

### **Bulletin**











By Frida Zoé Aldana Guzmán, age category, 13-18Y, I want to be the empathetic psychiatrist I have always wanted!

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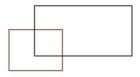
<u>Deputy Editor</u> Rajesh K Mehta (Virginia, USA)



#### Former Editors

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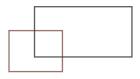
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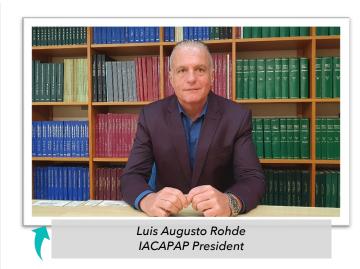
#### President's Message

By: Professor Luis Augusto Rohde, Professor, Department of Psychiatry, Federal University of Rio Grande do Sul, Director, ADHD Program, Hospital de Clínicas de Porto Alegre, Brazil.

I invite you for a quick immersion on what has been done at IACAPAP since our previous Bulletin was published.

Our Executive Committee (EC) had our annual meeting in a hybrid format during International Congress European Society for Child and Adolescent Psychiatry in Strasbourg last July. In a daylong session, members had comprehensive discussion on initiatives currently conducted by our Association, exploring opportunities and exchanging suggestions to improve our functioning. I would like to call your attention to some issues. First, as you are reading this bulletin, we will have just finished our Helmut Remschmidt Research Seminar in Germany lead by Professors Petrus J de Vries and Christina Schwenck and an amazing group of almost 25 fellows from several countries. Second, the nomination process for the next EC is already open. We encourage you to submit your suggestions and applications. Finally, we will be accepting applications for the Donald J. Cohen Fellowship Program up to October 23rd, 2025. Do not lose the chance to apply and be part of a community of more than 400 fellows who have already been trained in this program!

Regarding our next World Congress in 2026, the first good news is that its



website is <u>live</u>. While we want to thank our colleagues for the growing number of early bird registration, we should remind you to submit your symposium proposals by October 30th, 2025. We expect to have a very scientifically robust program embracing evidence-based, innovative and diverse topics on CAMH. The first keynote speakers are being invited, and the initial speakers' line-up is already on our website. Many more will join in the next few months.

Regarding the two areas of collaboration between IACAPAP and the Stavros Niarchos Foundation (SNF) Global Center for Child and Adolescent Mental Health at the Child Mind Institute:

 SNF Global Center Clinical Fellowship Program for Low- and Middle-Income Countries (LMICs): While everything is progressing well with our first two cohorts of Mozambican fellows, we were able to finish the selection process for the third and last group of fellows from this country to begin their training in Brazil in 2026. This last group is made up of mental health professionals from Beira, located in the center of the country. Thus, we will have soon three teams of professionals to provide care and disseminate knowledge on CAMH in Mozambique. Peter Raucci, Program Director of Fellowships at the SNF Global Center, and Ayesha Mian, representing IACAPAP, are working to finalize agreements for the first cohort of Kenyan fellows beginning their training in South Africa in 2026. Other potential pairs of countries from South America, Asia, Oceania and Eastern Europe are being analyzed.

• SNF Global Center Item Bank - A Free Assessment Tool to Support Culturally Appropriate Global Data Collection for Child and Adolescent Mental Health: The psychometric evaluation phase continues to progress. The more recent development was an extensive cocreation process for the tool's branding and visual identity, led by a professional company and involving experts and youths with lived experience. During the next month, a list of potential names will be shared with the scientific community who collaborated in the first phases of its **IACAPAP** development, members, and youth with lived experience for votina. In the meantime. encourage you to read more about this work on the SNF Global Center's newly revamped website here.

We are still waiting for a decision from WHO-EM committee about our <u>appeal</u> <u>document</u> to include methylphenidate in the <u>WHO Essential Medicines List</u>, led by Professors Brooke Molina and Philip Shaw. As mentioned in the last bulletin, the final decision was expected in July. Let's keep our fingers crossed!

Α five member committee. collaboration of WPA, IACAPAP and CMI, been working conceptualisation of a Global Child Mental Health curriculum, initially with a psychiatric focus. The committee meets monthly; the initial work was centered on building a literature resource, and now the development of a short survey is underway to assess broad stakeholder input on priority areas as pertaining to curricular development. The committee is chaired by Ayesha Mian (Pakistan), and comprises of Flavio Dias Silva (Brazil), Zheala Qayyum (United States), Ramya Mohan (United Kingdom) and David Cawthorpe (Canada).

ante-penultimate paragraph Our dedicated to calling attention to an impactful paper recently published on CAMH in scientific literature. This time, I would like to something different, highlight specifically for CAMH but that certainly will affect our field. The paper was published in a free online preprint archive for scholarly articles last July. Thus, it was not yet peer reviewed. The study was developed by authors linked to Microsoft. Basically, they compared the performance of a group of expert medical doctors against a group of different Als each with a determined

function (clinical diagnosis, request exams, assess costs of treatment). All of them moderated by another AI from Microsoft called MAI-DXO. The challenge: 304 complex medical cases from the New England Medical Journal. Findings: The AI got 85.5% of the diagnoses correctly compared to 20% of expert medical group. performance was accompanied by a reduction of 70% on the costs of the exams requested. Although this paper can be seen from different angles, undoubtedly it makes us think about the role of health professionals, including us as mental health professionals, in the future. Probably, one thing that is core for CAMH professionals, establishing positive human relations with patients and their families, will be the valuable for most asset health professionals in the near future, helping deliberative decisions with families using patients and data generated no more from health professionals but from AI. Time will tell!

Finally, regarding the auditable proposed goals in the previous bulletin, they have been partially achieved since:

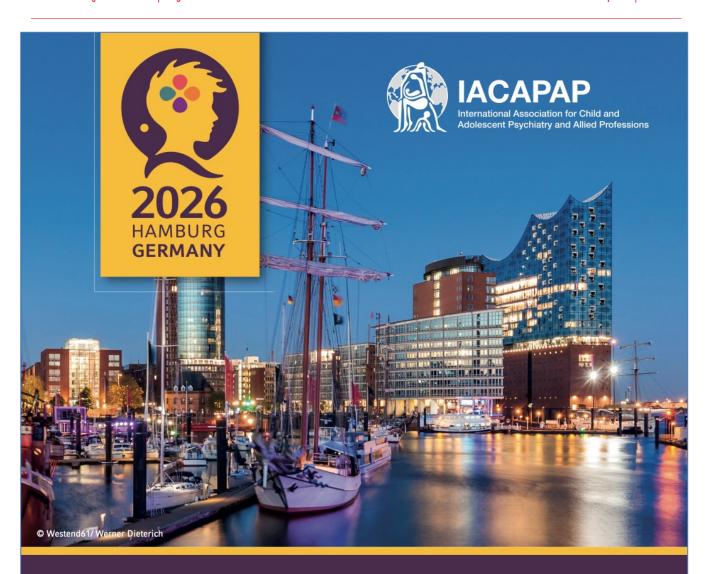
- 1. The web page for our World Congress is <u>live</u>.
- 2. The Helmut Remschmidt Research Seminar was successfully completed.
- We are still finalizing the documents for beginning the program in South Africa for the Kenyan fellows and we do not yet have a date for launching the program in the first trimester of 2026.
- 4. We already have a list of 2-3 pair of countries, and we are assessing formal and logistical arrangements to

- select one of them to be the third pair of countries of the SNF Global Center Clinical Fellowship Program for Lowand Middle-Income Countries.
- 4. We kept moving the progress for the psychometric assessment of the SNF Global Center item bank and we are finalizing the process to select naming and visual identity of the instrument.

Our auditable goals up to the next bulletin are:

- 1. Have, up to the next bulletin, a lineup with at least 10 key-note speakers from diverse countries and cultures for our World Congress in Germany who should be able to present relevant, evidence-based, innovative, and provocative CAMH data.
- 2. Have our fellows for the Donald Cohen Fellowship Program selected.
- 3. Have both a MOU signed among IACAPAP, SNF Global Center and the partners from Kenya and South Africa to have our second pair of countries onboard for the SNF Global Center Clinical Fellowship Program for Lowand Middle-Income Countries and a date for beginning the program in 2026.
- 4. Have another pair of countries defined for the SNF Global Center Clinical Fellowship Program for Lowand Middle-Income Countries.
- 5. Continue the process of psychometric validation of the SNF Global Center item bank and have a name for it, as well as some options for visual identity.

I hope you all enjoy reading our Bulletin.



27th World Congress of

# **IACAPAP**

Facing challenges in a constantly changing world Empowering child and adolescent mental health by evidence-based approaches

#### 1-4 July 2026

CCH – Congress Center Hamburg Hamburg, Germany

www.iacapap-congress.com

Save the date





# Empowering Mental Health in a Changing World: IACAPAP 2026

The 27<sup>th</sup> World Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) will take place from 1–4 July 2026 at the Congress Center Hamburg (CCH). The congress theme, "Facing challenges in a constantly changing world – empowering child and adolescent mental health by evidence-based approaches," reflects the urgent need to adapt mental health care to global shifts and emerging challenges. This event will gather professionals from psychiatry, psychology, social work, and related fields to explore innovative, evidence-based strategies for supporting youth mental health.

## Discover Hamburg and the CCH Experience

Set in the heart of Hamburg, Germany's gateway to the world, the congress offers a unique blend of academic excellence and cultural richness. Hamburg's maritime heritage, vibrant arts scene, and welcoming atmosphere make it an ideal host city. The Congress Center Hamburg (CCH), recently renovated to meet the highest standards of sustainability and technology, will provide a world-class venue for the congress. Its central location and modern infrastructure ensure a comfortable and productive experience for all attendees.

### A Rich Scientific Programme and Easy Registration

IACAPAP 2026 promises a diverse and dynamic scientific programme, featuring keynote lectures, interactive workshops, panel discussions, and poster sessions. Topics will span clinical innovations, policy development, trauma-informed care, neurodevelopmental disorders, and digital mental health tools. Online registration is now open, with tiered fees based on the World Bank Country Classification to ensure global accessibility. Participants can register via the congress website at www.iacapap-congress.com. Abstract submissions are also open: symposia proposals are due by 30 October 2025, and oral and poster submissions by 20 January 2026.

## Join the IACAPAP Community and Contribute

IACAPAP warmly invites child and adolescent psychiatrists, psychologists, researchers, and allied professionals to join the congress and become part of its vibrant community. By submitting symposia, oral presentations, or posters, you can actively support the scientific programme and help advance mental health care for young people worldwide. Don't miss this opportunity to engage with peers, share your expertise, and support evidence-based approaches in a rapidly evolving world.



**Website:** www.iacapap-congress.com **Email:** iacapap2026@cpo-hanser.de

#### **Welcome Address**



Tobias Banaschewski Congress President

It is our pleasure to welcome you all to our 2026 congress that will take place in Hamburg, Germany. IACAPAP was in Germany 20 years ago in Berlin! It was a memorable event, one of the most well attended congresses in IACAPAP history. No doubts that the success this time will be even greater. The central theme of the meeting is extremely relevant since we need to discuss evidence-based interventions in CAMH that can be quickly translated to services in the context of implementation science. We are sure this meeting will be again an invaluable opportunity for learning, exchange knowledge and experiences, find old and make new friends. The beauty and hospitality of Hamburg will make the experience unforgettable. Join us at the most comprehensive event on CAMH worldwide!



