CHAIR'S REPORT
Hans Rohlof, MD
Chair, WPA-TPS

The first snow blizzards have come to Europe, and the birds of the neighbourhood are getting some extra food in the backyard. This is also the time of the year to provide you, dear members of WPA-TPS, with some extra food in the shape of new facts about the Section and the field of cultural psychiatry. This time of the year asks for a retrospect on the almost finished old year and a look into the future.

In this number you will find something of both. There are reports of the Prague conference of the WPA, and of the excellent conference we had in Tel Aviv. The Tel Aviv conference was just before the troubles there: fortunately they ended quite quickly, and there is some hope for peace

in the future. We hope that our scientific field,

which includes much knowledge on cultural communication and on cultural differences, will be able to promote mutual understanding.

There are also invitations to join the conferences in 2013. The Section has a conference in Hamm, and we are promoting engagement in the conference of the World Association of Social Psychiatry, two conferences of the WPA and the conference of the SSPC in Toronto. Do notice the different deadlines concerning each conference.

In this newsletter you will also find an in memoriam of Ray Prince, one of the founders of our field who we lost recently. And you can read a book report.

2013 will also be the year of DSM-5. We will give a report about the place of culture in this classification system in one of the next newsletters.

In 2014 we have plans to organise conferences in Gdansk, Poland, together with local psychiatrists, and in the surroundings of Madrid. More about this in the 2013 newsletters.

Next to this, the board of WPA-TPS will stay occupied with methods of e-learning through our renewed website. We are eager to include ideas of all our members on this subject. Send us e-mails!

Rests me to wish you all a very happy holiday season, and a prosperous 2013!



A NOTE FROM THE EDITORS

Welcome to Volume 7, Issue 2 World Healer. In this edition Hans Rohlof, Chair of the WPA TPS discusses the recent activities of the section and future plans to hold joint symposia with other WPA sections. We report on two major symposia – Prague in October 2012 and Tel Aviv in November 2012. The Tel Aviv conference was the first international conference on cultural psychiatry in Mediterranean countries. Both conferences included several well-attended symposia on transcultural psychiatry. We present details of forthcoming conferences. In 2013 there are four exciting conferences in Hamm, Istanbul, Lisbon and Vienna. Two educational activities may be of interest to members: The MSc Spirituality, Theology and Health at Durham University and the MSc in Transcultural Mental Healthcare at QMUL. We would very much like you to send us details of future educational activities along with brief summaries of any research currently being conducted in cultural psychiatry. Finally we wish you all a very happy X mas/ Chanukah and a prosperous new year.

Dr Simon Dein, Editor



CONFERENCE REPORTS

**WPA International Congress
Prague, October 17–20, 2012**

**By Hans Rohlof
Chair, WPA-TPS**

The recent international congress of the World Psychiatric Association had much to offer in the

field of transcultural psychiatry. The focus of the congress was 'Access, Quality and Human Care', which is an important item in the care for ethnic minorities and in International Psychiatry. The congress was relatively large with about 1800 participants, mostly from Europe, but also with 125 colleagues from the U.S.A. and even 65 from Australia. Psychiatrists from German speaking countries were underrepresented, with by example not more than 42 Germans. This is a pity because the congress offered a lot of interesting lectures and workshops, particularly for young professionals.

The German Wolfgang Gaebel reported about a large international survey on stigma in the psychiatric profession. Stigma in psychiatric care and in psychiatrists prevents good care, is the general idea. It increases patient delay, and makes the risk of early drop out greater. Psychiatry is viewed as not scientific enough and too remote from other medical specialties.



Many others, including psychiatrists themselves, regard psychiatric treatments as having limited success. Gaebel showed comparisons in which these ideas are clearly proven to be wrong. His take home message was that we should stop discriminating against ourselves, and regard ourselves as valuable colleagues in relation to other doctors. According to Norman Sartorius,

the former president of the WHO, we should also stop devaluing our patients, and start focusing on the positive sides of their lives. Of interest in this respect is that younger psychiatrists experience more stigmatization and a higher burden. Staying longer in the profession makes psychiatrists probably less vulnerable! Or have vulnerable colleagues left the profession already?

V. Svab from Slovenia reported on a study of discrimination in schizophrenia, in different countries. Surprisingly, there is less discrimination in the developing countries than in the developed ones. Reasons for that are still unclear, but probably the assumed exogenous origin of schizophrenia in developing countries, for instance the influence of ghosts or witchcraft, are central to this phenomenon.



