

BULLETIN

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TSUYOSHI AKIYAMA, EDITOR

FUMITAKA NODA, PRESIDENT

PRESIDENT'S REPORT



Prof Fumitaka Noda
President PRCP

The 13th Pacific Rim College of Psychiatrists Scientific Meeting

was held in Tokyo from October 30 to November 2, 2008. The 708 delegates coming from over 30 countries attended it and made the meeting a tremendous success. This PRCP meeting was the largest gathering in recent history. As a meeting chair, I sincerely thank all the delegates and those who helped organize this meeting. PRCP Scientific Meeting not only provides various programs (lectures and symposia) but also aims to provide a place where both psychiatrists and mental health professionals from the

Asia Pacific region can come together and interact with each other, exchanging ideas on ways to develop joint research, mutual education and collaborative work. The meeting also helps to support and nurture young psychiatrists and mental health professionals, who will be continuing our cause into the future. I have become President of PRCP for two-year term since Tokyo meeting. I will do my best to advance the collaboration among Pacific rim countries. I also plan to develop some joint projects with other organizations to promote Asian-Pacific psychiatry.

From this year, we are proud to announce the plan to launch a new journal, entitled "Asia Pacific Psychiatry". We ask that you support us in this endeavor and spread the

word to your colleagues about becoming a PRCP member. We are currently reviewing membership regulations for non-psychiatrist and will provide that information when available.

The next PRCP Scientific Meeting will be held under the chairmanship of Prof. Philip Morris in Brisbane, Australia in 2010. Brisbane has a wonderful convention site and a lot of resort places like Gold Coast. I hope many PRCP members will participate in this meeting like Tokyo. I am very much looking forward to seeing you there.

Fumitaka Noda, M.D.
President
Pacific Rim College of Psychiatrists

TREASURER'S REPORT

The Asia-Pacific Community Mental Health Development Project

Report for the 13th PRCP Meeting



Associate Professor
Chee Ng
Treasurer
PRCP

The Asia-Pacific Community Mental Health Development Project Summary

Report was launched regionally in Asia at the Pacific Rim College of Psychiatrists 13th Scientific Meeting in Tokyo on 30th October 2008. This followed the successful global launch of the

project, which is supported by the World Psychiatric Association (WPA) and WHO at the WPA World Congress in Prague in September 2008.

The Asia-Pacific Community Mental Health Development (APCMHD) Project showcase a landmark regional project detailing community mental health developments across Asia, that have achieved new benchmarks in

culturally sensitive and effective mental health care. The Project aims to illustrate and promote best practice in mental health care in the community through use of information exchange, current evidence and practical experience in the region. Such collaborative exchange based on local Asia-Pacific practices will help enhance regional solutions to challenges in building capacity for community-based mental health services in the future.

The (APCMHD) Summary Report is the result of a long-standing collaboration between Asia-Australia Mental Health (a consortium of St. Vincent's Health and University of Melbourne Department of Psychiatry and Asialink) and the network of key mental health leaders from 14 countries or regions across the Asia-Pacific including: Australia, Cambodia, China, Hong Kong, India, Indonesia, Japan, Korea, Malaysia, Mongolia, Singapore, Taiwan, Thailand and Vietnam. The Report, written and edited by an international network of mental health reformers from the Asia-Pacific region illustrates best practice in community mental health care. The publication documents each participating country's/region's development of community mental health services as well as country-specific examples of best practice.

The regional launch was well-attended and included the following distinguished guest speakers: Prof. Fumitaka Noda (President PRCP), Prof. Alan Tasman (Immediate Past-President PRCP), Dr Benedetto Saraceno (Director, Department of Mental Health and Substance Abuse, WHO), and Prof. Norman Sartorius (University of Geneva). All of the speakers indicated the immense value of the project in promoting regional best practice in community mental health.