Luis Augusto Rohde IACAPAP President

#### **Congress Committees**

#### Congress President & Head of LOC

#### Prof. Dr. Tobias Banaschewski

Medical Director of the Department of Child and Adolescent Psychiatry and Psychotherapy and Deputy Director of the Central Institute of Mental Health Central Institute of Mental Health

#### Scientific Secretary

#### Prof. Dr. Sarah Baumeister

Department of Child and Adolescent Psychiatry and Psychotherapy Central Institute of Mental Health J 5 68159 Mannheim, Germany and

School of Health and Social Sciences AKAD University Stuttgart, Germany

#### Local Organising Committee (LOC)

68159 Mannheim, Germany

- Tobias Banaschewski, Mannheim, Germany
- Sarah Baumeister, Mannheim/ Stuttgart, Germany
- Alexander Häge, Mannheim, Germany
- Sarah Hohmann, Hamburg, Germany
- Nathalie Holz, Mannheim, Germany
- Hans-Henning Flechtner, Magdeburg, Germany
- Veit Roessner, Dresden, Germany
- Florian Zepf, Jena, Germany
- Manfred Gerlach, Würzburg, Germany

#### Scientific Advisory Board (SAB)

- Celso Arango, Spain
- Sven Bölte, Sweden
- Matthew R. Broome, United Kingdom
- Jan Buitelaar, The Netherlands
- David Coghill, Australia
- Samuele Cortese,
   United Kingdom
- Tycho Dekkers, The Netherlands
- Bruno Falissard, France
- Michael Goetz, Czech Republic
- Kazumasa Kimura, Japan
- Shuyan Liu, Germany
- Christian Monsalve, USA
- Carmen Moreno, Spain
- Peter Nagy, Hungary

- Paul Plener, Austria
- Guilherme V. Polanczyk, Brazil
- Yehuda Pollak, Israel
- Diane Purper Quakil, France
- Pradeep Rao, Australia
- Luis Augusto Rohde, Brazil
- Carmen M. Schröder, France
- Christina Schwenck, Germany
- Emily Simonoff, United Kingdom
- Argyris Stringaris, United Kingdom
- Anita Thapar, United Kingdom
- Gail Tripp, Japan
- Mario Valdivia, Chile
- Benedetto Vitiello, Italy
- Susanne Walitza, Switzerland



#### Congress Venue: Congress Center Hamburg (CCH)

The CCH – Congress Center Hamburg stands as one of Europe's largest and most modern congress venues, offering an exceptional setting for the 27th World Congress of IACAPAP in July 2026. With 12,000 square meters of exhibition space, 12,000 square meters of foyer space, and seating for up to 12,000 participants across 50 flexible halls, the CCH provides the ideal infrastructure for a global gathering of child and adolescent mental health professionals.

Located in the heart of Hamburg, the venue combines state-of-the-art facilities with outstanding accessibility and a vibrant urban atmosphere. Whether hosting keynote sessions, symposia, or networking events, the CCH ensures a seamless experience for all attendees. Its multifunctional design supports a wide range of formats, making it the perfect stage for innovation, collaboration, and inspiration at IACAPAP 2026.





#### Address

CCH – Congress Center Hamburg Congressplatz 1 20355 Hamburg



### Congress Destination: Hamburg

Discover Hamburg – Where Innovation Meets Inspiration

Hamburg is Germany's vibrant gateway to the world and the host city of IACAPAP 2026. Nestled along the Elbe River, Hamburg combines maritime charm with cutting-edge infrastructure, making it an exceptional destination for international congresses. With its world-class venues like the CCH – Congress Center Hamburg, seamless transport connections, and a rich cultural tapestry, the city offers the perfect setting for global collaboration and exchange.

Delegates will enjoy a dynamic mix of history and modernity, from the historic Speicherstadt warehouse district to the futuristic HafenCity. Culinary delights, scenic waterfronts, and a welcoming atmosphere await every visitor. Whether you're networking over coffee in a leafy courtyard or exploring the city's renowned museums, theaters and concert hall "Elbphilharmonie", Hamburg promises an unforgettable experience.

Join us in 2026 to shape the future of child and adolescent mental health in one of Europe's most inspiring cities.

#### **Arriving by plane**



Hamburg Airport is located in the northern district of Fuhlsbüttel. The S-Bahn to CCH departs directly from the airport and takes half an hour. Alternatively, you can take a cab or use MOIA, the ridesharing service for Hamburg. In good traffic conditions, the journey takes only 20 minutes.

#### Arriving by car

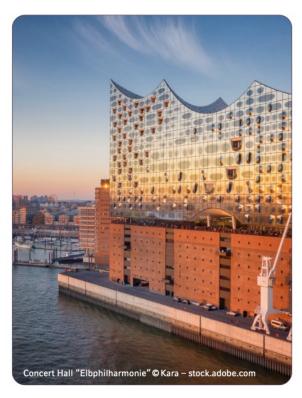


If you are traveling by car, it is best to take the Autobahn and then simply follow the signs for "Messe / CCH". The CCH has an underground parking garage (subject to parking fees)

### Arriving by public transport



The InterCity and S-Bahn station "Dammtor" is located directly next to the CCH. The subway stations "Stephansplatz (Opera/CCH)" and "Gänsemarkt" are also just a short walk away through the city and the "Planten un Blomen" park.









Sven Bölte, Sweden



Hilary Cass, UK



Argyris Stringaris, UK



Bruno Falissard, Brazil



Andrés S. Martin, USA



Guilherme V. Polanczyk, Brazil



Ilina Singh, UK



Ayesha Mian, Pakistan

#### **Keynote Speakers**

The main theme of the IACAPAP 2026 congress is:

"Facing challenges in a constantly changing world – empowering child and adolescent mental health by evidence-based approaches."

This theme reflects the congress's commitment to addressing global shifts and emerging challenges in child and adolescent mental health (CAMH) through scientifically grounded, adaptable strategies. It emphasizes the importance of implementation science and the rapid translation of evidence-based interventions into practice.

We are happy to have many renowned keynote speaker on board already.



### Call for Symposia and Abstracts

Join us in shaping a congress that fosters innovation, inclusivity, and global collaboration. We look forward to your insights and expertise.

Whether you're planning a symposium or submitting a poster or oral presentation, this is your opportunity to contribute to the global conversation in child and adolescent mental health. Check the guidelines and prepare your submission! Your research belongs on the world stage.

#### Abstract Submission Guidelines

Scan the QR code to read the guidelines and submit your abstract online. Please note that congress registration is required prior to your submission.



#### **Submission periods**

Symposia:

July 2025 – 30 October 2025 Poster & Oral Presentations:

July 2025 – 20 January 2026

Abstract submission for IACAPAP 2026 is now available online!

#### **Topics**

We strongly encourage submissions across the full spectrum of Child and Adolescent Psychiatry.

In particular, we welcome contributions that explore:

Developmental pathways of risk and resilience

Digital Frontiers in Child and Adolescent Mental Health

Mental Health in Global Crises

Rethinking Child and Adolescent Psychiatry – paradigms, theories, and practice

Child and Adolescent Psychiatry Services – Innovation, Inclusion, and Implementation Prevention, Early Intervention, and Mental Health Promotion

#### **Topic List**

- 1. Epidemiology
- 2. Transcultural Child and Adolescent Psychiatry
- 3. Psychosocial Development
  - a. Developmental Psychopathology
  - b. Identity Development, Stigma
- 4. Risk & Resilience Factors
  - a. Societal and Environmental Factors
  - b. Psychosocial & Lifestyle Factors,
     Coping Mechanisms
- 5. Gender Issues
- 6. Genetics and Epigenetics
- 7. Neurobiology & Neuroimaging
- 8. Neuropsychology
- 9. Transdiagnostic Symptomatology
- 10. Innovative Analytical Methods
- 11. Infant Mental Health
- 12. Specific CAP Conditions
  - a. Intellectual Disability
  - b. Functional Disorders (Feeding, Eating, Elimination, Sleep- Wake Disorders etc.)
  - Neurodevelopmental Disorders (ADHD, Autism Spectrum Disorders, etc.)
  - d. Trauma and Stress-Related Disorders
  - e. Anxiety and Mood Disorders
  - f. Disruptive and Conduct Disorders
  - g. Substance-Related and Addictive Disorders
  - h. Psychotic Disorders
  - i. Gender Dysphoria
  - j. Obsessive-Compulsive & Related Disorders
  - k. Self-Harming Behavior, Suicidality
  - I. Comorbid Somatic Conditions
  - m. Other Disorders

- 13. Diagnostic Assessment
- 14. Child and Adolescent Psychiatry Interventions and Services
  - a. Service Organization, Cross-Sectorial Collaboration
  - b. Public Mental Health, Prevention & Early Intervention
  - c. Family, Community- and School-Based Interventions
  - d. Psychopharmacology
  - e. Psychotherapy
  - f. Precision Child and Adolescent Psychiatry Mechanism-Based Interventions
- 15. Forensic Child and Adolescent Psychiatry
- 16. Child and Adolescent Psychiatry Training
- 17. Policy, Advocacy, Ethics & Participatory Research
- 18. Philosophy & Interdisciplinary Topics

Submitters are required to select one or two topics that best match their abstract.

#### **Online Registration**

Be part of the 27<sup>th</sup> World Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP), taking place from 1–4 July 2026 in Hamburg, Germany. This global event brings together mental health professionals, researchers, and advocates to share knowledge, inspire innovation, and shape the future of child and adolescent mental health. Early bird registration is available now – secure your spot at a reduced rate before the deadline!



Scan the QR code to register online!

### Individual Registration for IACAPAP 2026

| Category  | Early Bird Fee<br>1 July 2025–20 January 2026 | Regular Fee<br>21 January–30 April 2026 | Late / On-Site Fee<br>1 May-4 July 2026 |  |
|---|---|---|---|--|
| IACAPAP Individual Member 5)  |   |   |   |  |
| High Income Countries   | EUR 560                                       | EUR 620                                 | EUR 690                                 |  |
| Upper Middle Income<br>Countries  | EUR 480                                       | EUR 530                                 | EUR 590                                 |  |
| Low & Lower Middle Income Countries   | EUR 410                                       | EUR 450                                 | EUR 500                                 |  |
| IACAPAP Member Associations 1)  |   |   |   |  |
| High Income Countries   | EUR 590                                       | EUR 660                                 | EUR 730                                 |  |
| Upper Middle Income<br>Countries  | EUR 500                                       | EUR 560                                 | EUR 620                                 |  |
| Low & Lower Middle<br>Income Countries  | EUR 430                                       | EUR 480                                 | EUR 530                                 |  |
| Non-Member  |   |   |   |  |
| High Income Countries   | EUR 660                                       | EUR 720                                 | EUR 790                                 |  |
| Upper Middle Income<br>Countries  | EUR 580                                       | EUR 630                                 | EUR 690                                 |  |
| Low & Lower Middle<br>Income Countries  | EUR 510                                       | EUR 550                                 | EUR 600                                 |  |
| Undergraduate students, post-graduate students, Master's Students, Fellows 2) |   |   |   |  |
| High Income Countries   | EUR 450                                       | EUR 500                                 | EUR 550                                 |  |
| Upper Middle Income<br>Countries  | EUR 380                                       | EUR 420                                 | EUR 470                                 |  |
| Low & Lower Middle<br>Income Countries  | EUR 320                                       | EUR 360                                 | EUR 400                                 |  |
| Other   |   |   |   |  |
| Press Registration 3)   | EUR 0   | EUR 0                                   | EUR 0                                   |  |
| Accompanying Person 4)  | EUR 110                                       | EUR 110                                 | EUR 110                                 |  |

#### All prices in EURO (EUR).

All prices are gross values including 19% German VAT for registration fees.