Pedro Ruiz

The other side of stigmatisation is that patients once they have arrived in mental health care are quite satisfied with the help they get. A. Nawka from the Czech Republic showed that inpatients from different countries are quite satisfied with the staff, and with the treatment they get, without great differences between the countries. There is a need for more information on how effective psychiatric help is and on how great is the

satisfaction. Involving more former patients might be a good idea?

Apart from international comparisons there was much attention on the psychiatric care for patients from ethnic minorities in Western countries. Ron Wintrob (U.S.A.) stated that in the case of refugees, practical needs are generally met, but emotional needs are not. Psychoeducation is a starting point for psychiatric care, and should be offered to all refugees, given the great percentages of psychopathology among them. This should have a place in language courses and other courses on immigration.

Marianne Kastrup (Denmark) gave a lecture about Cultural Psychiatry in the Scandinavian region. She pointed out that there is a common issue in Scandinavian countries about the relations between people, based on fairness, equality and solidarity. This is also the case for immigrants. Migrants in Scandinavia generally have a lower use of mental health services, but have greater numbers of voluntary admissions and forensic sentences. In the second generation there are relatively more suicides. She remarked that post-migratory stress in refugees was higher in those who stayed in Denmark than in those who went back (to Kosovo). Sixty five percent of the refugees were dealing with pain complaints, probably connected with psychopathology. And apathy was very frequently found in children of refugees, most presumably connected to depression in their mothers.

Hans Rohlf demonstrated similarities in The Netherlands. In this country 11 % of the population is of non-Western background. He mentioned research in which perceived discrimination and less social support is

connected with more psychopathology. Mental health care use is increasing among migrants, but thresholds are remaining. In refugees the use of mental health care is very low, and even lower in asylum seekers. There are some experiences with special programs for migrants. An adaptation of Interpersonal Therapy for migrants lowered the dropout rate. EMDR for refugees seems feasible, but if the effects are higher than stabilization is not yet clear. Specialised services for migrant patients by migrant therapists exist in the Netherlands, but till now there is no evidence that patients do better with that kind of help.

There is not much similarity with the mental health care provision in Sub Saharan Africa, where about 700 psychiatrists (of which 500 in South Africa) have to take care of about 870 million people. Solomon Rateamane from South Africa spoke about this. A vicious cycle of poverty, war and lack of health care makes life hard for the population. Governments are however beginning to put mental health care on the agenda, since they notice that proper care can have a positive influence on morale.



Sections of the World Psychiatric Association, including the Transcultural Section, are starting to combine their efforts in organising courses and conferences. Afzal Javed, the Sections

Secretary, is a great supporter of this. The Transcultural Section is preparing a conference on Religion, Culture and Psychiatry together with the Section on Religion and Psychiatry. The WPA is a large organisation but made out of some enthusiastic individuals who are willing to educate, and propagate their research, programs and insights.



First International Conference on Cultural Psychiatry in Mediterranean Countries, Tel Aviv, 5-7 November, 2012

**By Hans Rohlof, MD
Chair, WPA-TPS
Centrum '45, National Institute for Psychotrauma, Oegstgeest, The Netherlands**

The First Mediterranean Conference on Cultural Psychiatry took place in Tel Aviv, Israel. Before the conference took place, there were many protests by non-members of the Transcultural Section about the place of the conference, since they considered Israel and the Israel Medical Association as detrimental for the health and health care of the Palestinian people. The Board of the Section published an official statement stating that the conference would be open for everybody, that colleagues from Arabic countries were especially welcome, and that the conference would be pure scientific.

The conference was a great success. With about 160 participants, mostly from Israel but also some from other Arabic countries, it contained three intensive days of plenary lectures and symposia, and a very impressive film, 'Waltz with Bashir'. The participants were holding 88 lectures, and there were 8 posters, which meant that the majority of the attending persons were

holding a lecture, as it is always the case on real scientific conferences. Four parallel programs were running at the same time, which made it very difficult to choose which to attend. As usually, this report is only one side of the conference.



Afzal Javed

Afzal Javed (U.K), the Section Secretary of the World Psychiatric Association, opened the conference. He thanked the Local Organising Committee and the Section for their efforts and their resoluteness in the organisation of the conference. The opening lecture was held by Ron Wintrob (U.S.A.), co-chair of the conference. He gave a good definition of transcultural psychiatry: the comparative study of mental health and mental illness among different societies, nations and cultures, and the inter-relationships of mental disorders with cultural environments. He stressed the point that in the U.S.A. the minorities of today will become the majorities of tomorrow, rendering the Caucasian population to a large minority population. This makes the cultural psychiatry in the States more prominent: every psychiatrist has to deal with

patients from quite different cultural origins. He further focused on the need of cultural case formulation, in order to identify different explanation models, different acceptance of care, different communication styles.