At the most recent APCMHD Project Meeting held in Prague future directions for this landmark project have been planned. The important role of the project in inspiring culturally sensitive models of community mental health appropriate for the region was well-recognised. As a result, it was agreed that each participating country/region would continue to contribute annual updates about their community

mental health services and different examples of best practice. Countries/regions involved in the project also plan to meet annually to share ideas, progress and challenges in developing community mental health services. Funding to translate the existing Summary Report to other languages is also being explored.

The publication of the Asia-Pacific Community Mental Health Development Project Summary Report was supported by the Australian Government Department of Health and Ageing. For further information or to download the Summary Report, please visit the www.aamh.edu.au

Assoc Professor Chee Ngests
Treasurer
Pacific Rim College of Psychiatrists

SECRETARY-GENERAL'S REPORT

Prof Tsuyoshi Akiyama
Secretary General / Editor
PRCP



First, I express my heartfelt appreciation for all of you who have supported the great success of Tokyo meeting.

Without your committed participation, the meeting would have never been possible. As organizer, we all had great excitement. I hope that Tokyo will not be made a memory but remain as a corner stone for our future development.

I am also deeply grateful that the board and the members of the Pacific Rim College of Psychiatrists decided to provide me an opportunity to serve as Secretary General. This is an honorable and sizable responsibility, but I hope to learn from the excellent example of my predecessor, Prof Chee Ng.

Regarding my title as editor, when our journal, Asia-Pacific Psychiatry is issued, this bulletin will be absorbed as part of the journal. Therefore, in addition to this May issue, I may create one more bulletin, then there will be no editor of the bulletin as such.

As secretary general of the PRCP, I would like to make the organization as useful as possible to the members. Also, I would like to attract many young psychiatrists so that the organization can be activated. I will speak with a number of young psychiatrists in the Pacific Rim region and make up a proposal for the board. As we know our young psychiatrists have a number of great assets, eagerness to learn, cohesion among national and international colleagues, devotion to lead development of psychiatry and balanced interests in research, clinical

and policy activities. I see very bright future in them.

I could also be elected as Secretary of Finances of the World Psychiatric Association in Prague, September 2008. It is thanks to the wonderful supports from the colleagues in the Pacific Rim region. Now, I work with Prof Allan Tasman in the Executive Committee of the WPA so that psychiatry can develop as smoothly as possible in the world and in our region.

I look forward to speaking with you at future meetings.

Cordially yours

Tsuyoshi Akiyama
Secretary General/Editor
Pacific Rim College of Psychiatrists

YOUNG PSYCHIATRISTS

Introduction

Pre PRCP Fellowship Program for Academic Development of Psychiatrists (Pre PRCP FPADP)

This program was organized by the Non-profit Organization Japan Young Psychiatrists Organization (NPO-JYPO) on October 29th and 30th 2008, in Tokyo, Japan. The program was officially recognized by the 13th Scientific Meeting of the Pacific Rim College of Psychiatrists (PRCP) as its fellowship program for young psychiatrists.

The aim of the program was to foster academic develop through mutual learning and discussion from the view point of Multicultural / Multidisciplinary Mental Health and to develop an international network through face-to-face communication.

Throughout the program, forty-two young fellows from seventeen countries enthusiastically discussed psychiatric issues and shared in this fulfilling event. The cooperative atmosphere that continued on to the 13th PRCP academic meeting and the collaborations that developed even after the meeting had concluded, marked the success of the program.

The purpose of this report is to share the experience of the program and to encourage young psychiatrists to develop collaborative activities through out the world.

Background

In 2006, the Mental Health Policy Workshop and the 12th PRCP were held in Taiwan. Members of NPO-JYPO along with other young Asian psychiatrists participated with the common goals of developing their academic skills and exchanging ideas with people from various backgrounds and perspectives. The events were

such a success that it was decided, with much enthusiasm and support, to do another such exchange in Tokyo at the 13th PRCP.

The committee of the 13th PRCP officially recognized the proposal to keep international exchange as an important theme of the conference. We were delighted to invite young talented psychiatrists from around the world each of whom had been highly recommended for the program by their professors.

