

SCIENTIFIC PROGRAMME

GLOBAL MENTAL HEALTH SYMPOSIUM

What is Global mental health?

Samuel Okpaku

BMAG
AuditoriumThursday, 25th June 2015 | 08H00

Abstract

Global health and global mental health are shifts in paradigm that are in response to the globalization process. Meanwhile, there is a shift in the definition and portfolio of health to include for example human rights and climate change. Many rich nations are beginning to include health policies within their foreign policies. Many stakeholders share the international vision of equity to all. We are in this together.

This presentation will give a history of global mental health. It will present a definition of global mental health along 5 criteria. This definition as will be useful for research and scholarship.

The presentation will highlight what some of the rich countries are contributing to global health, and what more they can do. It will also highlight the reciprocal benefits not only in terms of cultural and friendship benefits, but also potential education, research, and training benefits. It will define global mental health as the range of activities concerned with health that meets five principal criteria: universal and trans universal criterion; public health criterion; stakeholder's criterion; problem ownership criterion; and team criterion. This definition distinguishes it from community mental health and it allows for us likely to facilitate scholarship and research.

Global mental health like the overarching process of globalization is not without any criticism. There is a vocal group that challenges the westernization and over medicalization of mental health. The role of such group as a watch dog will also be presented.

CV

**Samuel O Okpaku, M.D., Ph.D**

Dr. Okpaku is the President and founder of the Center for Health, Culture and Society in Nashville TN, USA. He is a graduate of Edinburgh University Medical School and he holds a Ph.D in Social Research and Welfare from Brandeis University, Waltham, MA, USA. He has been on the faculty of University of Pennsylvania Medical School, Yale University and Vanderbilt University Medical School. He was a senior fellow at the Vanderbilt University Institute for Public Policy Studies. He has training and background in Internal Medicine, Psychiatry and Social Research.

His research interests have included Lithium transport, Psychotherapy, Disability Reconciliation and Cultural Psychiatry. He has published in these areas. He is also the author of *Sex, Orgasm and Depression and their relationship in a changing society*. He is the editor of *Clinical Methods in Transcultural Psychiatry*, *Mental Health in Africa* and the *Americas Today* and *Essentials of Global Mental Health*.

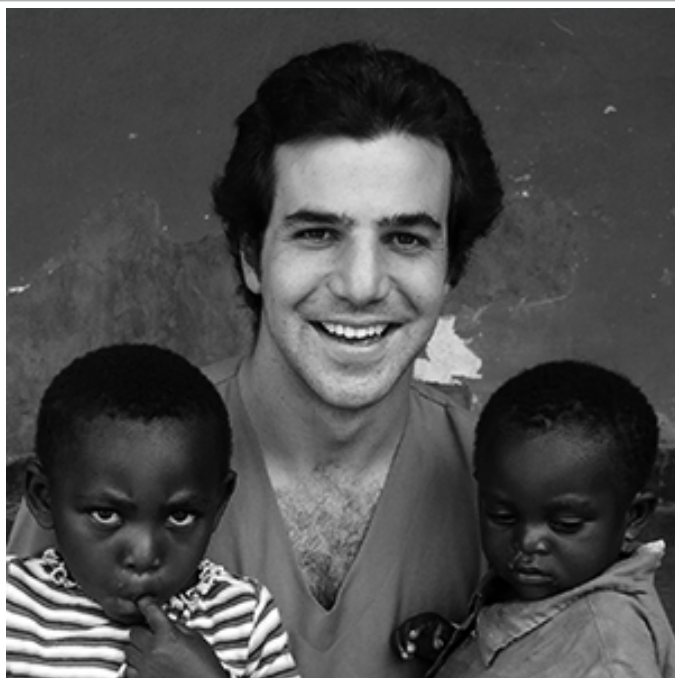
SCIENTIFIC PROGRAMME

GLOBAL MENTAL HEALTH SYMPOSIUM

*How is health across borders?***Gustavo Carona**BMAG
AuditoriumThursday, 25th June 2015 | 08H00

Abstract The personal perspective of a doctor who has worked in some of the worst areas in terms of humanitarian need of our days. Medicine assumes a completely different role, although the aim is the same no matter where: save lives and improve the quality of life. Our task as a doctor and as a human being should always be seen as citizens of the world, because health issues has no borders.

CV

**Gustavo Carona**

34 years old, from Porto.

Faculty of Medicine of the University of Porto 1998-2004

Specialization in Anesthesiology at Hospital de São João-
Porto, 2006-2011Sub-specialization in Intensive Care Medicine at Hospital
São João - Porto 2011-2014Currently working in Hospital Pedro Hispano - Matosinhos:
Intensive Care Medicine Department.

Humanitarian Missions as an Anesthetist/Intensivist:

- Mozambique 2009
- RD Congo 2009
- Pakistan 2011
- Afghanistan 2012
- Syria 2013

SCIENTIFIC PROGRAMME

GLOBAL MENTAL HEALTH SYMPOSIUM

What is global for medical students?

Alberto Silva

BMAG
AuditoriumThursday, 25th June 2015 | 08H00

Abstract

Medical students have a strong say on Mental Health globally. Mental Health still remains a neglected area of health worldwide. Although neuropsychiatric conditions constitute the highest cause of global disability, access to treatment is limited by the availability of services, affordability of services and treatment, and the stigma attached to mental health conditions.

Medical students worldwide support their role as international advocates for mental health. This may be through undertaking overseas electives in psychiatry, championing the mental health needs of all patients in all clinical settings and involvement with mental health charities both at home and abroad. IFMSA considers the elimination of stigma towards neuropsychiatric disorders to be everybody's business. Medical schools and student psychiatry societies must be instrumental in leading the way for their students by encouraging such activities.

CV



Alberto Abreu da Silva is a 6th year medical student in the School of Health Sciences of the University of Minho in Braga, Portugal.

Besides his studies, he has engaged on the work of student representation since his second year. After being President of his school students' union, he started working in the National Association of Medical Students in 2013. Now, he is the President of this Federation, at the same time that is the Regional Coordinator for Europe of the International Federation of Medical Students Associations.

Given this last position, he has some experience on the field of Global Health, and consequently on Global Mental Health. He is also one of the bridges between the IFMSA and the EFPT.

SCIENTIFIC PROGRAMME

PSYCHIATRY AND SOCIETY SYMPOSIUM

Temperament and creativity
Maria Luísa FigueiraBMAG
AuditoriumThursday, 25th June 2015 | 10H30

Abstract

In the present communication we explored the relationships between temperament and creativity across bipolar disorder, with the specific goal of understanding which temperamental traits are most strongly related to creativity. The bipolar-creativity association may be related to temperamental differences, such as increased cyclothymia that contributes to enhance openness to experience, increase of consciousness, intense activity, heighten of perceptive skills and sensibility. We will focus our presentation in the musical and painting creativity taking as example several artists with excessive temperamental traits and will review prospective studies of non-eminent creativity in mood disorder patients. These are limited in size, scope, and number, but include findings complementing those in eminent creators, suggesting that some facets of bipolar disorder, but not the disorder itself, may confer advantages for creativity.

CV



Maria Luisa Figueira — M.D., PhD, at the University of Lisbon.

Jubilated Professor of Psychiatry and former Head of the Department of Psychiatry at the University of Lisbon.

President of the Portuguese Society of Psychiatry and Mental Health (2013-2015).

President of the Medical Psychiatric College for 6 years.