Kamaldeep Bhui (U.K.) looked at this statement from a British point of view. There is a great impact on equality nowadays in the U.K. However, reduction of psychiatric beds goes together with increase of specialised prison beds: who is the winner here? Marginalisation is always bad for mental health, but especially for young people. And refugees in the U.K have a low use of mental health care, which is bad for their mental health. Cultural consultation services do benefit for general mental health care, and result in a mean of 500 pounds in care costs. This means that we have to disseminate this kind of consultation.



Robert Kohn (U.S.A.) gave a lecture about Cultural Psychiatry in the U.S.A. In a literature search 3,655 abstracts were found concerning transcultural psychiatry in the U.S.A. in the last decades. Large epidemiological studies showed remarkable results: the prevalence for

depression is higher in Whites than in African Americans, for example. Native Americans also show more alcohol addiction and post traumatic stress disorders (PTSD). Asian Americans demonstrate lower levels of psychopathology. And there is a clear connection between self-perceived discrimination and psychopathology.

Francois Bourke (Canada, U.K.) worked further on this last topic in his presentation on migration and psychosis. He recently published a large meta-analysis of all the studies in this field, and concluded that the risk of migrants to develop a psychosis is about 3 times higher than in natives. Post-migration factors are more important in this respect than pre-migration or migration factors. He mentioned a probable Vitamin D deficiency, but also the lack of support by low ethnic density, discrimination and maybe child abuse.



Anne Marie Ulman

Also, there was a symposium on cultural consultation in Canada. Laurence Kirmayer gave an overview of his service in Montreal. Many questions related to this service about different aspects of migrants and refugees and their home culture: so-called knowledge questions. Dilemmas about ethnic matching between therapists and patients and about the use of interpreters are quite often discussed. And there are questions about guidelines in primary care,

which appeared on www.ccrih.uottawa.ca



Hans Rohlof

Kirmayer stressed the point that different epistemologies are used by patients, depending on different ontologies of the person: egocentric, sociocentric, ecocentric and cosmocentric. This results in different healing modes, and different outcomes. For instance: the egocentric mode uses talking about the self, which results in more self-esteem and self-efficacy, while the sociocentric approach uses interventions in the family or community and attempts to result in harmonious relationships with others.

Cultural competence in clinical work, which is sometimes rather technical, would be better transformed into cultural safety, according to Kirmayer. By this term he means: an understanding of the social, economic and political contexts, a respectful and inclusive relationship, a good communication method, and recognition of diverse knowledge fields.

The film 'Waltz with Bashir' which was shown on the first evening of the conference evoked many emotions. In this film, which is presented as a cartoon film for adults, Israeli soldiers are exploring their involvement during the Lebanon

war of the Sabra and Chatila assassinations (where 3500 Palestinians were killed in a genocide by Falangists, while Israeli troops surrounded the camps). The next day Eliezer Witztum (Israel) spoke about dissociation in PTSD patients, which occurs in about 5% of the patients he examined, and which can disturb the memory.

Another discussion on dissociation came from Marjolein van Duijl (Netherlands) who studied this phenomenon in Uganda. Dissociation and possessive states are quite common there. They occur in the context of poverty, trauma and suppression. Possessive agents are seen as spirits of the dead who speak through the living, because rituals have not been performed. This can be seen as the result of unresolved conflicts, which the spirits try to settle. Van Duijl thoroughly investigated the different symptoms of dissociative states. She concluded that the DSM-5 diagnosis of dissociative identity disorder has shortcomings, which should be resolved in order to capture the dissociative state in Africa.

The Israeli anthropologist Yoram Bilu spoke about Dybbuk (plural Dibbukim), a Jewish possession syndrome, very rare now, but quite similar as the Djinn possession in Morocco. He stated that the Zar, which occurs in Ethiopia, is different: while the Dybbuk and the Djinn need exorcism, the Zar needs domestication!

More news from Israeli researchers came from Rachel Bachner-Melman. She showed that orthodox Jews are more prone to eating disorders, which relates to their obsession with food, on Shabbat evenings and celebrations, and the strict rules on the preparation.