Principals to Organizing the Fellowship Program

NPO-JYPO as an organizing committee prepared this program in collaboration with the participants themselves and with the support of the Pacific Rim College of Psychiatrists.

Preparation Stage within Organizing Committee

The program was organized by NPO-JYPO members who are motivated and talented but still new to the field of psychiatry. The objective was to provide an opportunity for all of the organizing committee members to learn how to organize an international program. Small teams that consisted of senior and junior members of NPO-JYPO organized each session. Throughout the process of preparing the program, junior members experienced how to organize an international program while senior members learned valuable leadership skills.

Preparation Stage for Fellows from Overseas to Maximize Outcome of Our Program

To encourage fellows to join the network and to build up collaborations within the two days of the program, steps were taken to connect fellows prior to the program. We tried to

maximize prior communication by using the Internet. The organizing committee distributed to all the participants information about the program, a questionnaire, and any questions that were brought up by the participants themselves. Through this type of communication, we were able to promote collaboration among fellows in advance and receive much information, which helped to create a clear image of the program in Japan. In this way, we were able to begin the processes of international communication even before Pre PRCP FPADP had started.

On The Day

Involving individuals

Innovative approaches were used to involve every participant during the program. Some examples are as follows:

Every one was given a Role to play. Before attending the program, all fellows were required to answer a questionnaire, some were asked about Occupational Therapy, to make a presentation, and to chair a session. The program was not only designed to help the participants learn, but also to ensure participants share ideas bilaterally.

Preparing name lists and seat chart. It was important for each participant to get to know each other by name. However, two days were not long enough for 42 members to talk to each other. In order to address

this issue, NPO-JYPO provided a name list with the pictures of each participant and a seating chart. NPO-JYPO then planned a self-introduction session at the beginning of the whole program.

Program structure

In order to achieve our aims, we adopted three approaches in our program:

1. Inspection of a real life facility
2. Academic training
3. Multidisciplinary discussion

As a way of staying grounded in real world issues we conducted a hospital tour, listened to presentations on psychiatric care from different countries and shared the results of the inquiry on Occupational Therapy from some of the participants. Fellows were able to spend valuable time exploring the diversity of the Pacific-rim.

In order to develop academic skills, we held two sessions;

1. "How to give an oral presentation"
2. "Making scientific papers"

NPO-JYPO has been working on providing training courses for young psychiatrists with Prof. Norman Sartorius and many other distinguished experts since NPO-JYPO was established. These two programs provided good examples of our activities to the fellows from overseas. The methods and contents were practical and received much attention from the participants. Some made reservations to be in the annual training course that NPO-JYPO is providing as a Course for the Academic Development of

Psychiatrist.

Multidisciplinary discussion

A Multidisciplinary discussion was realized through a case conference on coercive treatment. This was designed to give insight into involuntary treatments for acute psychosis in different countries and regions. Since PrePRCP FPADP was a collection of young psychiatrists from different mental health settings, a multidisciplinary discussion provided a great opportunity to learn about other clinical settings and, as a result, allowed each of us to more closely examine our own mental health environments so that we could discover new ways of improving local mental health care.

First we presented the result of the questionnaire we prepared, which was answered by all the participants, and included a case conference on a patient with acute psychosis. Secondly, we had four speakers who presented the typical ways the case would be treated in their own countries such as U.S.A., Singapore, Japan and Korea. Thirdly, we had group discussions about the following questions:

1. What do you think of the results as compared to your daily clinical activities?
2. What concerns you most about involuntary treatments in your daily clinical activities?
3. What do we need to optimize and minimize involuntary treatments?

In the discussion we talked about increasing the number of trained mental health staff, more family involvement in the treatment process, making the duration of stay as short as possible, early treatment of psychiatric illness, monitoring of

involuntary treatment by psychiatrist, psychiatric social worker, and administrative and legal systems. We also heard lectures by Prof Sugiyama about Japan and Prof Parameshvara about low resource countries.