Member of the CINP since 1978 and participates in dozens of psychopharmacological trials, some of Phase II. Invited lecturer in the main psychiatric meetings in Portugal and in European Congresses and published more than 200 papers in National and International Journals.

Early in her career she conducted experimental studies on the psychopathology of schizophrenia and anxiety disorders. In the last years her research work has been in the topics of Clinical Psychopathology and Bipolarity. Her subsequent work on temperament and clinical manifestations of Bipolar Disorder conducted since 1997 to the collaboration with Hagop Akiskal for the organization of annually Bipolar meetings in Lisbon.

President of the Local Organizing Committee of the 17th European Congress of Psychiatry (Lisbon, January 2009), of the "Ninth International Review of Bipolar Disorders (Lisbon, May 2009) and Organized in Lisbon the 12th International Conference for Philosophy & Psychiatry.

President of the World Congress of Social Psychiatry (June 2013).

Received the "European Bipolar Forum Lifetime achievement award" International Conference in Budapest, May 2010.

SCIENTIFIC PROGRAMME

PSYCHIATRY AND SOCIETY SYMPOSIUM

The sexuality in dictatorship time

António Palha

BMAG
AuditoriumThursday, 25th June 2015 | 10H30

Abstract

The author analyses aspects of legislative, social and cultural nature which characterize the fascist period in Portugal, particularly in the decades 30, 40 and 50. The total dependence of girl and woman respectively on father and husband's authority is evidenced. The virtues of that dependence, exalting the values of conservative femininity according to both catholic religious patterns and political ideals imprinted in legislation, are widely shown through texts, quotations and iconographic symbols.

CV

**António Palha**

Graduate as medical doctor at the Oporto Medical School, in 1963 and specialized in Psychiatry in 1970.

Clinical Assistant in the Psychiatry Institute of London University/Maudsley Hospital, 1972-73 and professor of Medical Psychology and Mental Health in the University of Mozambique from 1965 to 1969 and late in Oporto University Faculty of Medicine.

Director of the Department of Psychiatry and Mental Health at the University Hospital São João (1992- 2009) and full Professor of Psychiatry and Mental Health, since 1992 up to 2009.

Founder of the Portuguese Society of Sexology and is an Ex-member of the Advisory Committee of the World Association of Sexology (WAS).

Ex-President of AISM (International Academy of Medical Sexology) 2007-2009 and Ex-President of the European Federation of Sexology (EFS) (2006-2010).

Founder of the first Portuguese public outpatient service on Clinical Sexology in the University/HSJ (Oporto) in 1973/74.

President of the Portuguese Society of Psychiatric and Mental Health 2009-12 and Clinical Director of Casa de Saúde do Bom Jesus in Braga since 1992.

President of Psychiatry and Human Sexuality Section of the World Psychiatry Association (WPA). Rewarded with the title of Honorary Member of WPA in 2014.

President of Mental Health Association in Portuguese Language (ASMELP).

SCIENTIFIC PROGRAMME

PSYCHIATRY AND SOCIETY SYMPOSIUM

From ancient times to Technology
Luiz Gamito

BMAG
Auditorium

Thursday, 25th June 2015 | 10H30

Abstract The knowledge about human mind comes from Philosophy to Science through Psychiatry and Neurosciences. Last decades brought to us a marvellous new world of Technologies of Information and Communication (TIC), nowadays each more used on the diagnostic and treatment of mental diseases and disfunctions.

Virtual Reality is a good example about the possible linkage between the pathways of Technologies and Psychiatry in order to improve progress in Medicine.

The author, according his self experience, introduces some principles of cyberdiagnose and cybertherapy and discuss concepts around clinical practice.

CV



Luiz Gamito

Medical Doctor by the University of Lisbon.
Specialized in Psychiatry, Public Health and Work Medicine.
Teaching during 40 years on the fields of Human Anatomy, Psychology, Psychiatry and Psychotherapy (F.M.L., I.S.P.A., U.L.H.T.).
Former President of the Portuguese Association of Behaviour Therapy.
Former Vice-President of the Portuguese Society of Psychodrama.
Former Clinical Director and CEO of Hospital Júlio de Matos during 10 years.
Currently President of the Portuguese College of Psychiatry (O. M.)

SCIENTIFIC PROGRAMME

PSYCHIATRY AND SOCIETY SYMPOSIUM

Neuroscience based Nomenclature

Joseph Zohar

BMAG
AuditoriumThursday, 25th June 2015 | 10H30

Abstract

Current psychopharmacological nomenclature remains wedded to earlier period of scientific understanding, failing to reflect contemporary developments and knowledge, does not help clinicians to select the best medication for a given patient, and tending to confuse patients as they are being given a drug with a different name compared to their identified diagnosis (e.g. "Antipsychotic" for depression).

Four major colleges of Neuropsychopharmacology (ECNP, ACNP, Asian CNP, and CINP together with IUPHAR) proposed a new pharmacologically-driven nomenclature focusing on Pharmacological Target and Mode of Action. It includes also 4 dimensions of additional information: 1—Approved Indications; 2—Efficacy and side effects; 3 — Practical note; and 4—Neurobiology. Several surveys in four different continents were conducted in order to examine satisfaction with the current psychopharmacological nomenclature, as well as test the NbN. A significant proportion of the participants in the surveys were in favor of the proposed nomenclature.

It seems that clinicians found the available nomenclature system dissatisfactory and many times confusing for them and the patients. The proposed nomenclature seeks to up-end current usage by placing Pharmacology and Mode of Action rather than indication as the primary driven force.

In the session examples of using the NbN in key medications will be presented and discussed.

CV

**Joseph Zohar**

Professor of Psychiatry at the Sackler Faculty of Medicine, Tel Aviv University. Immediate past-President of the European College of Neuropsychopharmacology (ECNP), Chair of the Expert Platform.

Chair of the Israeli consortium on PTSD, and Chair of the Israeli Brain Council.

Board member for the International Master in Affective Neuroscience, a visiting Professor at the University of Maastrich (The Nederland's), and an immediate past-Chair of the International College of Obsessive-Compulsive Spectrum Disorders (ICOCS).

Honored with several awards, including the Fogarty International Research Fellowship Award (1984), the A.E. Bennet Award for Clinical Research (1986 and 2002), ECNP Neuroscience Award for Clinical Research (1998), and the WFSBP Award for Excellence in Education (2001).

Has authored more than 300 papers, has written or edited 16 books focusing on refractory depression, OCD post-traumatic stress disorder and Psychotropics, and was the founding associate editor of CNS Spectrums and of the World Journal of Biological Psychiatry.

World expert on OCD and posttraumatic stress disorder, and has recently received funding from the American National Institute of Mental Health (NIMH) to explore secondary prevention of PTSD.

Advisor to DSM – IV and 5 in OCD and co-chair of Sub-Workgroup preparing the research agenda on OCD for DSM-5.

International collaboration on developing new nomenclature for CNS drugs,

Chair of the Expert Platform on Mental Health focus on Depression

Director at the Chaim Sheba Medical Center, Israel.

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM

EFPT International Brain drain study
Mariana Pinto da CostaBMAG
AuditoriumThursday, 25th June 2015 | 13H45

Abstract

Introduction: Migration of mental health professionals is an important phenomenon influencing mental health services of host and donor countries. Data on medical migration in Europe is very limited, particularly in the field of young doctors and psychiatry. To research this hot topic, the European Federation of Psychiatric Trainees (EFPT) conducted the EFPT Brain Drain Survey.