Diddy Mymin (Israel) gave an interesting lecture

on Eritrean women who entered Israel through the Sinai desert, and were asking a refugee status. Many of these women have been raped, some by Eritreans, others by Rashaida men (the Bedouin smugglers). She interviewed 14 of these women. She found no need to talk, a surprisingly good functioning, and only a threat of stigmatisation when they developed pregnancy. Many of the babies were offered for adoption. Silence as a coping mechanism is something, which is more often described, in African women. In the discussion was stated that it may be a temporary fruitful coping.

There are about 60,000 refugees in Israel from Africa and Limore Racin (Israel) spoke about the voluntary return programs. Voluntary return is a result of traumatisation and flight problems on the one hand, and continuous post migration problems on the other hand. Many refugees tend to make a choice for return, but this is of course dependent of the safety situation in their country of origin.

There were two well-attended symposia focussing on spirituality and mental health. The first covered important issues in the protective effects of religion on mental health (Simon Dein and Kate Loewenthal). The second focused upon Judaism and mental health with lectures by Ron Wintrob, Micol Ascoli and Simon Dein.

The conference brought together researchers and clinicians from all over the world, and was a great start for more attention for cultural psychiatry in Israel itself. Israel is in fact a real multicultural country, with inhabitants who were born in quite different countries. It contains a large Arabic minority, too.



A major outcome of the conference was a special issue of the Israel Journal of Psychiatry, containing different articles on cultural psychiatry. Of great interest was the article by Khawla Abu-Baker about families of suicide killers in the intifada period, describing the respect they got, but also the bereavement.

Much can be said about the difficult political situation. After the conference a short war broke out between Israel and the Gaza strip resulting in citizen casualties on both sides. The ceasefire after a week brings promises for a future solution of the Israel-Palestinian conflict, but many fear more years of troubles.

The conference in Tel Aviv was a very little step towards attention for different cultures, and that among people who probably did not have to be persuaded. But every little step can bring a society forwards!

STATEMENT CONCERNING TEL AVIV CONFERENCE

The Section on Transcultural Psychiatry of the World Psychiatric Association has received some criticisms from non-members of the Section about organising a Conference in Tel Aviv, Israel.

The criticisms, in short, memorize the political

situation of Israel as a state where the rights of the Palestinians are greatly neglected, having a detrimental effect on the mental health of the Palestinians, whether living in Israel, in the Palestinian territories, or elsewhere.

Statement

The Section on Transcultural Psychiatry takes these criticisms seriously and is willing to be in discussion with those who have sent the criticisms.

As an answer on these criticisms the Section has made the following statement:

- The Conference, the 1st international Conference on Cultural Psychiatry in Mediterranean Countries, will be a pure scientific conference, as thus it does not favor any political ideologies and parties in the conflicts.
- The Conference is open to all participants, members and non-members of the WPA-TPS, who are willing to participate. In fact, the Conference Organising Committee tried its best, and will continue trying its best to arrange visas for all participants, specially for those coming from Arabic countries.
- During, before or after the Conference, all participants will be encouraged to take efforts to make contact with Palestinian mental health professionals whenever those colleagues are not able or willing to attend the Conference.
- The Organizing Committee has made many attempts to invite participants from Arab countries. These efforts have been greeted by a range of responses, from

anger to a wish to participate but a fear of reprisal if they do. Mental health workers from the local Arab community will be participating in the conference.

On behalf of the board of the Section on Transcultural Psychiatry,

Hans Rohlof, Chair of the WPA-TPS
Oegstgeest, The Netherlands

On behalf of the Organising Committee
Anne-Marie Ulman
Tel Aviv, Israel



MINUTES OF WPA-TPS BUSINESS MEETING IN TEL-AVIV

Tel Aviv, November 6, 2012
Time: 4pm - 5.30 pm



1. Future conferences

There will be a great choice of conferences in 2013:

Hamm, Germany (TPS-meeting): 8&9
February 2013, www.wpa-hamm-2013.de

Istanbul, Turkey (WPA-meeting), 19-23
June, 2013, www.wpaistanbul2013.org

Lisbon, Portugal (meeting WASP), 29 June-3
July 2013, www.wasp2013.com

Vienna, Austria (WPA-meeting): 27-30

October, 2013. www.wpaic2013.org

In 2014: WPA-World Congress Madrid, Spain 14-18 September 2014, www.wpamadrid2014.com, with before the large meeting a joint conference of at least two Sections in the surroundings of Madrid.