The Effectiveness of the Program

Fellowship Programs and Young Psychiatrist Sessions during the 13th PRCP

Effective collaboration has been maintained even after the young psychiatrist network was formed and developed. There were quite a few active discussions throughout the 13th PRCP academic meeting that involved even more young psychiatrists.

There were two young psychiatrists' symposiums organized by NPO-JYPO and members of the fellowship program. One was 'Pathways to psychiatric care in Asian Countries', chaired by Dr Hashimoto N. and Prof Sartorius Norman. The objective of the symposium was to identify the pathways to psychiatric care in East Asian countries and study the differences among the countries. The other symposium was 'Cross-National Review of the Postgraduate Psychiatric Training from Young Psychiatrists' Perspective', which was chaired by Dr Kato T and Dr Wu E. This discussion helped to provide and exchange information about postgraduate training from the perspective of young psychiatrists in various countries.

Also, a workshop on leadership in community mental health training was held for half a day and Chaired by Prof. Ng C, Prof. Hwang TY, Dr Sado M and Dr Uehara K. It featured distinguish speakers from all over Japan and overseas. The workshop provided training in the principles of CMH; exploration of the different components and skills required to deliver CMH

It also addressed various leadership elements required for change including identifying current strengths and leadership skills that help create improvement in service delivery.

All of the programs for young psychiatrists were fruitful because they provided motivational presentation, active discussion, challenging ideas, and future perspectives.

For our future

A spirit of international collaboration has been developed through this program. Several international research projects and other collaborative projects have already begun to materialize as a result of relationships formed through this program.

We were delighted to hear from one participant from Nigeria who commented, "The fellowship program was indeed a huge success. The program combined essential and appropriate content with a thorough selection of world-class resource persons who were liberal in sharing their knowledge and wealth of experience. The unique innovation of the organizers of engaging participants in discussions on involuntary admission prior to the program probably ensured near 100% attendance from far and wide. The warmth of the hosts completed the recipe for a perfect meeting. Kudos to NPO-JYPO for enriching our Professional lives!"

We are dedicated to continuing the work we have started so that his voice can be joined by many voices from around the world. Young psychiatrists today are tomorrow's leaders. We believe that academic development and collaboration among different nations will result in better psychiatric care as well as valuable networking in the future.

About NPO-JYPO

We, Japan Young Psychiatrists Organization (JYPO), started our activities in 2002 when the Joint Meeting of World Congress of World Psychiatric Association and the Annual meeting of Japanese Society of Psychiatry and Neurology were held in Yokohama. Thirty young psychiatrists from all over Japan assembled under the common goal of facilitating the academic development of young psychiatrists. With the support of Prof Norman Sartorius, Prof Mitsumoto Sato and several other professors, JYPO was founded. After its foundation, JYPO implemented several multi-centered research projects, established training courses, and played a significant role in organizing international symposiums at various congresses. Through the Internet and face-to-face communication we have also developed a nation wide network that serves to provide information for young psychiatrists from north to south.

In 2008, JYPO was certified as a Non-profit Organization. Our aim now is to provide better psychiatric care for patients, families and the society by improving our skills, providing information and collaborating with health care professionals in Japan and throughout the world. This program, Pre PRCP FPADP, was our first memorial step as NPO-JYPO.

For more information about NPO-JYPO please visit our website: <http://jypo.umin.jp/TOP.html>.