Objectives: To identify the impact of previous international experiences on migration, and to understand the characteristics, patterns and reasons of migration, as well as what is an attractive job for psychiatry trainees and what needs to be improved in psychiatry.

Methods: In this cross-sectional European multicentre study, data were collected from 2281 psychiatric trainees across 33 countries. All participants answered to the EFPT Brain Drain Survey reporting their attitudes and experiences on migration.

Results: Two-thirds of the trainees had not had a short-mobility experience in their lifetime, but those that went abroad were satisfied with their experiences, reporting that these influenced their attitude towards migration positively. The majority of the trainees has considered leaving the country they currently live in. Flows showed that Switzerland and United Kingdom are within the main host countries, whereas countries as Romania highlights from the main donor countries. "Pull factors" were mostly personal reasons, whereas typically "push factors" were mainly financial reasons. Indeed, trainees that wanted to leave the country were significantly more dissatisfied with their income. There is nevertheless an atypical pattern of migration worth to be further analysed.

Discussion: The possibility to endorse this discussion in a symposium on workforce and human resources, presenting and discussing the findings from the EFPT Brain Drain study, may raise awareness on the current trends, help to elucidate the underlying issues and recommend possible systems of support.

Conclusions: Migration within psychiatry will probably to a certain extent continue, being therefore essential to enhance support to those who migrate, and actually influence the mental health care provided internationally.

CV



Mariana Pinto da Costa is a Portuguese medical doctor, having her degree in Medicine completed in the Instituto de Ciências Biomédicas Abel Salazar (ICBAS) at the University of Porto, Portugal, where she has done a Master in Medicine with the thesis: Burnout in medical doctors.

During her medical studies she had clinical and academical experience abroad in the Facoltà di Medicina e Chirurgia, Università degli Studi di Siena, Italy and at the English Division of the Second Faculty of Medicine, Warszawski Uniwersytet Medyczny, Poland.

She is completing her Psychiatry training at Hospital de Magalhães Lemos in Porto. She did an external rotation at the Assertive Outreach Community Treatment Program for Homeless with Severe Mental Illness in Madrid, together with the Hospital Clinico San Carlos and Hospital La Paz in Spain.

And, in a Low and Middle Income Country setting, she had academical, clinical and research experience at the Psychiatry Hospital in Luanda, Angola, developing within this city a research project on alcohol consumption and substance abuse. She accomplished the Cognitive-Behaviour Therapy Post Graduation at the Advanced Institute of Health Sciences at Porto and is completing the International Master on Mental Health Policy and Services at the New University of Lisbon supported by World Health Organization.

She has been involved in different international collaborative efforts, being part of the Early Career Psychiatrists Committee (ECPC) of the European Psychiatric Association (EPA), collaborative member of the Gulbenkian Global Mental Health Platform and Trainer of the Portuguese Association of Medical Students (ANEM/PorMSIC) and IFMSA (International Federation of Medical Students Association). Now, she is the President of the European Federation of Psychiatry Trainees (EFPT).

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM

*Views from donor countries***Ana Giurgiuca**BMAG
AuditoriumThursday, 25th June 2015 | 13H45

Abstract

Introduction: Migration of highly skilled professionals to a better working and living environment is widely referred to as 'brain drain'. This phenomenon is currently influencing the mental health care professionals living in Europe by leading them to relocate towards higher income countries within the EU. This work force migration highly influences the mental health services of donor countries.

Objectives: To identify migration attitudes and their underlying reasons among psychiatric trainees living in the donor countries in Europe, as identified in the Brain Drain research study, led by European Federation of Psychiatric Trainees in Albania, Bulgaria, Cyprus, Ireland, Latvia, Romania and Ukraine.

Method: This presentation will focus on the Brain Drain results from the donor countries.

Results: Past mobility experiences of psychiatry trainees seem to influence their attitude in favor of migration and increase the chances to leave their country of origin in the future. The most significant push factor is the financial one, whilst personal reasons seem to influence most trainees towards remaining in their country of origin. Trainees that express their intention to leave are significantly less satisfied with their income. Specific characteristics, patterns and reasons for migration of psychiatric trainees will be compared between the 7 donor countries.

Conclusions: Psychiatry trainees from donor countries display a positive attitude towards migration and similar patterns can be identified regarding their motives. However, some reasons seem country specific and heterogeneity occurs regarding the push and pull factors for migration.

CV

**Ana Giurgiuca**

Graduated in 2009 from The 'Carol Davila' University of Medicine and Pharmacy in Bucharest, Romania, finalizing her dissertation thesis regarding adverse side effects of atypical antipsychotics in patients suffering from schizophrenia.

From the first year of psychiatry training, completed in "Prof. Dr. Alex. Obregia" University Hospital in Bucharest, she joined the national and European Associations of Psychiatric Trainees, collaborated with mental health organizations and took part in multiple national and European research projects. In 2011 she received a PhD fellowship, focusing on assessing the suicide risk in bipolar disorder and in 2012 she started holding seminars as an Assistant Professor in the Psychiatry Department, at the 'Carol Davila' University of Medicine and Pharmacy in Bucharest.

Currently she is the president of the Romanian Association of Psychiatric Trainees, representing them as a board member in The National Psychiatric Association and as an official delegate to the European Forum of Psychiatry Trainees (EFPT).

She has been chairing the EFPT Research working group since 2013, supporting and coordinating multiple European research projects, such as 'Brain Drain' and 'TEO-PC'.

Since 2015 she completed her training and works as a young career psychiatrist at The "Prof. Dr. Alex. Obregia" University Hospital in Bucharest, while continuing her efforts to improve psychiatric education.

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM

Views from host countries

Kevin Holmes

BMAG
AuditoriumThursday, 25th June 2015 | 13H45

Abstract

The EFPT Brain Drain Project involved surveying psychiatry trainees within x countries across Europe to understand the attitudes to and experience of migration. Following analysis of the results it became clear that some countries appeared to be net donors whereas a few appeared as net hosts for psychiatry trainees. Our results showed that Sweden, Switzerland and the UK were all significant net hosts.

One of the main contributors as a 'pull' factor, assessed through the Brain Drain results, was unsurprisingly salary. It is notable that all three host countries were within the top two highest wage brackets within our survey. The percentage of immigrants varies from 28% in the UK to 70% in Switzerland.

Presented are the individual host country results, looking at common themes that appear to attract trainees to migrate to these countries. In addition, the attitudes and experiences of individual trainees are discussed to try to draw some conclusions from our survey sample. These results are then considered within the overall political and financial landscape to make some concluding remarks.

CV



Kevin Holmes

Initially graduating with a degree in Aeronautical Engineering, I took a rather circuitous route working in Business and Finance, then gaining a Masters degree in Biomedical Engineering and finally studying Graduate Entry Medicine at Nottingham University. I moved to Bristol to start my general medical and surgical training and after a short foray into the world of General Practice I settled on Psychiatry as my chosen specialism.

Over the next three years I have worked in both inpatient and outpatient units, specialist units including Learning Disability, Psychotherapy and Crisis Team and am currently working for a specialist Early Intervention for Psychosis Service. I also enjoy working with medical students, having been a tutor on the 1st year medical student Whole Person Care module for the past four years and a 3rd year medical student Balint Group facilitator for the last year.

