

The achievements of the WPA Scientific Publications Program – 2011-2014

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At the World Congress of Psychiatry held in Madrid in September 2014, the WPA General Assembly was provided with a report on the fulfillment of the goals of the triennium 2011-2014 under the Presidency of P. Ruiz. Included in this report was a briefing I presented on the scientific publications of the WPA. Highlights of this presentation are provided below.

For the period 2011-2014, members of the WPA Operational Committee on Scientific Publications included M.B. Riba, Chair (USA), C. Leal, Co-Chair (Spain), A. Cia (Argentina), L. Lam (China), and Z. Zemishlany (Israel). The Committee met once a year over the triennium to develop an agenda, goals and deliverables. The principal goals of the WPA Publications Program have been to disseminate information about clinical care, services, and research developments in mental health care throughout the world, and to pro-

mote and give strong visibility to high quality research and practice, involving psychiatrists from all WPA zones.

A major achievement of the WPA has been to produce the acclaimed journal *World Psychiatry*, whose editor in chief is M. Maj. This esteemed journal is published by Wiley-Blackwell, and has reached now an impact factor of 12.846, ranking number 4 among psychiatry journals worldwide. It is translated into such languages as Russian, French, Arabic, Turkish, Spanish, Chinese, and Romanian. It is indexed in PubMed, Current Contents/Clinical Medicine, Current Contents/Social and Behavioral Sciences, Science Citation Index, and EMBASE.

In addition, the WPA has developed and supported publications from WPA Sections and Committees, proceedings from WPA meetings, newsletters, publications from Member Societies and books. A new relationship has just been announced between the WPA Section on Education, chaired by A. Tasman, and the journal *Academic Psychiatry*,

Springer, whose editor in chief is L. Roberts.

We continue to publish the highly successful series *Evidence and Experience in Psychiatry*, which compares research evidence and clinical experiences concerning the diagnosis and management of the most common mental disorders.

Members of the WPA are very active in authoring books on a wide range of important psychiatric topics (see Table 1). In addition, many of the very active and productive WPA Scientific Sections have officially linked journals (see Table 2).

The Secretary for Publications has given presentations at national and international meetings on how to bring ideas and work to publication. These presentations have been helpful, especially to trainees and junior members

Table 1 Selection of recent books authored by WPA members

Baron D, Reardon C, Baron S (eds). <i>Clinical sports psychiatry: an international perspective</i> . Oxford: Wiley-Blackwell, 2013.
Bhugra D, Ruiz P (eds). <i>Leadership in psychiatry</i> . Oxford: Wiley-Blackwell, 2013.
Bloch S, Green SA, Holmes J (eds). <i>Psychiatry: past, present and prospect</i> . Oxford: Oxford University Press, 2014.
Callard F, Sartorius N, Arboleda-Florez J et al (eds). <i>Mental illness, discrimination and the law; fighting for social justice</i> . Oxford: Wiley-Blackwell, 2012.
Cooper JE, Sartorius N. <i>A companion to the classification of mental disorders</i> . Oxford: Oxford University Press, 2013.
Grassi L, Riba M (eds). <i>Clinical psycho-oncology: an international perspective</i> . Chichester: Wiley, 2012.
Grassi L, Riba M (eds). <i>Psychopharmacology in oncology and palliative care</i> . Berlin: Springer, 2014.
Joska J, Stein D, Grant I (eds). <i>HIV and psychiatry</i> . Oxford: Wiley-Blackwell, 2014.
Koslow SH, Ruiz P, Nemeroff CB (eds). <i>A concise guide to understanding suicide</i> . Cambridge: Cambridge University Press, 2014.
Patel V, Minas H, Cohen A et al (eds). <i>Global mental health: principles and practice</i> . New York: Oxford University Press, 2013.
Riba M, Rubenfire M, Wulsin L et al (eds). <i>Psychiatry and heart disease</i> . Oxford: Wiley-Blackwell, 2012.
Soldatos C, Ruiz P, Dikeos D et al (eds). <i>Pluralism in psychiatry</i> . Bologna: Medimond International Proceedings, 2014.
Tasman A, Kay J, Ursano R (eds). <i>The psychiatric interview</i> . Oxford: Wiley-Blackwell, 2013.
Thornicroft G, Patel V (eds). <i>Global mental health trials</i> . Oxford: Oxford University Press, 2014.