- Please select the applicable member association and 4) verify that you are a member in good standing without any outstanding membership fees.
- Please upload a valid student ID or an official document confirming your current enrollment at an educational institution.
- Please upload a valid press pass or an official document confirming your work as a journalist or member of the press.
- Applicable for spouses/partner or children older than 18 years. Access to Opening Ceremony and Networking Reception on 1 July 2026 and Guided Tour of Hamburg for the Accompanying Person only. No access to the scientific programme or the exhibition area.
- 5) Please verify that you are a member in good standing at the time of the congress (2026) without any outstanding membership fees. If your IACAPAP Individual Membership ends prior to the congress date, please make sure to renew your membership.

#### World Bank Country Classification

Scan the QR code to see which country classification applies to you.





World Bank Country Classification

Let's make IACAPAP 2026 an unforgettable experience.

Secure your spot today and be part of a global movement for better mental health in children and adolescents.

### Your Opportunity – Become a Sponsor and Exhibitor

Join us in shaping the future of Child and Adolescent Mental Health!

We are thrilled to invite you to become a valued sponsor or exhibitor at the 27<sup>th</sup> World Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP), taking place from 1–4 July 2026 in the vibrant city of Hamburg, Germany.

As a global gathering of leading experts, practitioners, and innovators in child and adolescent mental health, IACAPAP 2026 offers a unique platform to showcase your brand, connect with decision-makers, and demonstrate your commitment to advancing mental health care for young people worldwide.

#### Sponsorship opportunities tailored to your goals:

Whether you're looking to make a bold statement or engage in targeted outreach, we offer flexible sponsorship options and categories. Contact us today to request the sponsorship brochure for more detailed information and pricing.

### Strategic packages to maximize visibility:

Choose from curated packages or customize your presence with high-impact options such as:

- Luncheon Symposium or Evening Symposium
- Hot-Spot Stage or Webcast

# On-Site Branding & Engagement:

- Host a Hospitality Suite or place your brand on information screens, display tables, roll-up banners, or charging stations
- Enhance attendee experience with water dispensers, signage, and more



Congress Organiser

CPO HANSER SERVICE GmbH
Paulsborner Straße 44, 14193 Berlin
Email: iacapap2026@cpo-hanser.de
Phone: +49 - (0)30 - 300 669-0
www.cpo-hanser.de

## Digital & Print Exposure:

- Advertise in the Final Congress Programme or Pocket Programme
- Feature your brand in the Congress App with banners, push notifications, gamification, and more
- Gain visibility on the Congress Homepage with logo placement or banner ads



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Email: cguenzl@cpo-hanser.de Phone: +49 – (0)30 – 300 669-38

#### Annelie Höppner

CPO HANSER SERVICE GmbH

Senior Project Manager

Email: ahoeppner@cpo-hanser.de Phone: +49 - (0)30 - 300 669-23

# Bridging Faces and Minds: Integrating Psychiatry into a Cleft Lip and Palate Clinic in India

By: Dr. Ajay Aditya A.M., Senior Resident in Psychiatry, Institute of Psychiatry and Human Behaviour, Goa Medical College, India.

#### Introduction

"Behind every repaired lip lies a story that stitches together not just tissue, but trauma, resilience, and hope."

Cleft lip and palate are among the most common congenital anomalies worldwide, affecting approximately 1 in every 700 live births. While surgical advances have significantly improved cosmetic and functional outcomes, the psychosocial and developmental needs of children with cleft conditions often remain in the shadows particularly in lowand middle-income countries (LMICs), where access to mental health care is limited and stigma persists.

In India, children with cleft conditions frequently carry a double burden: one visible, the other invisible. Alongside facial differences, they face bullying, disrupted schooling, emotional distress, and silent struggles. Recognising these challenges-and responding thoughtful invitation from our surgical colleagues-our psychiatry team joined hands with the cleft care unit to develop an integrated model of mental health support. What began as a pilot has grown into a compassionate, person-centred model that looks beyond the surgical scar to the life story it conceals.

### Beyond the Surface: Psychosocial and Developmental Challenges

"While a surgeon may close the cleft, the emotional and developmental gaps often remain wide open."

Children with cleft conditions frequently face a constellation of psychosocial and developmental challenges. These include stigma and peer rejection, particularly in school environments: low self-esteem and body image concerns often linked to difficulties speech or visible facial differences: and anxiety mood disturbances that are sometimes misinterpreted as personality traits or temperament. Parents, too, often helplessness, experience quilt and influenced by cultural myths and social isolation. Perhaps most concerning is the frequent oversight of neurodevelopmental comorbidities such as learning disorders, ADHD, and language impairments-that may significantly impact academic performance and long-term adjustment. Despite undergoing multiple corrective procedures, these children often remain unsupported in domains beyond the operating room.

"Fixing the face is only part of the picturesupporting the mind completes the frame."



Figure 1: Inauguration of the integrated cleft lip and palate clinic at our institute, uniting families, community members, and the multidisciplinary care team.



#### From Concern to Collaboration

The journey began in 2022, when cleft care surgeons in the team approached our department with concerns about children struggling with anxiety, social withdrawal, and school refusal in the perioperative period. Their openness to mental health input laid the foundation for a collaborative, wholechild approach.

A psychiatry-led pilot screening at a tertiary cleft care centre in South India revealed a high burden of emotional and behavioural concerns. What followed was the formal integration of child psychiatry into the multidisciplinary team, shifting the paradigm from single-focus treatment to holistic care.

#### **Key Components of the Model**

 Multidisciplinary case discussions, bringing psychiatry into weekly rounds with surgery, ENT, speech therapy, paediatrics, and orthodontics

- Routine mental health and developmental screening, using tools such as the Strengths and Difficulties Questionnaire (SDQ) and child behaviour checklists
- Focused psychiatric consultations, for concerns like selective mutism, behavioural dysregulation, trauma, or school refusal
- Play-based assessments and narrative tools, to explore body image, fears, and emotional narratives in younger children
- Caregiver psychoeducation sessions, addressing grief, adjustment, expectations, and parental self-blame
- Neurodevelopmental screening, to identify comorbidities like intellectual

disability, ADHD, and specific learning disorders-particularly when academic difficulties, inattention, or delayed milestones were flagged.

In essence, we stopped asking just "What can be fixed?" and started asking, "What else needs to be understood?"



Figure 2: The integrated team consisting of: plastic surgeon, psychiatrist, paediatrician, and psychiatric social worker.

#### **Case Vignettes: More than a Diagnosis**

#### <u>Case 1 - Social Anxiety and Mutism Post-</u> Surgery:

An 8-year-old girl, multiple post surgeries, remained mute in school despite age-appropriate speech abilities. She was diagnosed with selective mutism and social anxiety. With play therapy and gradual exposure, she began expressing herself and rebuilding social confidence.

#### <u>Case 2 - Behavioural Issues and</u> Academic Struggles:

A 10-year-old boy presented with persistent aggression and school refusal.

Developmental screening revealed underlying **ADHD** and borderline intellectual functioning. Behavioural interventions, caregiver training, and school liaison facilitated improvement in emotional regulation and engagement with academics. These cases reminded us that what appears as resistance is often distress-- waiting to be named, understood, and supported.

Written informed consent was obtained from the parents for the case vignettes described.



Figure 3: Therapeutic space for play-based engagement with young cleft patients.

#### **Acceptance in Action**

From the outset, the cleft surgical team demonstrated remarkable openness to including mental health in their care model. Their early recognition of the emotional challenges children faced-especially around surgery-laid the foundation for meaningful collaboration. While some professionals and families were initially uncertain, the benefits soon became evident. Surgeons observed

improved cooperation in anxious children; speech therapists reported better engagement. Most affirming, however, were the families who began referring others-sharing that, for the first time, their child felt not only treated, but truly understood.

#### **Lessons Learned**

Several key lessons emerged through this integration. Cultural adaptationlocal using metaphors, familiar language, and play-based approacheswas vital in building trust. The visible presence of psychiatry within the clinic reduced stigma and normalized mental health care. Involving families as cotherapists strengthened engagement and outcomes. Most importantly, early developmental screening allowed timely identification of comorbidities, often changing the course for children who might otherwise have been overlooked.

#### **Scaling the Vision**

Buoyed by the success of this model, efforts are underway to replicate it in other paediatric domains, including:

- Developmental delay and paediatric neurology units
- Spina bifida and craniofacial anomaly support services

In parallel, advocacy has begun at the policy level to incorporate mental health and developmental screening as a

standard part of cleft care pathways in India.

#### Conclusion

Cleft care has come a long way in restoring faces-but it's time we do more to restore minds. Children born with cleft lip and palate journey through far more than operating rooms - they navigate questions of identity, belonging, and self-worth. Mental health care is not a luxury add-on; it is a core necessity. Integrating psychiatry into cleft services ensures that no child is reduced to a procedure or diagnosis.

"In bridging faces and minds, we inch closer to the true meaning of holistic care-where healing is not only seen, but also felt."

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# The IACAPAP Special Interest Group (SIG) on Inpatient Child and Adolescent Psychiatry: A Call for Collective Action

By: Olabode Akintan, MD FRCPC MBA, SickKids Hospital, Toronto Canada.

npatient child and adolescent psychiatry occupies a unique space in our field - a paradox. Often it is the least discussed, most resource-intensive, and yet the service of last resort for our most vulnerable young people. As child psychiatrists and child mental health clinicians who have worked emergency, outpatient, and inpatient settings, many of us have seen firsthand how inpatient units can be both a sanctuary for stabilization and a mirror reflecting system failures. Yet despite its centrality in our continuum of care, inpatient child and adolescent psychiatry often lacks a dedicated global forum for exchange, innovation, and research collaboration.

At IACAPAP, we have an opportunity to change this. The formation of a Special Interest Group (SIG) on Inpatient Child and Adolescent Psychiatry would address a critical gap, bringing together clinicians, researchers, policymakers, and lived experience experts to advance this essential component of care.

### Rationale for an Inpatient Psychiatry SIG

Inpatient units around the world face shared challenges:

- 1. Managing severe psychiatric crises within constrained lengths of stay
- 2. Attempting to provide traumainformed care while ensuring safety in restrictive environments
- 3. Supporting families while addressing system-level barriers to discharge
- 4. Preventing iatrogenic harm (and risk of re-traumatization) through use of psychotropic medications and seclusion/restraint
- 5. Addressing the intersection of neurodevelopmental disorders, medical comorbidities, and acute psychiatric care
- 6. Navigating staff burnout and moral distress within high-acuity environments

While there are regional forums and occasional workshops on inpatient care, there is no sustained international platform for shared learning, quality improvement, and research collaboration in inpatient child psychiatry. Given the variability in service models across high-, middle-. and low-resource settings, variability in legal and expectations of care, there is an urgent need to collect, synthesize, and adapt best practices that are contextually relevant. This forum is designed to achieve that.

Moreover, the COVID-19 pandemic has exposed the fragility of inpatient systems worldwide, with increased acuity, prolonged lengths of stay due to community service bottlenecks, and staff attrition. It is critical that we learn from these challenges to build resilient, humane, and effective inpatient systems for the future.

#### Goals and Objectives of the SIG

The proposed IACAPAP SIG on Inpatient Child and Adolescent Psychiatry would aim to:

- Establish a Global Community of Practice:
  - Facilitate regular virtual meetings and discussions to share innovations, challenges, and system-level solutions.
  - Create mentorship opportunities for clinicians and researchers seeking to develop inpatient expertise.
- 2. Advance Research and Quality Improvement:
  - Identify shared research such as effective priorities, models for aggression management, family involvement in care, and reducina restrictive interventions.
  - Foster multi-site collaborative research, including low-cost, pragmatic studies that can improve care in diverse contexts.