I have been involved with the European Federation of Psychiatry Trainees (EFPT) for the past two years, working on two major research projects, one of which is the Brain Drain project. I am also the local coordinator for the EFPT Exchange programme in Bristol, which I set-up and also have been the EFPT Newsletter Editor for the past year.

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM

Health workers for all
Giulia de PonteBMAG
AuditoriumThursday, 25th June 2015 | 13H45

Abstract

Mobility of is a right of every individual: like other professionals, health workers have the right to choose the place where they wish to live and work. In a public health perspective, however, health systems have also the duty to ensure that mobility of professionals does not translate into brain drain, and into inequality of access of citizens to health services. Which are the policies put in place at European and global level to ensure that both the right to mobility and the right to health are protected? The impact of austerity measures on mobility of health workers across Europe will be taken into account; cases of specific countries will be briefly presented; actions at European and local level will be illustrated.

CV

**Giulia de Ponte**

Giulia De Ponte is Advocacy Coordinator at African Medical and Research Foundation (AMREF Italy): her advocacy activities at Amref are focussed on strenghtening health systems both in Africa and in Europe, and on the international migration of human resources for health.

She previously worked as a Researcher at Amnesty International headquarters in London.

She holds a Master in "Development Studies" from Ecole des Hautes Etudes en Sciences Sociales (EHESS), Paris. She is presently completing a Master in Public Health at Manchester University.

She is the author of many articles and scientific publications in the field of public health and international development.

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM***Joint Action on Health Workforce Planning and Forecasting***
Kovacs EszterBMAG
AuditoriumThursday, 25th June 2015 | 13H45**Abstract**

Health workforce mobility is a crucial factor when considering long-term strategic health workforce monitoring, planning and forecasting activities. The increased movements of health professionals have been investigated in the last few decades, when the EU enlargement and the economic crisis as significant macro-factors fostered the migration and altered some trends.

Data collection and analyses were performed in the Joint Action on European Health Workforce Planning and Forecasting (JA EUHWF 20122201) project. Quantitative and qualitative methods were employed to map available mobility data in EU Member States, and to reveal the different ways how mobility is considered in health workforce planning.

The findings showed that the availability of mobility data is highly fragmented. Even the most advanced health workforce planning systems frequently experience the lack of reliable and valid quantitative data for mobility. Different mobility indicators, mostly proxy indicators or estimates are in use, thus the precise numbers are still vague. The minimum planning data requirements for health workforce planning should contain health professionals' in- and outflows, based on a standardized formula. Qualitative data collections might support to overcome the gaps and to complete quantitative information.

Several initiatives attempt to track mobility of health professionals, however an integrated approach is needed within Europe, international data collections - such as WHO, OECD, Eurostat - should focus more significantly on mobility data. Collecting data on licensed and practicing foreign health professionals and a strengthened, more automatic information exchange between Member States would facilitate having a deeper understanding and a more exact overview of the situation. Since some popular destination countries highly rely on foreign human resources in their domestic labor force, doubtlessly necessary to calculate their volume for the future. On the other hand, countries with significant shortages also need to gain clarity of the current and future trends in order to ensure the sustainability of their health systems. Not only the numbers, but also the skills - and skill-mix - of the future health workforce should be taken into account in planning, so mutual recognitions and equivalences in trainings, or continuous professional development might be monitored among the activities.

CV**Eszter Kovács**

Works as an assistant professor at the Health Services Management Training Centre, Semmelweis University, in Budapest, Hungary. She has participated in several international research projects, e.g., Health Prometheus and European Cross-border Care Collaboration. Nowadays she works in the Joint Action for Health Workforce Planning in the EU project, where she focuses on terminology debates and data source gaps, on HRH data, mobility and health workforce planning. Her areas of expertise are human resources and related health policy issues, namely, workforce planning, health professionals' mobility, cross-border health care, patients' rights and health/medical tourism.

SCIENTIFIC PROGRAMME

WORKFORCE AND HUMAN RESOURCES SYMPOSIUM

Health planning in Portugal
Filomena Parra da SilvaBMAG
AuditoriumThursday, 25th June 2015 | 13H45

Abstract

The Joint Action on Health Workforce Planning and Forecasting is working towards:

- (1) better understanding of terminology
- (2) better monitoring of the HWF by access to timely data
- (3) updated information on mobility and migration trends in the EU
- (4) guidelines on quantitative and qualitative HWF planning methodology
- (5) increased quantitative and qualitative planning capacity
- (6) estimation of future skills and competencies needed in the health workforce
- (7) a platform of cooperation to find possible solutions on the expected shortage of HWF
- (8) a higher impact of HWF planning and forecasts on policy decision making

Portugal, with this project, aims to:

- improve the planning of medical specialists;
- improve planning of HWF in less attractive and more needed areas;
- improve the methodology for identifying the needs of health professionals.

Portugal has already a database characterizing the existing stock of health professionals in the NHS. We are trying to complete the database with information from the private sector (a specific law has already been approved in general, in the Parliament, and is now being in specialty analysis).

For doctors and nurses we are trying to:

- anticipate imbalances (supply vs demand) for medium and long term;
- improve the knowledge on mobility of professionals within the EU;
- build tools that allow managing and adjusting the training capacity.

For dentists and pharmacists the scope of the pilot project considers measuring the current stock.

This project considers the stakeholders within the Ministry of Health and the external ones, like others ministries, universities and professional associations.

About the involvement of stakeholders, we've had a first meeting, beginning 2014, and are planning a new one, next month. This aims at involving them in the planning process consistent with our own characteristics.

And then, at the end of the pilot project (March 2016) we to measure the improvements in the period of the project.

The Pilot Study is working on a fixed term project to support national authorities in the implementation of models, procedures and tools, following the handbook produced in the framework of the Joint Action on Health Workforce Planning and Forecasting.

CV

Filomena Parra da Silva

Working in the public health sector in Portugal since 1977. In the Department of Health Planning since 1984, and up to 2005, coordinating the National Health Investment Plan, together with the intervention of EFRD. Member of the executive Board of the General Directorate of Health (management area and support to the portuguese presidency of the EU, 2nd semester of 2007 – health sector). Sept 2005 to Jan 2008. Head of staff of the Cabinet of the Health Minister, Feb 2008 to October 2009. Member of the executive board of the National Institute of Health, Feb 2010 – March 2012. Director of Human Resources Department within the Central Administration of the Health System, from May 2012 up to now. (Department responsible for careers, training and planning of health professionals). And also for the allocation of the ESF health measures (appliances and follow up).

Education/Qualification:
Graduate in Social and Political Sciences
Master in Regional Economy

SCIENTIFIC PROGRAMME

COOPERATION IN PSYCHIATRY SYMPOSIUM

European early career psychiatrists
Olivier AndlauerBMAG
AuditoriumThursday, 25th June 2015 | 17H00

Abstract

The European Psychiatric Association has had a dedicated Early Career Psychiatrists Committee for more than 5 years. Its aim is to involve Early Career Psychiatrists (ECP) in the association, and develop training activities. Its four task forces focus on research, publications, associations and professional development. The dedicated scientific programme during the EPA Congress gathers ECPs from all around the world, and provides scholarship, travel grants, and social activities during the Congress and throughout the year. It contributes in creating an identity to European Psychiatry.