The participants

Shavindra Kumar Dias (Sri Lanka),
Sharad Man Tamrakar (Nepal),
Shailendra Raj Adhikari (Nepal),
Jon Garcia Ormazza, (Spain),
Basanth Kumar Kenchaiah (India),
Khongorzul Duggeragchaa (Mongol),
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Altanzul Narmandakh (Mongol),
Noor Ahmed Giasuddin (Bangladesh),
Sirina Sattapisit (Thailand),
Promma Tatkamom (Thailand),
Mai Uchida (Japan),
Syed Pirzada Sattar (Canada),
Chua Tze-Ern (Singapore),
Pierre Bastin (Belgium),
Adhi Wibowo Nurhidayat (Indonesia),
Alan R Teo (USA),
Meerae Lim (Republic of Korea),
Yong-Jin Seo (Republic of Korea),
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Sung-Wan Kim (Republic of Korea),
Yen Chia Nan (Taiwan),
Jong-Woo Paik (Korea),
Chiao-Fan Lin (Taiwan),
Mark A Walterfang (Australia),
Sean Jespersen (Australia),
Seng Kok Han (Singapore),
Soo In Kim (Republic of Korea),
Sungwon Roh (Republic of Korea).
From Japan there were Kumi Uehera,
Kanna Sugiura, Daisuke Fujisawa,
Mariko Setsuie, Atsuo Nakagawa,
Masaru Tateno, Toshiaki Baba,
Takahiro Kato, Mitsuhiro Sado,
Naoki Hashimoto, Yueren Zhao,
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Teppei Tanaka.

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HIV Prevention Programs and Community Acceptance in Indonesia

Indonesia has a very significant HIV epidemic among drug injectors. Harm reduction as HIV prevention program is a pragmatic approach to reduce harm related to injecting drug use, since many drug users can not achieve abstinence status. Beginning in early 2007, these programs were formally approved by the Indonesian government in an attempt to address the HIV problem among IDUs. Indonesia adopted 12 elements of harm reduction from World Health Organization, mainly outreach, needle exchange program and substitution therapy.

National Narcotic Board estimated that there are 3.2 million drug users in Indonesia, and 580,000 among them are injecting drug users (IDU). A quarter of them also had unsafe sex practices. HIV prevalence among IDU is high (63.7% at Methadone Clinic RSKO, 86% at Pamardisiwi Rehabilitation Center, and 96% at Kampung Bali Health Center). Result from Behavioral Surveillance Survey 2004-2005 in several major cities has shown that IDU reuse syringes from other drug users during the prior week (in Surabaya 77%, Medan 74%, Jakarta 59%, and Bandung 35%).

Methadone treatment (MMT) is currently delivered through four hospitals as a pilot project and seven methadone clinics, serving approximately 1,000 clients. This will expand to reach more than 50,000 clients by 2010. To maximize the impact of this expansion, MMT

should be integrated with HIV/AIDS care and community based prevention efforts.

The implementation of harm reduction should consider religion, culture, norms and suitable for local condition. Stigmatization on HIV and drugs is still happens, but in a lower degree compared to several years ago that probably due to better education and HIV prevention campaign on the mass media, and also the role of the two biggest Islamic organizations (such as Muhammadiyah and Nahdlatul Ulama) which are not opposing HIV prevention programs. Since Indonesia is predominantly Muslim, the roles of religious leaders are very important.

Islam has a principal concept of preferring less evil and damage (Ismail, 2007). As Prophet Muhammad saying: There are two aspects and solutions of issues, prefer to the easy one. Harm reduction also in accordance with another principal concept, respect the right to life. As in the translation of Qur'an Chapter 5 Verse 32: One who killed an innocent person it is equal that he killed the entire humanity and one who saved life a person it is as he saved the entire humanity.

In addition, INTERNA (Indonesia Interfaith Networking on HIV/AIDS), an interfaith forum responses to AIDS problems in Indonesia was founded in 2007. This forum consists of LKKNU-Nahdlatul Ulama

(Islam), PGI (Christian), Hindu, Buddha, and Konghuchu organizations.

Lessons learnt for the implementation of harm reduction programs in Indonesia are to prioritize needle exchanges, outreach, and substitution therapy based on local resources, minimize the misuse of substitution therapy, improve readiness of service providers to participate in the programs, involve key stakeholders (law enforcement authorities, families, drug users, policy makers) in supporting HIV prevention, and obtain support from domestic funding agencies to address the problem of sustainability.

Some efforts have been made to reduce HIV epidemic among IDUs, but significant challenges still lie ahead in insuring the coordination among all stakeholders and expanding its network of service providers. A comprehensive approach is needed to maximize the effectiveness of drug and HIV care and prevention strategies.

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Visit www.prcp.org/members.html for PRCP membership details