

**ESCAP Clinical Division**

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The Clinical Division (CD) was officially set up at the 2015 Madrid ESCAP Congress. Professor Claude Bursztejn (France), member of the Board at this time, was mainly involved in its creation, with a little group of members of the board : “the operational group of the CD”. They proposed the first members of the “enlarged group of the CD” and gathered them for the first time in Madrid.

**Reminder:**

The role of Clinical Division is to support and increase the quality of professional work and child psychiatry.

Its goals are:

- To promote interchange between clinicians in order to facilitate sharing and dissemination of knowledge and experience.
- To increase the knowledge about actual practices in different European countries
- To make information on clinical practices available.
- To promote the comparison between European countries of practices in the same disorder (How do you deal with...? What works for whom in what circumstances?)
- To learn from each other experiences.

Its sources of knowledge are:

- Evidence brought by research.
- Observations and experiences based on practice.
- Interaction between these two sources.

With the renewal of part of the Board, Henrikje Klasen (Netherlands), Óscar Herreros (Spain) and Jean-Philippe Raynaud (France) formed the “operational group” for this Clinical Division. Very quickly, Henrikje Klasen took the lead, with her well-known dynamism and capacity of initiative. Under her direction, the CD mainly oriented its work towards an inventory of Guidelines in CAP in the different European countries.

Henrikje found that the “enlarged group” of the CD was not eclectic enough in terms of training and theoretical orientation. So we expanded it (see the list of Clinical Division members at the end of the report). But in 2016 and 2017, this group was sort of "suspended" and was no more solicited.

In July 2017, shortly after the ESCAP Congress in Geneva, we had the great sadness to learn of the death of Henrikje. At the Board meeting in Athens in September 2017, we decided that Jean-Philippe Raynaud would take over the leadership of the Clinical Division, always associated with Óscar Herreros.

The following updated objectives have been validated:

- To reactivate and, if necessary, to expand the enlarged group of the Clinical Division. To gather this group again at the Vienna Congress in 2019, taking into account the lessons of the past: to know each other better, to explore the skills and interests of the different members, to propose a real animation of the group in a participative way of working. While knowing that we are all very busy, and that motivating such a group is not easy and it is better not to show too excessive ambitions.

- To try to gather the data collected by Henrikje Klasen during the survey on the Guidelines in Europe that the CD launched, in 2016-2017. Unfortunately, not all of this data were shared within the CD and our efforts and the efforts of Henrikje's family to retrieve all of this data have not been successful so far. We are thinking of the interest of repeating this inquiry, probably in another form (at the Vienna Congress?).

- To innovate by organizing Case reports symposiums or workshops at ESCAP congresses or during congresses of partner associations. The idea is to re-emphasize, alongside research and academic presentations, presentations of clinical cases, if possible with video support, even if this poses a number of authorization problems.

At the recent AEPEA congress in Bilbao (April 2018), the DC organized the first ESCAP case reports symposium, at the invitation of the AEPEA. Véronique Delvenne (Belgium), a member of the enlarged CD group, Stephan Eliez (Switzerland), current ESCAP President and Jean-Philippe Raynaud (France) each presented a case report. The topics discussed were nonviolent resistance with a teenager hospitalized in a CAP department, the accompaniment of a child's family with a diagnosis of 22q11.2 deletion syndrome and the long-term evolution of two children with post-traumatic stress following an industrial disaster. The participation in this symposium and the feedback from the participants were positive. We propose to continue and improve this format, especially for the Vienna Congress. We are already working with the organizers of the Vienna Congress and preparing a call to members of the Clinical Division to propose themes and speakers.

For the coming months and years, the Clinical Division proposes the following topics (non-exhaustive list):

- Major clinical concerns in various countries.
- Implementation of guidelines in clinical practice.
- Are there specific national guidelines.
- Children of parents with severe mental disorders.
- Models of care and therapies available.

**In conclusion :**

This clinical division is a good idea. It places the clinical practices of every day, of the real life, in the center of our exchanges. It is based on the great wealth and diversity of clinical practices in Europe. It was not easy to set up, not always readable by ESCAP members. We must make this concept live and advance : a Clinical Division in a Scientific society.