CV



Olivier Andlauer is a Consultant Psychiatrist working in East London. He graduated from Strasbourg Medical School (France) in 2004, and worked as a visiting research scholar at Stanford University (USA), in 2011. He is the Chair of the Early Career Psychiatrists Committee of the European Psychiatric Association (EPA). He is also a member of the Board, Committee on Education, and Scientific Programme Committee of EPA, and a member of the International Advisory Committee of the Royal College of Psychiatrists (UK). He is interested in psychiatric training, integrated care, mood and sleep disorders.

SCIENTIFIC PROGRAMME

COOPERATION IN PSYCHIATRY SYMPOSIUM

Young Psychiatrists' Network

Raphael Psaras

BMAG
Auditorium

Thursday, 25th June 2015 | 17H00

Abstract

The Young Psychiatrists' Network (YPN) - www.ypsnet.org - is a rapidly growing network of Early Career Psychiatrists and Psychiatric trainees. Its aims include, global development of psychiatry through close collaboration of Young psychiatrists worldwide, expanding knowledge and sharing experiences, and facilitating the evolution of YPs from different parts of the world and improvement of their knowledge, skills and abilities.

The Young Psychiatrists' Network was born in 2009 as "Young Psychiatrists Eastern Europe" due to an initiative from the – no longer active - Swedish Eastern Europe Committee, and the 1st international meeting was organized in Vilnius, Lithuania in 2010. But the Network evolved, involving psychiatrists from more and more countries, and organizing three more very successful conferences, in Riga, Minsk, and Wroclav.

Other projects of the YPN include Scientific collaboration, Research collaboration, and Regional meetings.

The 5th Young Psychiatrists' Network Meeting will take place between 30 September to 3 October 2015, in Porto Heli, Greece. The annual YPN Meeting always combines the exceptionally interesting scientific program with the rich daily social program and the rare opportunity of creating friendships with Young psychiatrists from more than 30 countries.

CV**Raphael Psaras****Titles**

- President of the Early Career Psychiatrists' section of the Hellenic Psychiatric Association.
- Past President of the Hellenic Association of Psychiatric Trainees
- Chair of the 5th YPN Meeting Organizing Committee

Clinical – Professional Experience

- July 2010 – Today: Psychiatrist Director, "Rafail Psaras Private Practice"
- October 2010 – January 2014: Psychiatrist, Alzheimer Center, Athens
- September 2009 – September 2011: Psychiatrist, Kallithea Municipal Clinic
- August 2006 – June 2010: Trainee Psychiatrist, Psychiatric Hospital of Attica
- January 2005 – January 2006: Trainee Neurologist, 417 N.I.M.T.S.
- January 2004 – April 2004: Trainee Internist, Psychiatric Hospital of Attica
- July 2002 – November 2003: Medical Doctor, PGN Rhodos, PI Kasos
- November 2000 – May 2002: Medical Doctor in Army, Arta, Chios, Veroia, Korinthos.

Organizational Experience

- President of the 22nd, 23rd, 24th Hellenic Association of Psychiatric Trainees Conference
- President of the 1st International Conference of the Hellenic Association of Psychiatric Trainees.
- President of the 1st Meeting of Early Career Psychiatrists' section of HPA.
- Special Secretary - Member of the Organizing Committee of the 20th, 21st, 22nd, 23rd National Psychiatric Conference.

SCIENTIFIC PROGRAMME

PROVIDING HEALTH CARE SYMPOSIUM

What patients want from Psychiatrists?

Pedro Montellano

BMAG
AuditoriumFriday, 26th June 2015 | 08H00

Abstract

Scientific knowledge has its own pace. It doesn't happen when the scientists want and, in many occasions, when mankind most needs. The advances on mental health science that had a significant translation on patient's care have been very rare in the last decades. It cannot be said that an innovative treatment or a new therapeutic approach has seen the light of the day. Some improvements have occurred in some psychiatric medicines but they still present several side effects that are responsible for dysfunction and are an obstacle to the patient's integration in the community.

Considering the document with the conclusions of the meeting of the EU Ministers of Health, in 2005, Helsinki, has Psychiatry, as a science and a treatment discipline, been able to provide to patients treatment outcomes that allow them to pursue the vision expressed in the document, namely in what concerns the full integration in the society of people with mental health problems?

Were the Psychiatrists in this past ten years opened to accept the changes of its papers and to promote the changes needed in the health care systems? What was the context for the Psychiatrists during this period?

Considering that the complexity of the brain makes the improvements in Psychiatry science even more difficult than for the majority of sciences, the apparent disinterest of the pharmaceutical industry to develop new medicines for CNS and the limitations of health care systems, what can psychiatrists and patient do overtake this difficult situation?

CV

**Pedro Montellano**

Diagnosed with bipolar disorder at 23. Graduated as Agronomic Engineer from the Lisbon Institute of Agronomics (ISA), did postgraduate studies at the Institute of Economics and Management (ISEG), receiving a Master's degree in Real Estate Management and Valuation. He worked professionally in the areas of Consultancy, Insurances, Banking and Real Estate. In the present he is working in a project on Mental Health and Workplaces As a volunteer, Mr. Montellano has been working in several NGO's on the field of Mental Health, both in Portugal, his home country, and at European level. He was Board member of the Portuguese Association for the Depressive and Bipolar patients support (ADEB). In the present he is the Vice-President of EUTIMIA-European Alliance Against Depression-Portugal, President of the Global Alliance of Mental Illness Advocacy Networks-Europe (GAMIAN-Europe), Vice-President of the European Brain Council (EBC), Board member of the European Patient's Forum (EPF), member of the Advisory Board of the EU Joint Action on Mental Health and Wellbeing, member of the EC Group of Governmental Experts on Mental Health and Wellbeing, Board member of the Expert Platform focused on Depression and Member of the Advisory Board of the International Bipolar Foundation (USA). It was Board member of the European Platform for Patients, Science and Industry (EPPOSI). Mr Montellano has the International Rugby Board (IRB) level 2 coach certificate and has been a children's rugby coach for many years.

SCIENTIFIC PROGRAMME

PROVIDING HEALTH CARE SYMPOSIUM

Is it a burden for families?

Filipa Palha

BMAG
AuditoriumFriday, 26th June 2015 | 08H00

Abstract

This presentation has two main objectives: 1) to introduce the European Federation of Families of People with Mental Illness (EUFAMI), a European non-profit organisation that primarily advocates on behalf of families and family carers. Founded in 1992 after a meeting where members from all over Europe "shared their experiences of helplessness and frustration when living with someone with severe mental illness"; 2) to present preliminary results of an international survey carried out in 2014 and 2015 in more than 20 countries to get a clearer picture of the experiences, well-being and needs of family caregivers for persons with a severe mental illness. This study focuses on family caregivers of people with schizophrenia in different Western countries. 431 family caregivers filled in a questionnaire about experiences, well-being, and needs, and data from 7 countries (Australia, Canada, France, Germany, Italy, Spain and United Kingdom) will be discussed.

CV



Filipa Palha

Clinical Psychologist, lecturer at the Faculty of Education and Psychology, Catholic University of Portugal, and member of its Centre for studies in Human Development; President Founder of ENCONTRAR+SE – Association for the promotion of mental health, a not-for-profit NGO; coordinator of the Centre for Integrated Care of ENCONTRAR+SE, a community-based facility that provides comprehensive recovery programs for people affected directly and indirectly by mental-health problems; coordinator of academic research projects on mental health issues (eg. study of the deinstitutionalization process in Portugal); Coordinator of the first National anti-stigma campaign in Portugal, "A song for mental health" (UPA08).