2. **The website.** www.wpa-tps.org has a complete new content. There are enough possibilities to improve the content of the website.
3. **The journals.** Our next newsletter, the World Healer, will appear in December 2012. The next Section issue of our scientific journal Transcultural Psychiatry will appear in 2013. In 2014 there will be another special Section Issue of Transcultural Psychiatry, edited by Kamaldeep Bhui and Hans Rohlof.
4. **Collaboration** with other Sections of WPA-TPS, and with other organisations: WACP, SSPC: there is contact with the Section on Religion and Psychiatry, in order to organise a symposium on Religion, Culture and Psychiatry in Madrid, 2014. There are also contacts with the Section on Education. With the WASP and the SSPC we have contacts on the level of the Chairs. Plans for a common research project will be elaborated in the next year.
5. **New awards** in the Section. Poster Award and Research Award. The board has plans to establish new awards. News about this will be in the Newsletters of 2013.
6. **Membership.** We hope to encourage especially young psychiatrists, researchers, and residents to become member of our Section. Members will be given privileges like discount on

conference fees, and entrance to a membership only part of the website.



SYMPOSIUM IN AMSTERDAM IN HONOR OF PROF JOOP DE JONG

Professor Joop de Jong, the Dutch pioneer in the field of Transcultural Psychiatry and International Mental Health, will retire as Professor of Transcultural and International Psychiatry at the VU University in Amsterdam, the Netherlands.

On the **31st of May 2013** the University hosts a special symposium on **Cultural Psychiatry & Global Mental Health** to honour the contributions of professor Joop de Jong to the field.

Several international experts have agreed to deliver keynote lectures:

- Vikram Patel (London School of Hygiene & Tropical Medicine, and Sangath, Goa) on '*Global mental health*';
- Stevan Hobfoll (Rush Medical College, Chicago) on '*Psychotrauma & resilience*';
- Devon Hinton (Harvard University) on '*Psychotherapy & culture*'.

Chairperson: Mark van Ommeren (WHO, Geneva)

In the afternoon seven parallel sessions will be held with presentations from (former) PhD students of professor Joop de Jong. Till now speakers from Algeria, Burundi, Cambodia, the Netherlands, Palestine, Sierra Leone, Sri Lanka, Suriname, Uganda and the United States have already agreed to prepare a presentation.

At the end of the day Joop de Jong will deliver his farewell lecture in the main auditorium of the university.

You are cordially invited to participate in this day. Costs are 95 euro, including drinks and lunch.

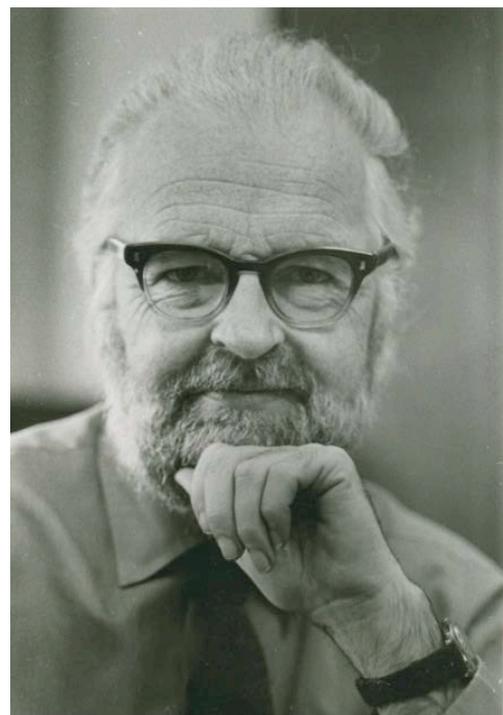
The organizing committee

- Polli Hageaars (Section Interculturalisation, Dutch Institute of Psychologists - NIP)
- Anneke van Schaik (Department of Psychiatry, GGZ inGeest/VU University Medical Centre Amsterdam)
- Peter Ventevogel (Section for Transcultural Psychiatry, Dutch Association for Psychiatry – NVvP)

For more information contact Peter Ventevogel: peter@peterventevogel.com



IN MEMORIAM PROF RAY PRINCE, MD by Prof Ron Wintrob



Ray started his career in transcultural psychiatry in 1957, when he became the 'alienist' of the pre-independence colonial government of Nigeria, assigned to Aro Hospital in Abeokuta. He was there for two years.

It was the start of a lifetime of exploration of the influence of culture on human behavior.

Reflecting on this experience in Nigeria some 15 years later, in 1974, Ray wrote; "My main interest in going to Nigeria was to study the differences in the kinds of psychiatric disorder generated by a grossly different culture."