- Develop repositories for protocols, guidelines, and outcome measures specific to inpatient care.
- 3. Promote Best Practices and Knowledge Translation:
  - Curate and disseminate evidence-based practices in psychopharmacology, therapeutic milieu interventions, and traumainformed approaches.
  - Share strategies for interdisciplinary collaboration with nursing, social work, education, and lived experience advisors.
  - Highlight case studies demonstrating innovative inpatient models, including virtual inpatient care and stepup/step-down units.
- 4. Advocate for Policy and System Change:
  - Support advocacy efforts to address the systemic underresourcing of child mental health inpatient services globally.
  - Facilitate discussions on equitable access to inpatient care and the prevention of unnecessary hospitalizations through community partnerships.
- 5. Center the Voices of Youth and Families:

- Embed the perspectives of young people and families with lived experience of inpatient care in shaping SIG activities.
- Develop resources and position statements on promoting dignity, rights, and culturally sensitive care within inpatient settings.

#### **Call to Action**

We believe that inpatient child and adolescent psychiatry deserves focused attention within IACAPAP. A SIG would create a sustained, structured space to explore innovations, address shared challenges, and advance research that directly impacts our most vulnerable patients.

If you work within or have a research interest in inpatient child and adolescent psychiatry, we invite you to join this initiative. Whether you are in a high-resource or low-resource setting, whether you are a trainee or a senior clinician, your voice and experience are needed. Together, we can build a vibrant, inclusive community dedicated to improving inpatient care globally.

Please reach out to indicate your interest, suggest focus areas, or share your vision for what this SIG could achieve. Let us build a global dialogue inpatient child ensures adolescent psychiatry the receives collective attention. rigor, and compassion it deserves.

To become a **member of the Inpatient**Child and Adolescent Psychiatry SIG,
please complete the membership
application form via this <u>link</u> and send us
a copy of your CV to <u>info@iacapap.org</u>.

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### The 34th National Congress of the Turkish Association for Child and Adolescent Psychiatry: A Scientific Milestone in Turkiye

By: Dr Hakan Öğütlü, Child and Adolescent Mental Health and Diseases Specialist and Clinical Associate Professor, University College Dublin School of Medicine, Ireland.

he 34th National Child and Adolescent Mental Health and Disorders Congress, organized by the Turkish Association for Child and Adolescent Psychiatry (TACAP), successfully held with broad participation from April 29 to May 3, 2025, at the Pine Bay Holiday Resort Hotel in Kuşadası, Aydin, Turkiye. The event, themed "Protecting Children and Youth in a Changing World," was by spearheaded the Association's President, Prof. Dr. Neslihan İnal, who actively participated in various sessions and delivered opening remarks. In her speech, she emphasized the association's steadfast commitment to child adolescent mental health in Turkiye and outlined its future vision.



Figure 1: Group picture of Congress attendees.

### International Experts and Current Issues Define the Congress

The congress was enriched by the participation of many internationally renowned figures, including Prof. Dr. Andrés Martin, Prof. Dr. Jörg M. Fegert, Prof. Dr. Kerim Munir, Prof. Dr. Manon Hillegers, Assoc. Prof. Dr. Daniel Fung, Prof. Dr. Campbell Paul, and Dr. Matthew Hodes. These invited speakers shared valuable insights on critical topics in child and adolescent psychiatry, such "Digital Health Challenges and Child Protection," "Building Bridges in Child and Adolescent Mental Health: Preparing Joint Research Projects," "The Prodrome of Bipolar Disorder in Children and "Mental Adolescents," and Health Services in Southeast Asia." Additionally, current issues like "Protecting Children with Conscious Psychopharmacology and Reasonable Screen Time," and sessions focused on academic skills such as "Manuscript Writing," drew significant interest.

The congress program also featured various courses, including "Acceptance and Commitment Therapy (ACT) for Children and Youth in the Neurodiversity Group, Specifically Autism and ADHD,

"Cognitive Behavioral Therapy for Obesity and Weight Management," and "Forensic Psychiatry Practices in Children and Adolescents." Panels addressed many important topics, such as "Emotional Regulation in the Digital Age," "Approaching Children in Disaster Situations," and "Eating Disorders in Children and Adolescents."

### WICAMHD 2025 Symposium Offers a Global Perspective



Figure 2: WICAMH Day team with the Congress organizers

On the first day of the congress, April 29, 2025, the WICAMHD (World Infant, Child and Adolescent Mental Health Day) 2025 Symposium, global awareness initiative, was also held in a hybrid format. With the theme "Bridging Worlds: Mental Health Support for Displaced Children and Families," the symposium featured opening remarks by WICAMHD Organizing Chair Dr. Daniel Fung and IACAPAP President Dr. Luis

Rohde. Following this, experts Dr. Campbell Paul ("Understanding the Infant and Family Experience of Forced Displacement: The Role for Mental Health Services"), Prof. Dr. Füsun Çetin Challenges Çuhadaroğlu ("The Displacement for Adolescents"), Matthew Hodes ("Support for Displaced and Families: Reflections on What We've Learnt and Where We're Going"), Dr. Chiara Servili ("Building Systems for Young People's Mental Health in Settings Affected by Displacement"), and Dr. Anthony Guerrero ("Finding Opportunities Globally to Care for Youth Vulnerable to Displacement") delivered presentations focusing on the mental health of displaced children and families.

### Scientific Achievements Crowned with Awards

The congress also recognized valuable scientific studies and projects in the field of child and adolescent mental health. The Ord. Prof. Dr. Fahrettin Kerim Gökay Research Award highlighted significant studies. The first-place award was shared by Elif Özkan and colleagues for their work "Journey to the World of Anime: Psychiatric Reflections of Anime Watching Behaviors in Adolescents," and Gökçen Deniz Yalçın and colleagues for their research "Evaluation of Cases Diagnosed with Specific Learning Disorder in Terms of Foveal Parameters, Ocular Dominance, Visual Perception, Attention and Memory Processes." The second-place award was presented to Buse Akıncı and team for "Dimensional Assessment of Repetitive Behaviors (DARB) Turkish Validity and Reliability Study," and to Zehra Nur İnal and Mehmet Karadağ for "Comparison of Serum Brain-Derived Neurotrophic Factor and Leptin Levels After Interpersonal Relations Psychotherapy in Patients Diagnosed with Anorexia Nervosa."

The Turkish Association for Child and Adolescent Psychiatry Project Award, aimed at encouraging innovative approaches, was granted to Kürşat Alperen Korkut and colleagues for their project "Multi-Modal Artificial Intelligence Supported Diagnosis Model in Autism Diagnosis."

One of the congress's prestigious awards, the Prof. Dr. Atilla Turgay Best Research Award, was given to Merve Çıkılı Uytun and team for their notable and practice-oriented study "Intervention for Childhood Anxiety Disorder: "Treasure Master" a CBT-Based Mobile Game for Improving Mental Health".



Figure 3: Teens Choir of Children with Autism.

Finally, the Turkish Association for Child and Adolescent Psychiatry Prof. Dr. Ülkü

Ülgür Research Award, supporting scientific research in the field, was awarded to Gonca Özvurt and her research group for their comprehensive study "The Effect of Psychoeducational Psychotherapy on Neurocognitive Functions, Quality of Life and Emotion Regulation in Adolescents Diagnosed with Bipolar Disorder". In her speeches at the award ceremony, Association President Prof. Dr. Neslihan İnal once again emphasized the importance of encouraging young researchers supporting scientific work for the association.

#### Conclusion

The 34th National Child and Adolescent Mental Health and Disorders Congress by significant concluded making contributions to the advancement of child and adolescent mental health in offering valuable Turkiye, scientific content and interaction opportunities that received positive feedback from participants. The concert given by a choir of teenagers with Autism at the closing ceremony was not only touching for everyone, but also a beautiful example of the effective results of our professional contributions. Further details and materials from the congress can be accessed at https://cocukergen2025.com/.

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# Recap: CACAP Hosts Engaging and Impactful June 2025 Virtual Education Courses

By: Laura James, CACAP Communications and Development Manager on behalf of

- Course 1 Committee Chairs: Dr. Laura Orlando (Co-Chair) MD FRCPC, Child and Adolescent Psychiatrist and Dr. Arfeen Malick (Co-Chair) MD FRCPC, Child and Adolescent Psychiatrist
- Course 2 Committee Chairs: Dr. Celia Robichaud (Co-Chair) MD FRCPC, Child and Adolescent Psychiatrist and Dr. Khalid Bazaid (Co-Chair) MD FRCPC, Child and Adolescent Psychiatrist

From June 12-15, the Canadian Academy of Child and Adolescent Psychiatry (CACAP) hosted two innovative and interactive virtual courses, welcoming over 100 participants from around the world. Attendees included psychiatrists, residents, pediatricians, nurse practitioners, and other allied health professionals, all dedicated to advancing youth mental health care.



Canadian Academy of Child and Adolescent Psychiatry

Académie canadienne de psychiatrie de l'enfant et de l'adolescent

# Course 1: Child and Adolescent Psychiatry Review and Refresh Exam Prep Course

This nationally developed, comprehensive course was designed both for residents preparing for the Royal College of Physicians and Surgeons of Canada examination and for practicing psychiatrists seeking to refresh their knowledge. The course offered an in-

depth review of emerging psychiatric research and best practices in clinical care.

Participants benefited from:

- Ten hours of foundational learning in Child and Adolescent Psychiatry (CAP)
- Case-based discussions focused on assessment, management, and treatment
- Live, interactive sessions with CAP experts from across Canada

#### What participants said:

"Excellent presentation on a highly relevant topic to my clinical work. Pearls learned around timing and the value of repeat psychological testing."

"This course was very organized and rich with great content!"

"An excellent talk! The information on psycho-ed and reassessment timing was very helpful."

### Course 2: Youth Mental Health Assessment and Treatment

The second course focused on real-world, practical strategies for assessing and treating youth mental health concerns in frontline settings. Topics included eating disorders, suicide and non-suicidal self-injury (NSSI), ADHD, substance use, psychopharmacology basics, and more.

Participants engaged in evidenceinformed sessions designed to support clinical decision-making and promote best practices in care.

#### What participants said:

"Many thanks for answering my questions and creating space to share experiences."

"A clear and structured presentation that helped me consolidate my knowledge and learn new, relevant treatment information." "Super helpful and packed with useful take-home points. I appreciated the clear definitions, the statistical framing of suicide, and the compassionate approach to NSSI."

"A very informative session full of expert tips."

"Wonderful real-life examples—thank you!"

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A heartfelt thank you to our dedicated organizers, outstanding speakers, and engaged participants for four days of learning, connection, and shared insights. We look forward to continuing to support excellence in youth mental health education.

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Promoting the Mental Health and Development of Children and Adolescent through Policy, Practice and Research





# Bridging Gaps, Building Hope - Highlights from the 22nd Annual Academic Sessions of the Sri Lanka College of Psychiatrists 2025

By: Dr Malsha Gunathilake, Honorary Secretary, Sri Lanka College of Psychiatrists, Sri Lanka.

The Sri Lanka College of Psychiatrists brought together mental health professionals from across the world at its 22nd Annual Academic Sessions, held from 1st to 4th August 2025 at the Kingsbury Hotel, Colombo. Centered on the theme "Bridging Gaps in Mental Health," the event created a vibrant space for dialogue, learning, and collaboration in advancing mental health care.

#### **Inauguration Ceremony**

The sessions were inaugurated on the 1st of August in the presence of a large gathering of distinguished guests and college members. Hon. Justice Janak De Silva, Judge of the Supreme Court of Sri Lanka, graced the occasion as the Chief Guest, while Dr. Vinay Kumar, Board Member (South Asia) of the World Psychiatric Association, attended as the Guest of Honour.