Coordinator of the translation to Portuguese of several books in the mental health field (eg. Medalia, A. & Revheim, N. (2002). Dealing with Cognitive Dysfunction Associated with psychiatric disabilities. A handbook for families and friends of individuals with psychiatric disorders; Pfammatter, M., Andres, K. & Brenner, H. D. (2010). Therapiemanual. Psychoedukation und Krankheitsbewältigung (Manual of Psychoeducation in Schizophrenia; Slade, M, (2012). 100 ways to support recovery. A guide for mental health professionals; Carter, R. (2014). Within our reach. Endind the mental health crisis).

SCIENTIFIC PROGRAMME

PROVIDING HEALTH CARE SYMPOSIUM

How is mental health in international missions?

Maria Palha

BMAG
AuditoriumFriday, 26th June 2015 | 08H00

Abstract

Many times when we talk about mental health our mind wrongly traps us with examples like “the angry neighbor that shouts to her kids”, “that friend who has awkward behavior or committed suicide”, “The crazy ex boy Friend who was paranoid” or “the main Psychiatric ward”.

In fact all this assumptions are included in the vast area of mental suffering and not mental health.

If we stick to the concept of mental health we access a world of harmony and well being that all of us desire to achieve.

Nowadays science and information are available about physical and mental health, but it seems we have a favoritism for our Physical health and a prejudice when it comes to Mental health. Why?

We know that a sedentary life has impact in the quality of our sleep; we know that the excess of sugar in a daily basis is not good and we also know that cholesterol can damage our health. Living in an ongoing stressful context can affect our well being; A diet with vitamins deficiency can influence our memory, concentration and the way we perceive others and the world that surrounds us.

For this reasons i believe it's urgent to integrate Mental and Physical health without favoritism. If we are aware of its advantage I think we shouldn't do differently and especially because we have a holistic and integrated condition as human being.

Once we are conscience about ourselves and the impact that reality has in us, we can became experts in adjusting and surviving to all contexts where we live. By developing and getting self knowledge about the way the reality impacts us we will also be able to monitor and regulate our emotions adjusting our answers to reality and others.

When it comes to crisis situations, like humanitarian crisis, wars, natural disasters or even a big change of life, once we know what can happen to our mental and physical health, we will be able to identify our general needs and we will also be able to react and reduce the impact of this unexpected situations, that requires a fast and adapted response.

This is the main benefit of a mental health Intervention when it comes to a crisis situation. Mental health will not only prevent mental suffering and mental chronicle conditions, like depressions, generalized anxiety, esquisofrenia or psychosis, but wil also support the medical programme when it comes to community approach and understanding.

Generally during crisis situations people get scared about the symptoms they began to express, like insomnias, angriness, emotions instability, confusion or hair loss. They also get more suspicious about each others and specially about foreing support. Many times people begging to think that they are getting crazy, tend to get more angry and isolate themselves, facts that will increase what is a normal stress reaction into a severe condition or a chronicle condition (like Post traumatic stress disorder for example).

As soon as the population get the information about what services are available to support them as well what can be a normal stress reaction, will also understand what is going on with them and begin to learn how to take care of them selfs, understanding what can be health and unhealthy ways of coping.

Studies show that as soon as the population has information about their normal stress reactions they are resilient to recover by themselves in 80%, only 20% will need individual support. This will also prevent the medical services obstruction and contribute to a traumatic social recovery.

Form this 20% only around 1% will require a long term intervention, due to development of Pathologies.

I must admit that I became excited with this studies, because is very good news when it comes to generational trauma in countries in war. With Efficient Mental health intervention we can interrupt the traumatic transgenerational cycle.

CV



Maria Palha

Clinical Psychology with Social entrepreneurship and Art Therapy expertise.

Since 2006 she has been working with Doctors without Borders defining and implementing Mental Health programmes in Humanitarian crisis situation. She worked with HIV- Aids in Mozambique and Zimbabwe, Wars like: Libya (2011), Syria (2013), Ukraine (2014); Refugees: South Sudan genocide (2014); Post conflict: India (Kashmir, 2012); Natural disasters: earthquake in turkey, floods in Brazil.

At the moment she is based in Lisbon in order to publish her book about “Emotional First Aid Kit” as well as working as a social entrepreneur Consultant and providing Mental Health support to Portuguese Population. Once a year she leaves in an emergency mission with Doctors without Borders, and this year Pakistan is the final destination.

SCIENTIFIC PROGRAMME

MEDICAL WRITING AND PUBLISHING SYMPOSIUM

The Lancet Psychiatry
Hanna Cagney

BMAG
Auditorium

Friday, 26th June 2015 | 10H30

Abstract

Why publish, where to publish, and what to publish? The presentation will introduce *The Lancet Psychiatry*, and address manuscript submission (including journal submission requirements), the peer review process, and what happens to manuscripts after acceptance. I will also look at what tools and resources are available for junior researchers and authors, and discuss the role of international reporting guidelines for research and research ethics.

CV



Hannah Cagney

Current position: Senior Editor for *The Lancet Psychiatry*, a peer-reviewed medical journal that publishes fast-track research, news, and views related to psychiatry and mental health. She has worked at The Lancet group of journals since 2012

Editorial Board Member of European Science Editing; Meeting Reports section editor

Education: BA (hons) in Medicinal Chemistry; Trinity College Dublin, Ireland; 2008–2012

SCIENTIFIC PROGRAMME

MEDICAL WRITING AND PUBLISHING SYMPOSIUM

Acta Médica Portuguesa
Rui Tato MarinhoBMAG
AuditoriumFriday, 26th June 2015 | 10H30

Abstract

Medical editing and publishing is a key issue in medical activity. Is very important for the medical CV as well for the development of medical science. Is part of our preparation and task in order to give better care to our patients.

To publish in a medical journal with good impact factor should be one of our most important goals to have in mind. Is good for us, for our Department, for our Hospital, University, Institute, country.... And for our patients and the modern society.

So, it is very useful to know "How to Do". Publish or Perish. Teaching of all the mechanisms to write, publish, review, etc must begin in early years of medical course. Is a difficult task with a lot of defeats. We must be prepared to be resilient. Never, never, never, never give up.

In this presentation we present *Acta Médica Portuguesa* as a case study of a modern medical journal. *Acta Médica Portuguesa* is in the section of Internal Medicine and General in the position 132 in 150, of Web of Science. It is receiving around 1000 papers each year. We explain the flux of a paper, the process of review, how to use graphics and figures, how to convince the editor-in-chief, how to use facebook, twitter, www.

Becoming an editor-in-chief is a specialized task, time consuming and certain times like a referee in soccer: we need them but we hate them all.

"Writing is thinking. To write well is to think clearly. That's why it's so hard". David McCullough (1933-).

"A great university has a dual function, to teach and to think". Sir William Osler (1849-1919). "Avoid writing too much or too little". Sir William Osler.

"Revision is hard". Sir William Osler.

"There is no job description for the Editor". Richard Smith (Editor-in-Chief of British Medical Journal de 1979-2004).

CV

**Rui Tato Marinho, MD, PhD**

Gastroenterology, Hepatology, Hospital S. Maria, Medical School Lisbon, Portugal

Elected Member of General Assembly of United European Gastroenterology (2014-2017)

Vice-President of Portuguese Society of Gastroenterology

Member of Pedagogic Committee of Medical School of Lisbon

Member of Scientific Commission of Masters in Palliative Care of Medical School of Lisbon

Editor-in-Chief of *Acta Médica Portuguesa*, Scientific Journal of Portuguese Medical Association (2011-2016)Adviser of Viral Hepatitis Prevention Board - www.vhpb.org

Fellowship of European Board of Gastroenterology

Coordinator of Consultative Panel for Hepatitis C Treatment for INFARMED (National Authority of Medicines and Health Products), May 2014 – January 2015 (Ministry of Health).