Ray noticed an unusual condition that was prevalent among students in Nigeria.

" Here, the somatic complaints were focused upon the head; burning, pain, vacancy, prickling, the sensation of worms crawling – and there was a concomitant inability to concentrate and grasp the meaning of the written word. Students sometimes had to abandon their studies".

"It gradually dawned on me, after seeing the pattern repeatedly, that this was a distinctive syndrome".

"I called it "brain fag", because some of the students referred to it in that way and attributed it to too much use of their brains."

How many of us could point to an accomplishment like that; that our first published paper would become a classic in the field, and be published in Britain's premier journal of psychiatry.

In that same year; 1960, Ray published two other papers on his work in Nigeria; "*Curse, Invocation and Mental Health among the Yoruba*", in what is now called the Canadian Journal of Psychiatry,

and "*The Use of Rauwolfia for the Treatment of Psychoses by Nigerian Native Doctors*", in the American Journal of Psychiatry.

Not a bad start for career in academic psychiatry; three papers published in his first year, and in the major professional journals of three countries.

Ray went back to Nigeria in 1961. He spent the next two years studying the treatment of psychiatric disorders by indigenous healers.

He also participated in the "Cornell-Aro Project", conducting field interviews as part of the large-scale survey of mental health in western Nigeria, under the leadership of Alexander Leighton.

That experience and the mentoring influence of Dr Leighton, is evident in Ray's very active and long-term involvement in community survey research in Montreal;

- in the late 1960s, on the mental health of low-income inner-city residents, that included a large proportion of immigrants,

- and during those same years working with Dr Leighton on the validation survey of the mental health of the population of "Stirling County" Nova Scotia.

Between 1969 and 1991, as research director of the Montreal Mental Hygiene Institute. In this work, Ray acknowledges the great help, encouragement and intellectual stimulation generously offered by HBM Murphy.

He was promoted through the academic ranks at McGill to become Professor of Psychiatry in 1979, and continued in that role until his retirement from the full-time faculty in 1991. Thereafter, he was Professor Emeritus.

He was the director of the Division of Social and Transcultural Psychiatry from 1981 to '91, and editor of *Transcultural Psychiatric Research Review*; the journal we now know as *Transcultural Psychiatry*, during those same years.

He served as consultant to The Cree Indians' Board of Health from 1978 to '91. The Cree are Canada's largest Indian tribe. Ray spent several days each month doing clinical and administrative consultations with the James Bay Cree during those years. An extensive report of his work with the Cree was published in *TPRR* in 1993.

He had an abiding interest in the nature of consciousness, in altered states of consciousness, in psychological healing and in spiritual healing.

Ray had a continuing interest in the similarities between insight derived from psychotherapy and the inner peace derived from spiritual insight.

He also had an enduring fascination with the physiology of these phenomena, as well as with trance and possession states; those induced by religious ecstasy and those induced by drugs; and how they are related to 'insight', to healing and to psychopathology.

Numerous publications resulted from this work, including; "Mystical States and the Concept of Regression", with Charles Savage, *Trance and Possession States*, and "Fundamental Differences Between Psychoanalysis and Faith Healing".

In 1973, he was co-organizer of a conference on transformations of consciousness, and in 1980 on shamans and endorphins. Again, important

publications derived from these conferences.

He was devoted to the study of indigenous healers and healing methods throughout his career in psychiatry and has written numerous articles on these themes.

One might reasonably say that the majority of his published articles have addressed issues related to the nature of the healing experience cross-culturally; in Canada, in West Africa, in the Caribbean and in South Asia.

In June, 2000, the *Canadian Journal of Psychiatry* published Ray's paper titled; "Transcultural Psychiatry: Personal Experiences and Canadian Perspectives", in which he reflected on why Canada, and particularly Montreal, have given nurturance to the idea of multiculturalism and to the *cultural* perspective in psychiatry.

Ray never lost his fascination with "seeing for the first time". Nor for careful observation and then reading, reflecting and questioning the accepted explanation.

Psychiatrists, psychologists, biologists and everyone interested in the field of cultural psychiatry in countries around the world owe a great debt of gratitude to Ray Prince. His accomplishments will live on in his published work. And in the memories of those who were inspired by his work, his guidance and his generous spirit. That spirit will live on in the memories of all of us who knew and admired him.

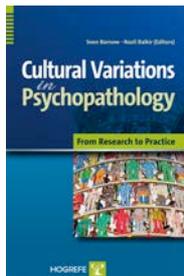
Rest in peace, good friend.