Table 2 Journals with linkages to WPA Sections

Affective Disorders – <i>Journal of Affective Disorders</i>
Classification, Diagnostic Assessment and Nomenclature – <i>Psychopathology</i>
Clinical Psychopathology – <i>Psychopathology</i>
Disaster Psychiatry – <i>Revue Francophone du Stress et du Trauma; Revista de Psicotrauma</i>
Ecology, Psychiatry and Mental Health – <i>Idee in Psichiatria</i>
Education – <i>Academic Psychiatry</i>
History of Psychiatry – <i>History of Psychiatry</i>
Mental Health Economics – <i>Journal of Mental Health Policy and Economics</i>
Personality Disorders – <i>Personality and Mental Health</i>
Psychiatric Rehabilitation – <i>International Journal of Mental Health</i>
Psychiatry of Intellectual Disability – <i>Journal of Intellectual Disability Research</i>
Psychophysiology in Psychiatry – <i>Activitas Nervosa Superior</i>
Rural Mental Health – <i>Psychiatry in General Practice</i>
Transcultural Psychiatry – <i>Transcultural Psychiatry</i>
Women's Mental Health – <i>Archives of Women's Mental Health</i>

of the WPA, and we hope to continue these types of presentations at future WPA regional and thematic meetings.

Future goals of the Publications Program will include helping the Scientific Sections and other WPA groups to develop innovative ideas that can be

brought to publication; more use of technology; enhancement of linkages to developing countries in terms of access and development of journals and publications; and new partnerships with publishing companies which would like to work with WPA members, Member

Societies, Scientific Sections, Committees and other components. We also welcome opportunities to work with patients and families in identifying ways to provide information in a timely and useful way.

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ICD-11 symposia at the World Congress of Psychiatry

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Within the 16th World Congress of Psychiatry, held in Madrid from 14 to 18 September 2014, a series of symposia took place, providing information on the ongoing development of the chapter on mental disorders of the ICD-11.

The symposia summarized the proposals for the various sections of the chapter, which are being produced by the fourteen working groups appointed by the World Health Organization (WHO) in consultation with relevant stakeholders, including WHO's member countries, several professional groups, and users of mental health services and their families. A list of scientific papers presenting and discussing these proposals, and of other relevant publications, is provided at the end of this article (1-99).

The symposia also presented the field studies for the development of the ICD-11 chapter on mental disorders, which can be subdivided into three groups: formative field studies, Internet-based field studies, and clinic-based field studies.

Formative field studies aimed to guide decisions about the basic structure and content of the classification, exploring clinicians' conceptualizations of the interrelationships among categories of mental disorders.

In the first study (100), 1,371 psychiatrists and psychologists from 64 countries rated the similarity between mental disorders presented as paired comparisons. The results indicated that the par-

ticipants' mapping of mental disorders was remarkably consistent across professions, languages and WHO regions. The degree of similarity between clinicians' views and the structures provided by the DSM-IV and ICD-10 was moderate ($\kappa = .42$). The proposed structure for ICD-11 was found to more closely align with clinicians' understanding of the relationships among disorders ($\kappa = .51$).

In the second study (101), 517 mental health professionals recruited by field study centres in eight countries were asked to sort a set of 60 cards containing the names of mental disorders, based on their own clinical experience, and then to form a hierarchical structure by aggregating and disaggregating these groupings. The hierarchical organizations produced by clinicians were remarkably consistent across countries, diagnostic systems currently used and professions. Clinicians' consensus classification structure was different from ICD-10 and DSM-IV and in several respects consistent with proposals for ICD-11.

Internet-based field studies are being implemented through the Global Clinical Practice Network, which currently includes about 12,000 practitioners from all regions of the world. Physicians, primarily psychiatrists, represent 59% of the Network, and psychologists 30%. All other mental health disciplines (e.g., nursing, social work and occupational therapy) are also represented. One third of the members are from Asia, one third from Europe, and 20% from the Americas, equally divided between Latin and North America. About 41% come from low- or middle-income countries. Members have

registered through nine languages (Arabic, Chinese, English, French, German, Japanese, Portuguese, Spanish and Russian).

These Internet-based studies are using vignette methodologies to examine clinical decision-making in relationship to the proposed ICD-11 diagnostic categories and guidelines. Data collection has been completed for the first study, dealing with disorders specifically associated with stress, which has been conducted in English, Japanese and Spanish with the participation of 1,738 Network registrants.

Clinic-based studies will assess the clinical utility of proposed ICD-11 diagnostic guidelines in real-life settings, with a special focus on low- and middle-income countries. More specifically, the studies will assess: the ability of the diagnostic categories to aid clinicians' understanding of the person's condition; how well the guidelines fit the presentation of actual clinical cases; the feasibility of using the guidelines in regular clinical interactions; and the adequacy of the guidelines for assessing individuals' conditions.

A major multi-country study has also been conducted concerning the utility and reliability of key changes being recommended for the primary health care version of the ICD-11 chapter on mental disorders. This study focused on the most common mental disorders seen in primary care settings (in particular, depression, anxiety and somatic symptoms).

References

1. First MB, Westen D. Classification for clinical practice: how to make ICD and DSM better able to serve clinicians. *Int Rev Psychiatry* 2007;19:473-81.