President of College of Hepatology for the Portuguese Medical Association, 2012-2015.

Portuguese Society of Gastroenterology: General-Secretary: 2005–2007. Member of the Board since 2001.

Portuguese Association for Study of Liver: President 2007–2009, General-Secretary 1993-1997.

International Publications:

New England Journal Medicine, American Journal Medicine, Journal Gastrointestinal Liver Dis, Journal Clinical Virology, European Journal of Gastroenterology Hepatology, Hepatogastroenterology, Journal Clin Gastroenterol, Digestive Diseases Sciences, Journal Viral Hepatitis, Liver International, World Journal Gastroenterology, J Gastroenterol Hepatol, *Acta Médica Portuguesa*, Med Phys, BMJ Case Reports, Annals of Oncology, Endoscopy. Letters, images: Gastroenterology, Hepatology, Liver Transplantation, Journal of Hepatology.

SCIENTIFIC PROGRAMME

MEDICAL WRITING AND PUBLISHING SYMPOSIUM

International Journal of Clinical Neurosciences and Mental Health
João MassanoBMAG
AuditoriumFriday, 26th June 2015 | 10H30

Abstract

Scientific writing and publishing is important at all stages of medical education, postgraduate training, and also throughout the professional career. Publications may be the product of original research or the critical evaluation of routine clinical activity, and any of these contribute to the improvement of critical thinking, scientific knowledge and, ultimately, clinical skills. Publications are also important indicators of academic and scientific achievement, which contribute decisively to secure grants and to career progression.

Learning how to design, write and review a paper should be formally taught in medical schools, thus providing young medical students and doctors with the right tools to critically appraise and successfully write a scientific paper. The talk will approach the fundamental aspects of scientific writing and publishing, including basic authorship rules, and the trajectory of a paper submitted to a scientific journal. The audience will also be given a few tips and tricks for manuscript improvement, in order to increase the quality of papers and the chance of publication.

Acknowledgments: talk given on behalf of the Editor-in-chief of the International Journal of Clinical Neurosciences and Mental Health

CV

**João Massano**

MD, Faculty of Medicine University of Coimbra (2004).

Training in Neurology, Centro Hospitalar São João (CHSJ), Porto, Portugal (2006-2011).

Movement Disorders fellowship, Sobell Department of Motor Neuroscience and Movement Disorders, UCL Institute of Neurology, London, UK (2010).

Consultant Neurologist, CHSJ (2011-2013), and at Hospital Pedro Hispano/ULS Matosinhos, Portugal (since 2013).

Researcher at the Department of Clinical Neurosciences and Mental Health, Faculty of Medicine University of Porto.

Expertise in dementia, movement disorders, deep brain stimulation. Special interest in neurogenetics, functional (psychogenic) disorders.

Co-author of several indexed papers and chapters in Portuguese and international books.

Guest Associate Editor, *Frontiers in Neurology* (2011-2012).

Associate Editor, *Acta Médica Portuguesa* (since 2012)

Theme Editor (Neurology), *Porto Biomedical Journal* (since 2015).

Editorial Board member, *Oruen – the CNS Journal* (since 2015).

Served as reviewer for several journals including *Neurology*; *Journal of Neurology*, *Neurosurgery*, and *Psychiatry*; *Biological Psychiatry*; *Journal of Alzheimer's Disease*; *Movement Disorders*; *PLoS One*.

Collaboration with the WHO (through the European Neurological Society), reviewing the ICD-11 draft, neurological disorders chapter.

Member of the Scientific Subspecialty Panels Higher Cortical Functions and Movement Disorders, European Academy of Neurology.

Member of the Behavioral Neurology and Movement Disorders Sections, American Academy of Neurology.

Vice-President, Portuguese Movement Disorders Society.

Board Secretary, Portuguese Study Group for Brain Aging and Dementia.

SCIENTIFIC PROGRAMME

SOCIAL BREAKTHROUGHS SYMPOSIUM

The future of Social Psychiatry
Stefan PriebeBMAG
AuditoriumFriday, 26th June 2015 | 13H45

Abstract

It has been suggested that psychiatry as an academic and medical discipline is in crisis. In many countries, it is difficult to recruit young psychiatrists, and the profession struggles to show what specific skills they have. For more than 30 years, there has been hardly any progress in developing more effective treatment methods. Subsequently there is a debate about the future of psychiatry with suggestions to focus on neuro-sciences.

The presentation will argue that it is essential for psychiatry to embrace social psychiatry as central to its thinking and practice. This involves social values, social approaches to care, and a social perspective in research.

Concepts of social psychiatry are not new. Yet, the future cannot be a mere reference to successful periods in the past. So, how can we build on what has been achieved and advance the field? What may be the new ideas and the new approaches?

The presentation will argue that future social psychiatry may be guided by three general principles: 1) that mental distress is understood as a phenomenon on a continuum of potential behaviours in a given social context (rather than a dichotomous bio-medical illness); 2) that changes to the social context, e.g. in families and communities, influence experience and behaviour; and 3) that personal and community resources are primarily available in social relationships.

Pursuing these ideas may require a radically different description of mental distress and a new terminology. Risks and benefits will be outlined, and potential research approaches briefly discussed.

CV



Stefan Priebe graduated in Psychology and Medicine, and qualified as Neurologist, Psychiatrist and Psychotherapist in Germany. He was Head of the Department of Social Psychiatry at the Free University Berlin, before in 1997 he took up his current post as Professor for Social and Community Psychiatry at Barts and The London School of Medicine and Dentistry (Queen Mary, University of London). He is an honorary consultant psychiatrist and Director for Research with the East London NHS Foundation Trust and holds visiting professorships in other European countries.

He has built up the Unit for Social and Community Psychiatry which is located in the East London Borough of Newham. In 2012, the Unit became a designated WHO Collaborating Centre for Mental Health Services Development of which he is the Director. In various roles in the United Kingdom and abroad, he has been involved in both developing services and steering research activities in psychiatry. His research focuses on understanding helpful relationships, developing novel therapeutic approaches and evaluating complex interventions in mental health care.

SCIENTIFIC PROGRAMME

SOCIAL BREAKTHROUGHS SYMPOSIUM

Integration of mental health into primary care

Tiago Vieira Pinto

BMAG
AuditoriumFriday, 26th June 2015 | 13H45

Abstract

As we all know, mental disorders affect hundreds of millions of people and, if left untreated, create an enormous toll of suffering, disability and economic loss. Despite the potential to successfully treat mental disorders, only a small minority of those in need receive even the most basic treatment. Mental health is central to the values and principles of the Alma Ata Declaration. So, it appears to be logical that integrating mental health services into primary care seems the most viable way of closing the treatment gap and ensuring that people get the mental health care they need. But how to do this? For sure it is essential that primary care workers are adequately prepared and supported in their mental health work. In fact, certain skills and competencies are required to effectively assess, diagnose, treat, support and refer people with mental disorders. For this purpose, we need education and training on mental health care for all students and health professionals training to work in family health and other areas of community oriented primary care. From an European point of view, there is no single best practice model that can be followed by all countries. Rather, successes have been achieved through sensible local application of broad principles. Again, how? Well, it is a fact that integration is most successful when mental health is incorporated into health policy and legislative frameworks and supported by senior leadership, adequate resources, and ongoing governance. Numerous low- and middle-income countries are successfully making the transition to integrated primary care for mental health, such as United Kingdom, Netherlands, Sweden, France, Ireland, Estonia and Portugal. Others, like Italy, Belgium, Poland, Romania and Spain are still making their development mainly on secondary mental health care institutions. In this presentation we will do both the update and the broad perspective of the current situation of the integration of mental health into primary care in the different countries across Europe, with a deeper explanation of the state of the art in Portugal.