Hon. Justice Janak De Silva struck a chord with the audience by speaking candidly about the mental health concerns among judges, a pressing yet often overlooked issue. Justice De Silva also emphasized the need to strictly enforce anti ragging legislation in universities. Dr. Vinay Kumar emphasized the importance of ensuring mental health

services that are accessible, equitable, and compassionate for all, highlighting that collaboration, innovation, and the elimination of disparities are key to holistic well-being. Dr. Sajeewana Amarasinghe, President of the College, gave the Presidential Address that was a reflection on heartfelt the current challenges in mental health service provision in Sri Lanka, particularly the migration of trained psychiatrists. Prof. Chandradasa delivered Miyuru College Oration, which offered an insightful look into the role of Topiramate strategy adjunctive schizophrenia, exploring its potential to while addressing symptoms metabolic challenges.

#### Main Conference Highlights -Learning, Sharing, and Inspiring

The two-day main conference attracted 285 delegates, including overseas participants from India, the UK, Australia, and Canada. The academic programme was rich and varied, featuring five plenary sessions and seven symposia, covering a wide range of topics such as child and adolescent psychiatry, old age psychiatry, substance use, palliative care, women's mental health, and neuropsychiatry.



Figure 1: Dignitaries on the head table (From Left to Right): Dr Sajeewana Amarasinghe (President), Dr Vinay Kumar (Guest of Honour), Hon Justice Janak de silva (Chief Guest), Dr Miyuru Chandradasa (Orator), Dr Malsha Gunathilake (Hon Secretary).

Plenary Sessions that Sparked Conversations:

- Plenary 1: The recent CANMAT guidelines for major depressive disorder - Prof. Arun Ravindran (Canada)
- Plenary 2: Leadership in healthcare Prof. Mohammed Al-Uzri (UK)
- Plenary 3: Blood biomarkers for neuropsychiatric disorders: Enhancing early and accurate dementia diagnosis
   Dr. Dhamidhu Eratne (Australia)
- Plenary 4: Hacking the brain: The neurobiology of meditation and psychedelics - Prof. Varuni de Silva
- Plenary 5: Eating disorders: A primer for the general psychiatrist - Dr. Nishardi Waidyaratne-Wijeratne (Canada)

A thought-provoking panel discussion on Law and Psychiatry brought together diverse voices - Dr. Chittahari Abhayanayaka, Dr. Angelo de Alwis, Mr. Jagath Wickramanayake (President's Counsel), and moderator Dr. Chamara Wijesinghe. The discussion highlighted

how psychiatry and the legal world intersect, often in complex and sensitive ways.

#### **Key Themes from the Symposia**

symposia at the 22nd Annual Academic Sessions offered a rich spread of themes, ranging from child and adolescent mental health, women's mental health, and young psychiatry to head injury neuropsychiatry, psychotherapy, endof-life care, and alcohol use. Sessions featured both local and international experts, with engaging talks on pressing issues such as adolescent suicide, the impact of climate change, the biology and psychology of menstruation and menopause, traumatic brain dementia psychoactive care, novel substances, and adult ADHD. Creative and forward-looking perspectives also in discussions came through on expressive arts therapy, mindfulness, acceptance and commitment therapy, and motivational interviewing addiction care.

### Post-Congress Workshops - Extending the Learning

Two enriching post-congress workshops were held at the National Institute of Mental Health, Angoda. The first one was held on 3rd of August for doctors, focused on Electroconvulsive Therapy led by Madhubhashinee Dr. Dayabandara, Dr. Suresh Yadav, Prof. Varuni Silva, and Prof. Anuja de Abeydeera. The second workshop, on August shifted the focus supporting children and adolescents



Figure 2: Speakers and Chairpersons of the Symposium 1 on child and adolescent mental health.

with autism spectrum disorder through a collaborative approach. This session brought together diverse expertise, with contributions from Dr. Lakshmi Sravanti, Dr. Swarna Wijetunga, Dr. Senani Wijetunga, Ms. Samanmalee Thennakoon, Ms. Beenuka Wikramathunge, Ms. Nuwanda Athauda, and Ms. Wageesha Vidanapathirana.

### Social Events - Bonds Beyond the Sessions

The much anticipated Annual College Dinner, held on 2nd August at Hotel Cinnamon Life, created a warm and convivial setting for networking and camaraderie among both local and international delegates, strengthening professional ties in an informal and joyous setting.

The 22nd Annual Academic Sessions thus proved to be a rich platform for knowledge exchange, professional development, and strengthening collaborations to address mental health challenges in Sri Lanka and beyond.

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# Donald J. Cohen Fellowship Program for International Scholars in Child and Adolescent Mental Health Open for Application!

Are you passionate about transforming the future of child and adolescent mental health in your country or region? Do you want to connect with an international network of mentors, leaders, and emerging professionals dedicated to making a difference to the lives of children and adolescents through mental health research, clinical work, education, or policy? Are you eager to join a global network committed to creating lasting change?

We warmly invite you to apply for the **Donald J. Cohen Fellowship** 



**Program**, a prestigious and unique opportunity for early-career professionals in child and adolescent mental health to develop their leadership, share their research or innovative projects, and become part of a global community of change-makers.

#### What the Fellowship Offers

Selected Fellows will receive:

- Full Congress registration to 27th World Congress of IACAPAP 2026 in Hamburg
- Accommodation for the duration of the Congress
- Travel support (partial or full, depending on individual needs and available funding)
- Daily small-group mentoring with international experts
- Participation in exclusive symposia and sessions
- Dedicated presentation sessions to showcase your work
- Meaningful networking and social events with global peers and mentors

But beyond all this, what you'll gain is **a** sense of belonging in a movement that spans continents.

#### Who Should Apply?

We're looking for:

Early-career professionals under the age of 35 working in any area related to child and adolescent mental health

 including psychiatry, psychology, social work, nursing, education, public health, and more

- Individuals who demonstrate leadership potential in clinical work, research, teaching, or service development
- Applicants with a strong command of English and a commitment to engaging actively and fully in all Fellowship activities

Special encouragement is extended to applicants from low- and middle-income countries, and underrepresented or underserved regions. However, all eligible applicants who demonstrate a strong commitment to the goals of the Fellowship are welcome to apply.

#### **Project Submission**

Each applicant must also submit an abstract for a project suitable for poster or oral presentation at the Congress, on the Congress web site. This may be research-based, clinical, educational, or policy-oriented.

#### **Key Dates**

• Applications open: August 13, 2025

• Deadline: October 23, 2025

• Results announced: January 24, 2026

#### **How to Apply**

All applications must be submitted electronically and should be received by **October 23, 2025**. All supporting documents should be sent via email to <u>info@iacapap.org</u>. You will need to provide:

- A brief Curriculum Vitae (CV) (max 3 pages)
- A Letter of Motivation (max 200 words)
- A Project Abstract (that you have or will be submitting to the 27th World Congress of IACAPAP in Hamburg) (max 300 words)
- A Letter of Recommendation from your current/past Supervisor or Head of Department
- A copy of your passport or official ID
- Basic details about your background, institutional affiliation and interests

#### [Online Application form link]



#### Join a Global Community

Since its inception, the Donald J. Cohen Fellowship has empowered over **400** Fellows from more than **70** countries, many of whom have gone on to become global and national leaders, academic faculty, influential educators, and advocates for child and adolescent mental health around the world.

Take the next step in your journey, apply, connect, and grow with us in Hamburg!

For any questions, contact: <a href="mailto:iacapap2026@cpo-hanser.de">iacapap2026@cpo-hanser.de</a>.

We look forward to welcoming you to Hamburg in 2026!

### Dr. Sowmyashree Mayur Kaku and Prof. Jordan Sibeoni

Coordinators of the DJCFP, IACAPAP



#### **Support for the DJCFP Drive**

Join us in strengthening the future of global child and adolescent mental health by supporting the **Donald J**. Cohen Fellowship Program, mentorship/training program for young professionals. Our mission is to foster the professional development of emerging leaders in child and adolescent mental health worldwide. Your contribution will help nurture the next generation of leaders in child and adolescent psychiatry and mental health research.

Support for the DJCFP Drive is a fundraising campaign organised by IACAPAP with the aim of raising funds to sustain the Donald J. Cohen Fellowship Program (DJCFP) and offering travel grant support to shortlisted fellows attending the DJCFP 2026, which will be held during the 27th World Congress of IACAPAP 2026 in Hamburg, Germany, from July 1st to 4th, 2026.



Scan the QR code to donate and more information.

# Expanding the Reach of Family Therapy Across Borders - SPENEX 2025 Workshop

By: Dr. Ruziana Masiran, Consultant Psychiatrist & Senior Medical Lecturer, Department of Psychiatry, Universiti Putra Malaysia (UPM), Malaysia.

**Event**: Special Education & Neuropsychiatry Exhibition (SPENEX 2025)

Date: 17-18th May 2025

Venue: Hotel Santika Premiere, Kota

Harapan Indah, Bekasi, Indonesia **Organiser**: Talenta Center, Indonesia

#### Website:

https://www.spenex2025.talentacenter.sc h.id

#### **Workshop Facilitators:**

- Dr. Ruziana Masiran
   Senior Medical Lecturer & Consultant
   Psychiatrist,
   Faculty of Medicine & Health Sciences/
   Hospital Sultan Abdul Aziz Shah,
   Universiti Putra Malaysia, Selangor,
   Malaysia
- Mr Darrel Devan Lourdes
   Family Therapist,
   Andolfi Family Therapy Centre, Kuala
   Lumpur, Malaysia

#### Moderators:

- Dr Fransiska Kaligis (Child and Adolescent Psychiatrist, Universitas Indonesia)
- Dr Frilya Rachma Putri (Child and Adolescent Psychiatrist, Universiti Brawijaya, Indonesia)

#### **Background of the Program**

The Special Education & Neuropsychiatry Exhibition (SPENEX 2025), hosted by the Talenta Center in Indonesia, served as a vibrant regional platform to promote innovation, inclusivity, and mental health collaboration across the nation. Held from 17-18 May 2025 at Hotel Santika Premiere, Bekasi, the event brought together professionals from education, psychiatry, and allied health disciplines who were all united to improve the lives of children and adolescents across the region. The theme for this year was "Love & Harmony: Foundation of a Family's Mental Health and Wellbeing".

Guided by the vision of the International Association for Child and Adolescent **Professions** Psychiatry Allied and (IACAPAP) which calls for global cooperation to strengthen child and adolescent mental health, SPENEX 2025 went beyond discussion. It delivered hands-on skill-based training and live clinical demonstrations, building practical capacity among participants. Over the years, the organisers have steadily widened their scope, welcoming mental health professionals from neighbouring countries to foster a stronger, more connected regional network.

A highlight of the event was the Family Therapy Workshop, co-facilitated by Mr. Darrel Devan Lourdes of the Andolfi Family Therapy Centre and Dr. Ruziana Masiran from Universiti Putra Malaysia, designed to deepen the understanding and application of systemic therapy models in culturally diverse contexts. Over the years, the two presenters have established strong collaborative as partnership co-therapists developed a locally adapted model for training mental health professionals in Malaysia, which they were honoured to present and adapt for the Indonesian context.

## **Program Objectives**

- 1. To introduce core systemic therapy principles from the multigenerational model, tailored for families from the Nusantara region of Southeast Asia.
- 2. To promote the integration of Family of Origin (FOO) work into clinical practice with children and adolescents.
- 3. To foster skills in live family assessment, co-therapy, and reflective observation through experiential learning.
- 4. To build a cross-border community of mental health professionals engaging in family therapy through training, supervision, and dialogue.

## **Participants and Stakeholders**

Over 80 participants attended, including child psychiatrists, psychologists, educators, and postgraduate trainees from various Indonesian institutions. The event also welcomed stakeholders from



Figure 1:The facilitators with the organising committee members of SPENEX 2025.

the Ministry of Education, university departments, and non-governmental organisations supporting child development and special needs education.

