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24th European Congress of Psychiatry

## Joint symposium

### Symposium: Europe meets Asia – commonalities, differences and future perspectives on postgraduate training in psychiatry – Joint symposium with AFPA

#### JS01

##### The Asian perspective

S. Kanba

*Kyushu University, Neuropsychiatry, Fukuoka, Japan*

The 1990s saw an inexorable wave of globalization. This came as a massive jolt to the culture of Japan, which until then had been in a state of balance and stability. However, unlike the West, in Japan this economic globalization is not a manifestation born of individualistic value systems and socioeconomic systems that had previously been in place. The spirit that was imported together with economic globalization was not mature individualism. At the risk of overstating the case, Japan went too far in ripping apart the complex, intricate interpersonal relations that had been in place and moving toward the individualism.

I will explain that the relationship between culture and the mind takes the form of a cooperative organization. The relationship between culture and the brain therefore also takes the form of a cooperative organization. Culture has a top-down influence even on simple visual perception.

I will state that the phenomenon of the depressive state generally known as “modern depression” occurring in epidemic proportions can be explained in terms of a loss of etiquette due to cultural intermingling as well as cultural affordance. Public opinion tends toward the argument of whether or not those who have sunk into this depressive state simply want to slack off. However, from the point of view of psychiatry, it is more important to consider the fact that while manifestations and popular names may differ, mental disorders will continue to develop in the future, regardless of the era, and we need to cultivate a better understanding of their structure. The essential challenge in this respect is the merging of cultural psychology and cultural neuroscience.

*Disclosure of interest* The author has not supplied his declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.792>

#### JS02

##### The trainee perspective

M. Phanasathit

*Department of Psychiatry, Thammasat University, Pathumthani, Thailand*

In Asia, while the postgraduate training in psychiatry employs the World Psychiatric Association (WPA) core training curriculum for psychiatry as a standard course, some adjustment to the course is required for the unique demographic and sociocultural characteristics of its region.

From the small group work in the 14th course for the academic development of psychiatrists (CAD), organized by the Japan Young Psychiatrists Organization (JYPO) in 2015, young psychiatrists from Indonesia, Japan, Philippines, South Korea, Taiwan and Thailand agreed that the core psychiatric curriculum must include both general and psychiatric knowledge which are fundamental to clinical practice and continuous learning. General knowledge consists of knowledge management, academic skills, epidemiology, research methodology and statistics, evidence-based medicine, bio-ethic and medicolegal issues, professionalism, and medical anthropology, while psychiatric knowledge incorporates basic science, diagnostic assessment skills, etiopathogenesis, pharmacological and non-pharmacological treatments, disease prognosis, and mental health promotion and prevention. Moreover, the curriculum for junior psychiatric residents has to be composed of courses from various departments that encourage them practice in holistic care and multidisciplinary approach including emergency medicine, internal medicine, neurology, pediatrics, community based medicine, anesthesiology, radiology and palliative care. For senior psychiatric residents, the training program should consist of in-depth psychiatric knowledge, general psychotherapy concept and basic skills, and free elective subjects.

Since Asia is different from Europe in terms of large population, shortage of psychiatrists, aging society, racial and cultural diversity, and high risk of natural disasters; the postgraduate training in psychiatry in Asia should focus on the subjects regarding health economy, geriatric psychiatry, cultural and trans-cultural psychiatry, ethnopsychopharmacology, disaster psychiatry and mental health. Furthermore, the cooperation among Asian countries should be promoted in order to initiate knowledge exchange and research collaboration. These could contribute to the sustainable advancement of Asian psychiatry and mental health in the future.

*Disclosure of interest* The author has not supplied his declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.793>