CV

**Tiago Vieira Pinto**

Nursing Licensed at Escola Superior de Enfermagem S. João (Porto).

Registered Nurse at Unidade de Saúde Familiar Serpa Pinto/ Serpa Pinto Family Health Unit.

Post-Graduate Course in Health Education, Clinical Communication Skills at Faculdade de Medicina da Universidade do Porto (FMUP)

Master in Health Education (FMUP)

Invited professor at Escola Superior de Enfermagem do Porto (ESEP)

Was clinical supervisor of nursing students in ERASMUS programme (Family Health Internship).

Colaborator, member of several boards and coordinator of several projects at Associação Nacional das Unidades de Saúde Familiar/Family Health Units - National Association (USF-AN)

Funded and coordinated the Departamento de Investigação e Conhecimento (USF-AN).

Funded and actually coordinate the project "Health Functional Units Sentinel Network" (USF-AN)

Was keynote speaker in the field of sentinel networks in primary care settings at national and international seminars and conferences.

Was editorial coordinator of the journal "Evolução" (USF-AN).

Member of several working groups in Primary Health Care (Ministry of Health, Portugal).

Member of the Advisory Board of the European Forum for Primary Care (EFPC).

Member of the Alliance for Community Oriented Primary Care (EFPC).

SCIENTIFIC PROGRAMME

SOCIAL BREAKTHROUGHS SYMPOSIUM

Community intervention on first psychotic episodes

Teresa Maia

BMAG
AuditoriumFriday, 26th June 2015 | 13H45

Abstract

The author will describe an Early Intervention Program in Psychosis (PSIC) community based and integrated in a general adult psychiatry service. Early Intervention in Psychosis Programs (EIP) seek to help people who are in the early stages of their psychotic illness, through the prompt provision of comprehensive phase-specific interventions, with focus on recovery, in order to improve outcome.

This program has been developed since 2001. The main goals of the Programme are:

- Early diagnosis and treatment of Ultra High risk and first psychotic episode patients;
- Treatment of primary symptoms and reduction of secondary comorbidity
- Decrease of the frequency and severity of relapses
- Decrease in the number of drop-outs
- Decrease of family burden
- Promotion of psychosocial integration and development

The PSIC's protocol include:

- Psychopharmacological treatment
- A psychiatric consultation within 2 weeks after referral
- Family Intervention
- Cognitive evaluation (ACECF) on admission
- Cognitive remediation
 - Cognitive Remediation Treatment (paper and pencil cognitive exercises)
 - ReHACOM (computer based cognitive exercises)
- Psychomotor Therapy
- Occupational Therapy
- Social Cognition training using SCIT
- Socio-professional rehabilitation

CV



Teresa Maia

- Psychiatrist,
- Head of the Psychiatric Department of Fernando Fonseca Hospital since January 2013;
- PHD in Mental Health Promotion in October 2014 with the thesis "Mother baby relationship determinants, evaluated during pregnancy", at the Public Health National School, where she is Invited Professor and teaches Mental Health since 2006. With this project she received a ward from Astrazeneca Foundation;
- Fernando Fonseca Hospital Clinical Director and member of the Board of Fernando Fonseca Hospital from 2011 to 2012;
- Responsible for all the Residents of Fernando Fonseca Hospital from 2005 to 2010;
- Head of the Psychiatric Department of Fernando Fonseca Hospital from 2000 to 2005;
- Psychotherapist with training in Family Therapy and Psychoanalytic Psychotherapy;
- Coordinator of the Community Mental Health Teams at the Psychiatric Department since 2000;
- Coordinator of the Liaison Psychiatric Unit at Fernando Fonseca Hospital from 1996 to 2000.

SCIENTIFIC PROGRAMME

SOCIAL BREAKTHROUGHS SYMPOSIUM

Social Impact Initiative
Irena StojadinovicBMAG
AuditoriumFriday, 26th June 2015 | 13H45

Abstract

The Social Impact Initiative is the newest EFPSA team and the only team representing one of the main goals of EFPSA – using psychology knowledge to make a positive impact on society. The first project chosen to be the representative of this team and its vision is the ‘Mind the Mind – to Combat the Stigma of Mental Disorders’ campaign. After thorough research about this topic, it was decided to make an educative workshop for high school students and make a positive impact on society by changing the way they perceive mental disorders and the associated stigma.

The first wave of the campaign started in October 2014 and will finish in June 2015. The campaign was carried out in 19 European countries/regions. In each country there were between one and three Local Coordinators, one trainer, approximately 20 volunteers and between 300 and 1500 participants that were high school students involved. Both the Local Coordinators and the volunteers provided feedback and an analysis of this showed great results. The volunteers’ experience in both training and workshop delivery was very positive, the overall impression of students’ interest and engagement was very high and the workshops were mainly estimated as successful. The most difficult challenges volunteers faced were time management and keeping participants focused throughout the workshop.

The next steps in the campaign are: revision of all the materials according to the feedback analysis, the experts’ check of the workshop, ensuring some sort of professional support for the project and development of the questionnaire measuring the campaign’s impact. The second wave of the campaign will start in September 2015 with a great potential of having an even bigger impact on society. The future plans for Social Impact Initiative are finalising the ‘Mind the Mind’ package and producing a report on all of this work, reestablishing the partnership with IFMSA on the topic of Mental Health and approaching other similar organisations to initiate new partnerships, as well as starting new campaigns on other sensitive and highly relevant topics for society.

CV



Irena Stojadinovic

Currently I am a Masters student in clinical psychology at the University of Belgrade, where I previously obtained my Bachelor degree in psychology. My main interests are clinical and community psychology, therefore, all my academic and non-academic work has been oriented around these fields. The topic of my Masters thesis is examining the Relationship between Expressed Emotions and Support in Family and the Severity of Illness and Dysfunction in Schizophrenic Patients. Currently, I am an intern in a Psychiatric Clinic “dr Laza Lazarević” in Belgrade which includes working as a clinical psychologist under supervision. I am currently the president of the Association of Psychology Students “Stimulus”. Additionally, I have been volunteering in the Association of Users of Psychiatric Services ‘Duša,’ and in the European Federation of Psychology Students’ Associations (EFPSA). In EFPSA, I have been a part of the Social Impact Initiative team, which entails working on the ‘Mind the Mind – to Combat the Stigma of Mental Disorders’ campaign for over one year. I am currently the Senior Coordinator of this team which consists of overlooking the team’s work and the work of Local Coordinators in 19 European countries/regions. Also through EFPSA, I was a participant of the European Summer School 2013, which was an international research team working on the topic of “Conceptualisation of Mental Health across Europe: Comparing Psychology with Science and Engineering Students.” The work in progress of this project was both published in a European journal (JEPS) and presented at the European Conference of Positive Psychology 2014.