## **Program Format and Content**

the first day, workshop On the introduced foundational principles and the evolution of family therapy, with emphasis on systemic approaches and Minuchin's four-step model. Dr. Ruziana followed with a theoretical primer focused on systemic dynamics and the Family Systems Theory, using culturally relevant case examples to deepen participants' understanding intergenerational patterns in therapy.

The second day featured an intensive pre-recorded live consultation session with an Indonesian family, co-led by Dr. Suzy Yusnadewi (child and adolescent psychiatrist), Mr. Darrel, and Dr. Ruziana. This segment integrated live therapy, case conceptualisation, and collaborative reflections with local practitioners. Enthusiastic participants found this

approach learning fresh and to expressed excitement engaging, throughout the session, and shared that they had gained valuable insights. Later, the afternoon sessions were dedicated to bridaina theory with clinical application through structured dialogues and an open Q&A forum. Participants were also encouraged to reflect on their learning and share personal clinical experiences, reinforcing the workshop's commitment to capacity-building in attuned culturally systemic therapy across Southeast Asia.



Figure 2: The co-facilitators on the second day of the workshop (from Left to Right): Dr Tjhin Wiguna, a child and adolescent psychiatrist from Universitas Indonesia; Dr Ruziana Masiran; Dr Suzy Yusnadewi; and Cheryl Chin and Darrel Devan Lourdes from Andolfi Family Therapy Centre.

## Impact and Alignment with IACAPAP Vision

The workshop embodied IACAPAP's values of cross-national training, collaborative clinical practice, and culturally responsive service

development. Its impact is measurable in:

- 1. Professionals gained practical skills in conducting systemic assessments and family therapy sessions.
- 2. The culturally sensitive model used for family therapy training was contextualised to fit Indonesian family systems, with emphasis on respectful therapist positioning and the role of extended kin.
- 3. The promotion of peer learning and clinical networking have directly fostered regional excellence in family therapy for child and adolescent mental health.
- Potential for a long-term engagement, as participants expressed interest in future webinars, joint publications, and regional training collaborations.



Figure 3: Dr Ruziana is conducting her segment of the workshop.

## Institutional Vision and Future Directions

This collaboration strongly aligns with the Department of Psychiatry, Faculty of Medicine and Health Sciences, Universiti



Figure 4: A cultural performance by Indonesian children during the opening ceremony.

mission Putra Malaysia (UPM)'s become Malaysia's national centre of excellence in psychotherapy and family therapy education. By facilitating such international knowledge exchanges, UPM is contributing to regional leadership in evidence-based mental health practices and the development of child-centric family systems interventions.

## **Acknowledgements**

We extend our sincere appreciation to:

- Talenta Center, Indonesia for hosting and organising SPENEX 2025
- Dr Suzy Yusnadewi and Drg. Yaya Aria Santosa, the Executive Leads of Talenta Center - for their continuous local and regional collaborative work around child and adolescent mental health
- Andolfi Family Therapy Centre, Kuala Lumpur - for co-developing the workshop content
- Collaborating clinicians and the family who participated in the live session



Figure 5: Dr Suzy Yusnadewi (second from right), along with children with special needs, presenting tokens of appreciation to the workshop facilitators.

 All participating mental health practitioners for their engagement

### Conclusion

The SPENEX 2025 Family Therapy Workshop served as a vital bridge between theory and practice, region and global perspective, and culture and clinical application. As Southeast Asia moves towards integrated and family-focused mental health care, such platforms remain essential for nurturing future-ready clinicians and achieving global standards of child and adolescent mental health care while staying rooted in cultural contexts.

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This article represents the view of its author(s) and does not necessarily represent the view of the IACAPAP's bureau or executive committee.

# Prof. Christina Schwenck - Photographer of the Year 2025!

By: Dr. Daniel Fung, Chief Executive Officer, Institute of Mental Health, Singapore.

German-born clinical clinical psychologist Prof. Christina Schwenck has been crowned Photographer of the Year 2025 by African Geographic for her breathtaking wildlife image capturing a leopard shaking water off its fur-a fleeting moment of sublime born from beauty serene patience in the African wilderness.



Christina's work represents a striking fusion of her scientific discipline and deep artistic vision: wildlife photography as mindfulness, an immersive exercise in observation, presence, and respect.

## Advocacy in Child & Adolescent Mental Health

Beyond her artistry, Prof. Schwenck is a dedicated advocate for child and adolescent mental health. A previous secretary general and member of the IACAPAP Bureau, she also coordinates the Helmut Remschmidt Research Seminars –a global mentorship platform empowering early-career professionals in child and adolescent mental health.

Her dual passions-clinical psychology and wildlife photography-not only reflect an extraordinary balance of empathy and creative focus, but also highlight the healing power of nature and presence.

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# East Meets West: Building Bridges in Eating Disorder Awareness - Webinar 2025

By: Dr Lakshmi Sravanti<sup>1</sup>, Dr John Vijay Sagar Kommu<sup>2</sup>

- <sup>1</sup> Assistant Professor, Department of Child and Adolescent Psychiatry, NIMHANS, India.
- <sup>2</sup> Professor & HOD, Department of Child and Adolescent Psychiatry, NIMHANS, India.

Lating disorders have long been viewed а predominantly Western phenomenon. with relatively little awareness or sparse literature emerging from Eastern contexts, especially India. However, with the rapid pace of modernization and cultural globalization, clinical observations and emerging research suggest a growing prevalence of disordered eating patterns in India. Despite this trend, there continues to be a lack of standard operating procedures well-established management protocols tailored socio-cultural realities of the country.

Recognizing this gap, the Department of Child and Adolescent Psychiatry at the National Institute of Mental Health and Neuro Sciences (NIMHANS), India, felt the pressing need to build collaborative bridges with global experts in the field. In 2024, we initiated a cross-cultural educational effort to mark World Eating Disorders Action Day (June 2nd) by partnering with professionals from the Oxfordshire Eating Disorders Pathway, United Kingdom. The webinar aimed to introduce Indian mental health professionals to key concepts in the assessment and management anorexia nervosa.

Encouraged by the feedback, particularly the strong request for deeper insights into the management of anorexia nervosa, we organized a second consecutive webinar on the 26th of July, 2025. This time, we expanded both the scope and ambition, emphasizing a culturally sensitive lens in understanding the management of this condition.



Figure 1: Members of the Department of Child and Adolescent Psychiatry, NIMHANS.

"Anorexia Nervosa: Translating Evidence into Action across Cultural Contexts", the 2025 edition of the webinar was marked by three major developments:

 Academic Collaboration Across Cultures - We were privileged to include experts from Kyoto University, Japan, adding another cultural perspective to the discourse and deepening our understanding of the transcultural dimensions of eating disorders.

- 2. Launch of Scientifically Developed IEC (Information, Education, and Communication) Material We released child- and parent-friendly informational booklets that used a storytelling format. The experiences of Babli the Deer, the central character, guide readers through narratives exploring body image concerns, restrictive eating, and the emotional world of affected children and families.
- **3. Presentation** of Indigenous Research We presented the ongoing work from the Department of Child and Adolescent Psychiatry, NIMHANS, India, offering grounded insights into the development of protocols for managing anorexia nervosa in the Indian context.

We received 135 registrations from across India, as well as from Malaysia and Cambodia, with participants actively engaging in the sessions through questions and reflections.

Following the opening remarks, the Director of NIMHANS Dr Pratima Murthy officially released the IEC materials: When Feelings Hide in Food - an overview of eating disorders in children and adolescents, and Babli's Silent Struggles - a story about navigating the challenges of anorexia nervosa through the journey of Babli, a deer from the fictional forest of Neelavana. Alongside her friend Mira the myna, and with the support of her family and other forest members, including a wise owl, Babli learns to overcome her struggles.

Prof. Meena K.S., Head of the Department of Mental Health Education, NIMHANS, opened the academic sessions by emphasizing the importance of raising awareness on eating disorders in the Indian context. This was followed



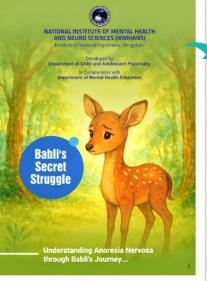


Figure 2: Cover pages of the two IEC booklets released during the webinar.



Figure 3: Prof John Vijay Sagar, Dr Lakshmi Sravanti, and Prof Meena K S (L -> R).

by Prof. Caz Nahman, who presented an overview of the principles of managing children anorexia nervosa in adolescents. The session then moved to Masanori Isobe's talk Dr. "Multidisciplinary Team Inpatient Care for Nervosa in Japan", and Anorexia concluded with a presentation by Dr. Madhushree Baruah, Senior Resident in the Department of Child and Adolescent Psychiatry at NIMHANS, on developing meal plans for the management of anorexia nervosa. Thus, the program created a complete arc - from discussing the gaps in the Indian context, to exploring advanced and evidence-based practices in the UK, to understanding multidisciplinary specific inpatient and approaches in Japan, finally presenting indigenous efforts bridging these gaps in India. What stood out most was the sense of collective commitment – despite the geographical distances, the shared goal of improving awareness, care, and compassion for young people struggling with eating

disorders brought everyone together in a meaningful dialogue.

Prof. John Vijay Sagar, Head of the Department, delivered the concluding remarks, reaffirming the commitment to work in this area, establish standard and teaching/training efforts, with the aim of making this an annual event every June July. The discussions concrete ideas for collaborative research, adaptation of existing evidence-based protocols to local cultural contexts, and creation of shared resource materials for clinicians across the country. momentum generated underscored the value of sustained dialogue and the need for platforms that connect disciplines, geographies, and sectors in child and adolescent mental health. This initiative reaffirmed our belief that cross-cultural exchange, rooted in empathy and science, is key to shaping the future of adolescent mental health - with shared wisdom lighting the way forward.

## **Speakers' Reflections**

Prof Meena K S



"Delivering the session at the webinar was both a responsibility and a privilege, offering a space to address an issue often hidden by silence and stigma.

Presenting at a webinar with international experts allowed me to share the Indian context and stress the urgent need for awareness as a lifeline for adolescents. Discussions on lived experiences, Human Library events, and narrative-based approaches reinforced my belief in the power of stories to challenge stigma and build empathy. hope 1 conversations lead to practical, culturally sensitive actions so young people feel supported before struggles escalate. I look forward to more platforms that inspire dialogue and meaningful change in addressing eating disorders."

Dr Masanori Isobe

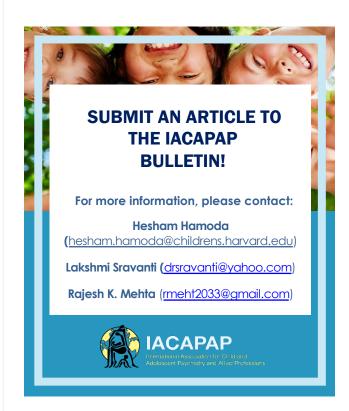


"It was a great honor to participate in the webinar. The diverse presentations were incredibly informative and will be very useful in my own clinical practice.

I was particularly impressed by the wideranging questions that followed each talk. What I found especially valuable was the attention given to cultural and environmental differences. The earnest desire to apply these insights to individual clinical environments highlighted the significant impact of this event. I look forward to the opportunity to collaborate again in the future."

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## **CAPMH Corner**

By: Lakshmi Sravanti, India Deputy Editor, CAPMH

Child and Adolescent Psychiatry and Mental Health (CAPMH) is the official IACAPAP Journal. The "CAPMH Corner" of the the September 2025 issue of IACAPAP Bulletin summarizes the following three studies recently published in CAPMH - - Changes in body dissatisfaction and dieting, and its association with mental health problems among Japanese eighth year adolescents: a 11-year time trend study (Hamada et al., 2025), Addressing international research challenges in child and adolescent mental health during global crises: experience and recommendations of the Co-SPACE international consortium (McMahon et al., 2025), and Personal growth through navigating the world as an artist: a qualitative study of the impact of creativity camp on adolescents with depression (Taniguchi et al., 2025).