BOOK REPORT
By Hans Rohlof

**CULTURAL VARIATIONS IN
PSYCHOPATHOLOGY**

**Edited By Sven Barnow
and Azli Balkir**



2012, Hogrefe, Göttingen (44.95€)

www.hogrefe.com/program/cultural-variation-in-psychopathology.html

This is a book that is based on an international workshop at Heidelberg University, Germany, in 2010. The contributors on that workshop elaborated their lectures into well-written chapters.

This is a book every cultural psychiatrist should read. It covers almost the complete field of cultural psychiatry, and so it is a current update of the field.

The editors wrote an interesting short introduction chapter about the relevance of culture for mental health, with an overview of the most important studies on the field, followed by an excellent European overview of Miryam Schouler-Ocak.

Neurobiology is covered by chapters of Shihui Han and Georgg Northoff & Jaap Pansepp. They looked at current data on neurobiological differences between cultures.

A strong part on differences in emotional regulation follows. It is good to notice that experimental psychology is beginning to discover culture as an interesting subject in science, and is starting to produce more and more studies in which culture is a variable. The work of Nico Frijda and his former pupil (now professor) Batja Mesquita –the cultural regulation of emotions- is now having many followers.

The larger part of the book is on diagnosis. This seems to stay a hot topic in our field. There are chapters on the cultural formulation of diagnosis, on depression and somatization, on pain perception, on embitterment, on suicide, on substance abuse, and on psychosis, all written by outstanding scholars in the field.

The last part of the book is on treatment. It has chapters on mental health for Turkish immigrants, on cultural competence, and on German protocols in migrant care: the so-called Sonnenberg guidelines.

There is quite a lot to learn from this book. All chapters are well documented and well written, especially when you consider that most authors are not native English speaking. And all the chapters have an extensive and up-to-date literature list. A minor point is that the key words index is a little bit too short.

Of course there are some omissions, which do not make the book less valuable, but maybe do need a next edition. There are no descriptions of specific treatment programs for migrants, and about effects of those treatments compared to general treatments. Also, refugees are not very well defined as a special group of interest, included the special treatment programs for refugees, like narrative exposure therapy. And

you would want a somewhat more elaborate view on epidemiology, including the new theory of exclusion.

In general, a recommendation for this up-to-date overview of our field is on its place.



UPCOMING INTERNATIONAL CONFERENCES

WPA-TPS & DTPPP Joint Conference
Hamm, Germany
February 9 & 10, 2013

"Sharing Experiences in Transcultural Settings and Practices throughout Europe in the Field of Health and Mental Health"

www.wpa-tps.org/meetings_2013.html

Over the past 25 years, several approaches and experiences for the reception and care of migrants and refugees have developed in Europe. Whether it be for physical, mental and social care, it would be very fruitful to compare our respective practices in the field of clinical research and training of healthcare professionals. The goal is essentially to learn best practices in terms of care from each other, to avoid stigma and cultural assignment of patients.



Workshops and Symposia

This meeting will be used to introduce new ideas and / or important concepts and discuss in order to explain particularly good examples of the

practice in the area or to demonstrate and to present new empirical data.

Main language: English. **Satellite symposia** in German, French, Dutch and Spanish are desired and planned.



WPA Regional Congress 2013

Bucharest, Romania

April 10 - 13, 2013

"Facilitation Mental Health, Primary Care & Public Health Integration for Southeast Europe & Eurasia"

www.wpa2013bucharest.org

This unprecedented Congress is a sharply focused initiative of the World Psychiatric Association in collaboration with the Romanian Association of Psychiatry and Psychotherapy, the National Society of Family Medicine and the Romanian Public Health and Health Management Association.

The congress has several concrete goals & objectives, as follows:

- identify national and regional mental health, primary care & public health challenges
- define the benefits of primary care, mental health & public health integration
- share evidence of best practices & lessons learned
- stimulate educational, research, services, and policy collaborations at national and regional levels and across the life cycle

Confirmed Keynote Lectures

- Prof Dilip Jeste (San Diego, USA)
The Brain: Optimism, Wisdom and Resilience

- Prof Hans-Jurgen Moeller (*Munich, Germany*)
The Metabolic Syndrome: Family Medicine, Psychiatry & Public Health Integration
- Prof Charles Nemeroff (*Miami, USA*)
Heartache and Heartbreak: The Curious Relationship Between Depression and Cardiovascular Disorders
- Prof Norman Sartorius (*Geneva, Switzerland*)
Mental Health Care in General Medicine: Limits and Opportunities
- Prof Igor Svab (*Ljubljana, Slovenia*)
Integrating Primary Care, Mental Health & Public Health in Europe



**WPA International Congress
Istanbul, Turkey**

19 – 23 June, 2013

**“Improving Science, Ethics, Services and
Solidarity in Psychiatry”**

June 19 – 23, 2013

www.wpaistanbul2013.org



During the World Psychiatric Association International Congress Istanbul 2013, organized by the World Psychiatric Association (WPA), in collaboration with the Psychiatric Association of Turkey (PAT) and the Turkish Neuropsychiatric Society (TNS), besides a high quality scientific programme, a scientific research awards programme for posters and a scientific research

awards programme for oral presentations, a special fellowship programme for early career psychiatrists, a photo exhibition and a rich cultural programme will also be held. The scientific programme will be open to the contributions of all the psychiatrists, mental health workers, and the scientists from related disciplines across the world, besides the contributions of the WPA Scientific Sections, Member Societies, and Affiliated Associations and selected key speakers of top experts. Special attention will be given to the collaboration of related disciplines and professionals and users and carers.

This WPA International Congress will strongly emphasize the importance of improving the quality of our scientific knowledge, the standards of our ethical values, the quality and inclusiveness of our clinical services, and the level of solidarity between colleagues, users and carers across the world. Furthermore, the translation of scientific knowledge into our daily ordinary professional lives will be the focus of this congress.

In the past, the WPA always has conducted excellent scientific meetings in collaboration with the two WPA Member Societies from Turkey. We have full confidence in the Organizing and Scientific Committees to ensure the highest calibre of international scientific presentations.

Besides, unique beauties and cultural heritage of Istanbul as well as other cities and regions of Turkey are excellent additional incentives to visit Turkey and attend this congress.



**21st World Congress of
Social Psychiatry
Lisbon, Portugal
29 June – 3 July, 2013**
**"The bio-psycho-social model:
The future of psychiatry"**
www.wasp2013.com



It is our pleasure to invite you to attend the 21st World Congress for Social Psychiatry, which will take place in Lisbon, Portugal, 29 June to 3 July 2013. The Psychiatric Clinic of the University of Lisbon is honoured to host this international congress on an increasingly important field of clinical practice and research.

The topic of the conference is "The bio-psycho-social model: The future of psychiatry", will be the future of psychiatry. It covers a very broad set of issues from the explanatory models for psychiatric disorders to the role of psychological and social factors in the illness and suffering. We expect a high scientific and clinical quality of participants. We are looking forward to a very interesting and fertile meeting!

You are kindly invited to come and to actively participate in this important World Congress.

Professor Maria Luisa Figueira
Chair of the Organizing Committee

MAIN TOPICS

- Bio-psycho-social confluence of psychiatric sciences
- Life-span perspectives of mental health
- Natural Disasters/Man-made (including Fukushima) and mental health
- Co-morbid mental and physical illnesses

- Globalization, instant communication and mental health
- Mass movements of populations: migrants, refugees and others
- Suicide and its prevention
- Stigma of mental disorders and psychiatric institutions
- Investing in mental health
- Mental health care in developing countries
- Creating alliances to respond to mental health challenges



**WPA International Congress 2013
Austria, Vienna
27 – 30 October, 2013**
**"The bio-psycho-social model:
The future of psychiatry"**
www.wpaic2013.org

It is for me an honor and a pleasure to invite you to join me/us to the WPA International Congress that will take place in Vienna, Austria on October 27–30, 2013.

Over the years, Vienna has been a memorable site for the field of psychiatry and has a long tradition of organising successful events for WPA. Besides, its charm, beauty and history are second to none in both Europe and the rest of the world.

Undoubtedly, this WPA International Congress will be a memorable one for the World Psychiatric Association. Please join me in this unique and historic occasion.

Cordially,
Pedro Ruiz, M.D.
WPA President (2011–2014)

Important Dates

15 January, 2013

Symposia and workshops submission deadline

30 March, 2013

Oral communications and posters submission deadline

30 April, 2013

Acceptance decision for authors

30 May, 2013

New research reports submission deadline

15 June, 2013

Detailed scheduling information for authors

General Information

The Scientific Committee invites authors to submit abstracts to be considered for inclusion in the programme. Authors must follow the guidelines for abstract submission set out below. Abstracts not conforming to these guidelines will not be considered for presentation.

All abstracts must be submitted in English and must be presented in English.



Congress Venue