Research | Open access | Published: 18 June 2025

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# Changes in body dissatisfaction and dieting, and its association with mental health problems among Japanese eighth year adolescents: a 11-year time trend study

Shoko Hamada ☑, Hitoshi Kaneko, Masayoshi Ogura & Andre Sourander

Child and Adolescent Psychiatry and Mental Health 19, Article number: 69 (2025) | Cite this article

**624** Accesses | **11** Altmetric | Metrics

Hamada et al., (2025) highlight the clinical importance of restrictive dieting and gender-based variations in body image and eating concerns in Japanese males to set a context for their study to explore the trends of body dissatisfaction and dieting among adolescents in 2011 and 2023 in Tokushima prefecture, Japan.

The team includes 17 local junior high schools chosen from a pool of 96 institutions, with assistance from the local education board. They collect data in

February and March 2011 and February and March 2023. They mention that in both the 2011 and 2023 surveys, students enrolled voluntarily and did not receive any reward for participation. In the 2011 survey, 1,865 out of 2010 students responded (92.8% response rate). However, only data of 1840 students (946 females and 894 males, average age 13.9 years) who specified their gender is used for analysis. In the 2023 survey, the data from 1155 students (533 females and 622 males, average age 13.9 years) is taken for analysis. The authors use a 9-item

screening scale for assessing attitudes and behaviors involving dieting and body image and the Japanese version of Strength and Difficulties Questionnaire (SDQ) for gathering the data. They carry out the statistical analysis using analysis of variance (ANOVA), multiple liner regression analyses, and chi-squared tests.

The authors report that no significant main effect was observed in the year surveyed, which means that the scores of dissatisfaction body and dietina behavior had not changed between 2011 (Female M = 16.2, SD = 4.09, SE = 0.13; Male M = 12.1, SD = 3.17, SE = 0.11) and 2023 (Female M = 16.3, SD =4.54, SE = 0.20; Male M = 12.48, SD = 3.27; SE = 0.13) (F (1, 2940) = 2.85, n.s.). Furthermore, they report no significant interaction was observed between aender and years surveyed. associated factors measured in the SDQ were similar in 2011 and 2023. However, they note that separate comparisons of the time-shifts of males and females on each behavior revealed that male adolescents reported more behavior and dieting problems in 2023, than those in 2011. Additionally, they note a difference in the prevalence of dieting and eating behaviors for females males. Among females, prevalence of "I have lost weight by not eating in a short period of time" ( $\chi$ 2(1) = 7.48, p < 0.001) (13.0% in 2011; 18.3% in 2023) increased and "I am not happy with my body" ( $\chi 2(1) = 13.57$ , p < 0.001) (85.2% in 2011: 77.6% in decreased, from 2011 to 2023. Among males, an increase from 2011 to 2023 was observed on three items: "I have

been on a diet" ( $\chi 2(1)$  = 19.52, p < 0.001) (10.5% in 2011; 18.5% in 2023), "I am afraid of getting fat" ( $\chi 2(1)$  = 21.83, p < 0.001), (29.3% in 2011; 41.3% in 2023), and "I have lost weight by not eating in a short period of time" ( $\chi 2(1)$  = 5.69, p < 0.05) (5.9% in 2011; 9.2% in 2023).

The authors acknowledge the study's strengths as - it being the first study to examine body dissatisfaction and dieting among Japanese adolescents via a timetrend method; of having conducted two surveys, 11 years apart, in the same school districts; and of having used reliable scales to assess the problems of eating and dieting and emotional and conduct problems; and its limitations as a survey conducted in only one location and among only eighth grade students; information on height or weight to calculate BMI was not obtained; using a scale for assessing body dissatisfaction and dieting behavior that was not validated in Japan; and inability to assess non-response bias due to non-availability of data related to non-responders; not considering socioeconomic status and school environment, such as academic pressures or school atmosphere. They conclude by suggesting future studies to include more comprehensive variables regarding with socioeconomic status and factors associated with schools.

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<u>Click here to access</u> the article

Research Open access Published: 29 May 2025

# Addressing international research challenges in child and adolescent mental health during global crises: experience and recommendations of the Co-SPACE international consortium

<u>Jennifer McMahon</u> ☑, <u>Sonja March</u>, <u>Martha Oakes</u>, <u>Wendy K. Silverman</u>, <u>Cathy Creswell</u>, <u>Arlen Rowe</u>, Mohsen Rajabi & Simona Skripkauskaite

Child and Adolescent Psychiatry and Mental Health 19, Article number: 62 (2025) | Cite this article

1075 Accesses | 5 Altmetric | Metrics

McMahon et al. (2025) underscore the importance of international longitudinal research during global public health emergencies to better understand mental health trajectories, inform the development of mental health support, and shape global research priority setting and policies. They describe the challenges faced to combine individual study data across countries and provide suggestions to navigate the challenges.

The team summarises their experiences from 14 independent sites across 10 countries that formed the Co-SPACE (COVID-19 Supporting Parents, Adolescents, and Children Epidemics) International Consortium. The Co-SPACE study was launched by researchers at the University of Oxford on the 30th of March 2020, a week after the first UK national lockdown was announced. Ten sites spanning eight countries began to conduct similar studies. Another four sites had already started to collect overlapping independently and ioined the Consortium later, introducing two additional countries. They mention that

all the fourteen sites from the Consortium collected parent-reported data and seven sites collected additional child-reported data. While, 12 sites collected information about child mental health symptoms primarily through the Strengths and Difficulties Questionnaire (SDQ), 11 sites also collected information on parent mental health from the Depression, Anxiety and Stress Scale (DASS-21) and ten sites collected COVID-specific information, for example, using the Pandemic Anxiety Scale (PAS). The ample sizes ranged from 138 to > 30,000 across the sites with an average sample size of 4490 participants.

The authors report current findings based several stages of expert discussion and review within the Consortium. These stages include (1) Lorentz workshop to discuss the issues (2) develop recommendations, (3) review Additionally, they note that a small working group was formed to bring these discussions together and formulate the associated recommendations share it with rest of the members of the Consortium Observations and

amendments for their comments to develop the final statement.

The authors report that following key of challenges funding inequalities leading to insufficient focus on mental health research; lack of focus on international research wherein many funders prioritised national international research: issues with timely initiation of studies due to problems arising in the ethics review process; data sharing issues due to variations in data governance procedures and changes in data governance procedures during the pandemic; cultural and local contextual issues impacting interpretation such as variations in country; lack of crossculturally comparable or meaningful standardised measures; pertaining to contextual metrics that allow more accurate and acceptable assessment within each country but complicated efforts to gather consistent and reliable data; research design issues impacting data collection; concerns due to varying recruitment procedures; and dissemination challenges arising from different publishing norms and practices across countries.

They suggest the following recommendations enhance to collaborative international research taking place during future crises to prepare in advance by establishing research networks; increase dedicated funding for international mental health research; improve data sharing and governance procedures; improve access to validated and culturally sensitive measures; develop inclusive and robust recruitment strategies and minimum

data synchronicity; and plan ahead for dissemination. They conclude that the unprecedented global crisis of the COVID-19 pandemic provided a critical learning opportunity for valuable insights into the challenges and shortcomings of systems and existing response mechanisms and that given likelihood of further global crises arising in the future, it is imperative to integrate these lessons into policy development, research initiatives. and institutional preparedness to ensure a more effective, coordinated global research response.

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Research Open access | Published: 02 April 2025

# Personal growth through navigating the world as an artist: a qualitative study of the impact of creativity camp on adolescents with depression

Yuko Taniguchi ☑, Olivia Costa, Athen Ortega, Shanze Hayee, Josie Friedman, Michaelle E.

DiMaggio-Potter, Jered Bright, Peng Wu, Angie P. Mejia, Gail A. Bernstein, Bryon A. Mueller, Bonnie

Klimes-Dougan, Wilma Koutstaal & Kathryn R. Cullen

<u>Child and Adolescent Psychiatry and Mental Health</u> 19, Article number: 38 (2025) | <u>Cite this article</u>

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Taniguchi et al., (2025) discuss the use of creative arts-based therapies addressing the mental health needs of young people. They allude to their novel arts-based intervention, Creativity Camp, that was designed and facilitated by artists to improve mental health and adolescents well-being in depression (Cullen et al., 2024). Their two-week curriculum offered across eight weekdays (4 h per incorporates multiple art modalities and facilitates self-inquiry across the different art projects.

They conduct this qualitative research with an aim to construct an overarching theory to understand how the Creativity intervention benefitted adolescents. This is part of the same study that was done to develop the intervention (Cullen et al., 2024), wherein 12-17 year old adolescents with depression symptoms were recruited through clinical referrals, social media and other community postings, and community engagement events, their parents completed the Child Depression Rating Scale - Revised questionnaire and adolescents with scores ≥ 12 were invited to move forward in the study. It was conducted by an interdisciplinary team including mental health professionals and professional artists in university spaces with spacious areas suitable for supporting structured day camp activities by enrolling three cohorts in the Summer of 2022 and three in the Summer of 2023.

The team takes participatory observation notes during and after each session to document their observations of the adolescents' behaviors and interactions; carry out adolescent interviews about their artwork and overall experience to gain insight into adolescents' experiences of creating artwork and the meaning behind their creations; and also conduct parent interviews. Overall, they collect data over multiple time-points. They employ a Constructivist Grounded Theory (CGT) methodology for analysis, which recognizes that data and analysis are co-constructed through interactions between researchers and participants. A team of "intervention-naive raters", 20 undergraduate students (who had not been a part of the Creativity Camp intervention or data collection) conduct initial coding. Thev employ triangulation process integrate

findings from adolescent-focused data (observation notes and interviews) and parent interviews to inform theory construction.

The authors constructed a theory that explains the benefits of Creativity Camp on adolescent well-being: "Personal growth by navigating the world as an artist" by triangulating the data from both adolescent and parent sources. They report several key processes in the adolescents' experiences during and after camp: internal negotiation between discomfort, novelty and exploring playfulness responsibility, and discovering the uniqueness of self and others, flexible approach toward life, and an expanded view of creativity. From noted that parent interviews, they adolescents expanded personal boundaries and enthusiasm through engagement, empowered perspective, and sustained enthusiasm.

The authors acknowledge strengths of study the convergent methodology from different sources adopted for data collection and large quantity of data analyzed using the CGT method; and limitations - lack of generalizability due to overrepresentation of White and non-Hispanic youth (63%) and sample represented metropolitan population; possible information bias as some individual responses warranted further exploration; the qualitative methods were not optimized for longitudinal analysis precluding direct examination of change over time, and that the research epistemologies team's may influenced the study's interpretation and

findings, despite ongoing reflection on their perspectives and positionality. Additionally, they note that the influence of the Arts in Health scholar- who emphasized bringing the artist's perspective was carefully considered throughout to ensure that this perspective did not predetermine the way the data was analyzed; this potential deliberately limitation was also research countered by the team members' varied disciplinary sociocultural experiences. They conclude Creativity Camp's multifaceted approach, which integrated creative exploration and encouraged "thinking as an artist," fostered significant personal growth among adolescents. The authors suggest that this may be useful in future work geared towards refining interventions for tailoring arts adolescents with depression.

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#### **Before This Life**

How I miss my old life, When my soul felt happy and alive. I remember the moments I truly lived, Before this new life came to exist. I was always smiling, A smile so pure and true. Now I still keep smiling, But it's a mask for what I'm going through. No one sees how deeply it hurts, To be sick, to feel so different from the world. No one sees the pain I hide, Each day pretending to be fine. When will all of this come to an end? I just want a life where I don't have to pretend. Dialysis drains me, it makes me weak, it makes me sick, and sometimes it gives me pain. I'm just a teenager. Why did God choose me? Why can't I live my life freely and happily? I do miss my old life, When my soul felt happy and alive. I remember each and every moment I truly lived, Before this new life came to exist

~ Vicky ~

## <u>Call for Nomination for IACAPAP Executive Committee</u> (2026-2030)

The International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) is calling for nominations for the following to serve on the Executive Committee of IACAPAP for the term 2026 to 2030:

- President
- Treasurer
- Secretary-General
- Vice Presidents (x 9 positions)

The Call for Nominations is open from **15th July 2025** to **31st December 2025**. Please ensure all the required information in the nomination criteria is included (CV, Statement of availability and willingness to serve, Short Vision Statement for the future of IACAPAP (not more than 500 words) and a letter of reference).

For more information, please visit <a href="https://iacapap.org/news/call-for-nomination-for-iacapap-executive-committee-2026-2030.html">https://iacapap.org/news/call-for-nomination-for-iacapap-executive-committee-2026-2030.html</a>.





**IACAPAP Education Travel Grant** was established to support attendance from Low-and Middle-Income Countries (LMIC) to attend the Association's congresses, including the World Congress of IACAPAP.

The IACAPAP Education Travel Grant is made available by IACAPAP to supplement participation costs for <u>IACAPAP Individual Member</u> from LMIC presenting at the Association's congresses. The grants are not intended to cover all expenses. The Secretary-General administers the travel grant budget. The number and amount of funding are be based solely on contributions received.

### A. Timeline

Application opens: 15 August 2025

Application deadline: 15 March 2026

Notification of outcome: Mid-April 2026

## **B. Nature of Grant**

The grantee of the IACAPAP Travel Grant receives the following to attend the <u>27<sup>th</sup> World</u> Congress of IACAPAP in Hamburg:

- Up to USD 1,000 (one thousand US Dollars) on reimbursement of airfare, transportation, and lodging expenses for travel within the continent <u>OR</u>
- Up to USD 1,500 (one thousand five hundred US Dollars) on reimbursement of airfare, transportation, and lodging expenses for travel outside the continent.
  - Airfare
  - Travel Expenses: Economy bus and train are covered by the travel grant. Taxi fares, parking fees, and fuel costs if you are driving to the site of the convention/conference are also acceptable.
  - Lodging expenses: Hotel, hostel, or other expenses towards lodging incurred during the convention/conference.

Note: Each recipient will be responsible for booking their hotel and flight. IACAPAP do not release funds to book flight or accommodation before any congress. The travel grant will be distributed within 30 days upon receiving the completed submission of the required documentation. All receipts must be submitted within 30 days of the congress to be reimbursed. Funds will not be distributed without receipts.

## **C. Eligibility**

- 1. Only **IACAPAP Individual Members** may qualify for an IACAPAP Education Travel Grant.
- 2. Current membership in IACAPAP at the time of submission, notification and event dates.
- 3. The candidate cannot receive two consecutive travel grants.
- 4. A formal abstract submission is required for the respective conference you wish to attend. Please have the abstract submission number available to complete this form online.
- 5. The applicant must be registered and have fully paid to attend the 27<sup>th</sup> World Congress of IACAPAP in Hamburg.
- 6. The applicant must be an author of a full, short or demo paper and be the one presenting the work at the  $27^{th}$  World Congress of IACAPAP in Hamburg.

## **D. Application**

All applications should be submitted electronically (click <a href="here">here</a>) and should be received by **15 March 2026**. All supporting documents need to be sent by email to <a href="info@iacapap.org">info@iacapap.org</a>. Late submission cannot be accepted.

Please submit the following:

- 1. Letter of recommendation/reference from current supervisor (300 words max) indicating name, affiliation, address, and contact details.
- 2. Curriculum vitae, maximum 02 pages, including previous awards, education, publications, research activities and further information deemed relevant.
- 3. A copy of the abstract (with abstract submission number) you have submitted.
- 4. A copy of the official receipt of the Congress registration fee.
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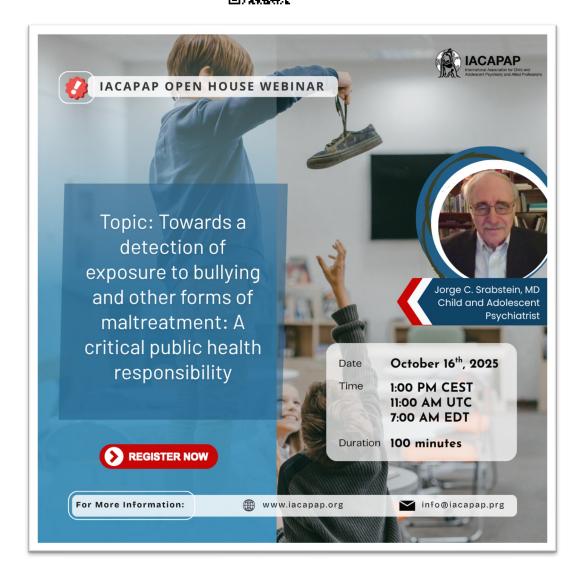
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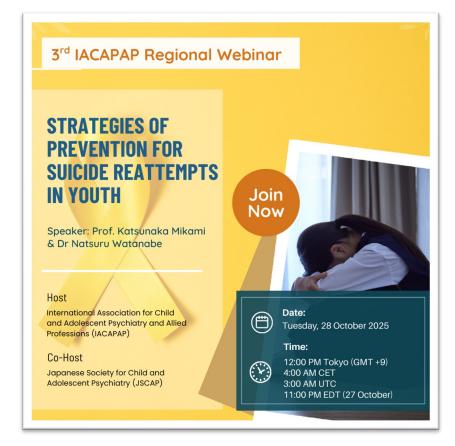
## **IACAPAP Open House Webinar**

We are excited to invite you to the upcoming IACAPAP Open House Webinar on "Towards a detection of exposure to bullying and other forms of maltreatment: A critical public health responsibility," presented by Dr Jorge C. Srabstein. This webinar will present an overview of the book Bullying, Impact on Health and Beyond, published by Oxford University Press last year. It aims to enhance understanding of the wide-ranging health risks linked to bullying - a complex psychosocial stressor that can manifest across the lifespan and transcend social, cultural, and geographic boundaries.

For more information, please visit <a href="https://iacapap.org/news/iacapap-open-house-webinar-oct-25.html">https://iacapap.org/news/iacapap-open-house-webinar-oct-25.html</a>.

To register: <a href="https://bit.ly/47flX6v">https://bit.ly/47flX6v</a>





## 3<sup>rd</sup> IACAPAP Regional Webinar (Asia Region)

Join us in the 3<sup>rd</sup> IACAPAP
Regional Webinar (Asia
Region), and listen to the
topic "Strategies of
Prevention for Suicide
Reattempts in Youth".

The IACAPAP Regional Webinar is a semiannual organised event IACAPAP in collaboration with a participating member organisation. participating member organisation for the IACAPAP Regional Webinar is the Japanese Society for Child & Adolescent Psychiatry (JSCAP).

- This webinar is open to the public.
- To reserve your spot, register now!
- Register: <a href="https://bit.ly/47MW92H">https://bit.ly/47MW92H</a>
- Webinar info: <a href="https://iacapap.org/news/3rd-regional-webinar.html">https://iacapap.org/news/3rd-regional-webinar.html</a>
- For queries, please contact us at <u>info@iacapap.orq</u>.





### **IMPORTANT NOTES**

- The IACAPAP webinar is open to members of IACAPAP (Individual Members and Individuals within the IACAPAP <u>Full Member</u> organisations and <u>Affiliate Member</u> organisations).
- The IACAPAP webinar will be held at different times to accommodate attendees and members from various regions. The 26<sup>th</sup> IACAPAP Lunch & Learn Webinar is scheduled to cater to the Middle Eastern's region.
- This webinar will be conducted virtually via Zoom. There is no cost to attend, but registration is required in advance. Seats are limited, and it's based on a first come, first served. E-certificate of attendance will be provided to those who have attended and completed the survey at the end of the webinar. Please be advised that the survey for the webinar will be displayed in the browser ONLY after the webinar has ended.
- Kindly click this <u>link</u> to view the time in your country. For more information, please visit <a href="https://iacapap.org/news/26th-lunch-and-learn-webinar.html">https://iacapap.org/news/26th-lunch-and-learn-webinar.html</a>.

To register



<u>The 25th RSCANP Congress and the 47th National Conference of Child and Adolescent Neurology - Psychiatry and Associated Professions with International participation</u>

24-27 September 2025 Kronwell Hotel, BRAŞOV, România

Congress website



#### 2026 SA-ACAPAP CONGRESS

12-14 March 2026 Lagoon Beach Hotel, Milnerton, Cape Town, South Africa

Congress website

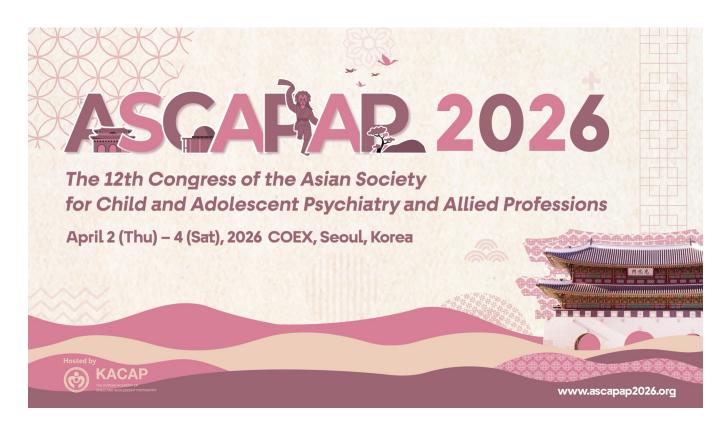
45<sup>th</sup> Annual Canadian Academy of Child & Adolescent Psychiatry Conference

6 - 9 June 2026 Delta by Marriott St. John's Hotel and Conference Centre, St. John's, Newfoundland

Congress website







| Title           | The 12th Congress of the Asian Society for Child and Adolescent |
|-----------------|---|
|                 | Psychiatry and Allied Professions (ASCAPAP 2026)                |
| Dates           | April 2 (Thu) - 4 (Sat), 2026                                   |
| Venue           | COEX, Seoul, Korea  |
| Website         | www.ascapap2026.org   |
| Official        | English   |
| Language        |   |
| Hosted by       | The Korean Academy of Child and Adolescent Psychiatry           |
| Important Dates | Symposium Proposal Submission Deadline September 2 (Tue), 2025  |
|                 | Abstract Submission Deadline October 28 (Tue), 2025             |
|                 | Abstract Acceptance Notice December 9 (Tue), 2025               |
|                 | Pre-registration Deadline March 3 (Tue), 2026                   |



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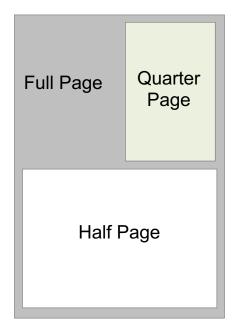
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## **IACAPAP Member Organisations**

## **Full Members**

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Association for Child and Adolescent Psychiatry and Allied Professions in Nigeria (ACAPAN), Nigeria

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Finnish Society for Child and Adolescent Psychiatry (LPSY), Finland

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Georgian Association of Children Mental Health (GACMH), Georgia

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Hungarian Association of Child and Adolescent Psychiatry and Allied Professions (HACAPAP), Hungary

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