



Newsletter Editor: Shannon Suo
Photos: Shannon Suo

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September, 2015

Save the Date for the 2016 Annual Meeting

Transforming Policy and Practice for Culturally Competent Mental Health Care

- **Minneapolis,
Minnesota**
- **May 5-7, 2016**

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Message from the President

Roberto Lewis-Fernández

I am delighted to assume the presidency of SSPC! First, I want to thank Steven Wolin for his tremendous commitment and hard work during his tenure, and especially for everything he and Liz have done over the last 3 years. I am thinking particularly of their joint efforts to expand the membership of the organization and to energize all of us in our work in cultural mental health through the Annual Meeting, the educational webinars, and the use of our new website. I am counting on their ongoing leadership as we continue to expand the impact of SSPC.

I am taking the helm at an exciting time in the Society's history. Membership is growing, as is attendance at the Annual Meetings. What was once a small group of psychiatrists with an interest in culture is broadening its base to include a range of mental health professionals, anthropologists and other social scientists, researchers from many disciplines, public health personnel, and others. Our diverse perspectives on issues of common interest can vastly expand the field as well as enrich each of us as individuals.

Within the overall SSPC mission of pushing forward the field of cultural mental health, including cultural psychiatry, my specific goals are fourfold: 1) growing the membership and enhancing its professional and regional diversity, 2) expanding the products we offer as an organization beyond the Annual Meeting, 3) making the meetings as affordable as possible, and 4) strengthening SSPC's infrastructure.

These goals are not new. As an organization, we have been working on them for some time and have made remarkable strides. An infrastructure has been developed over the past three years. One of my jobs will be to fine tune it to ensure orderly transition of the governing body (officers and Board members) and smooth flow of operations. I also want to continue to expand the diversity of professions and the regional balance of the membership, including recruiting members from Mexico, thereby encouraging participation from all of North America.

Technology affords us many wonderful opportunities to develop new products and services with widespread applicability that can also become value-added perks of membership (e.g., webinars). With our unique talents, we can develop these products to fill gaps in the field; they can be provided individually or on subscription bases to individuals or institutions lacking the resources to develop them, such as some mental health training programs.

There are so many things we would like to do, and to do them we have to meet our fiscal challenges. Therefore I want to lead the development of a strategic plan that includes products and services and focuses on ways and sources to pay for them. We also need to find the most cost-effective ways to hold Annual Meetings, something on which we have begun to work. Maintaining fiscal responsibility is key to healthy growth.

I want to encourage all of you to become involved in this exciting process. My door is open. Please feel free to email me or call me with any ideas, questions or concerns. I am delighted to be able to work with all of you to push forward the field of cultural mental health.

From the desk of the Executive Director*Liz Kramer*

"Focused yet friendly atmosphere to convey serious matter. Excellent improvisation of clinical sessions showed a wide array of clinical challenges across the globe. I feel confident that the great research opportunities generated and fostered through SSPC will help all aspiring researchers across cultures."

**—2015 SSPC
Annual meeting
attendee**

Well it's almost fall. Summer has gone really quickly and, yes, we missed an issue because we wanted to wait until we had the results of the evaluations, the theme for the 2016 annual meeting and some details about it and other news. During the interim we also launched our new website and the successful webinar series that is being produced by the Education Committee under the leadership of Kenneth Fung. The third webinar, Mindfulness in Cultural Context, is scheduled for October 19 from 1-3 pm eastern time. Register early at www.psychiatryandculture.org and don't miss out. We also (we hope) finally have straightened out on-line access to Transcultural Psychiatry for members. If you encounter any difficulties accessing the journal please contact me.

The 2015 meeting in Providence was our most successful ever in terms of attendance and, consistent with the theme of global mental health, we had good global representation. Kudos to Robert Kohn for his very hard work and substantial contributions to the meeting. We've received the evaluations from the CME Office at Brown. Of the 147 attendees, 67 (45.5%) completed the survey. Sixty-five percent of the respondents were physicians, an additional 7.6% were residents and fellows, 28.8% were PhDs, and an additional 9.1% identified themselves as social scientists.

As always many of you commented on the networking opportunities and how useful it is to learn from the experience of others working in related areas. One person commented, "Focused yet friendly atmosphere to convey serious matter. Excellent improvisation of clinical sessions showed a wide array of clinical challenges across the globe. I feel confident that the great research opportunities generated and fostered through SSPC will help all aspiring researchers across cultures."

The vast majority of respondents gave the overall program high grades (73% excellent, 23% good). Sixty-one answered excellent to the question whether the information presented met their needs and 30% answered good. However, only slightly more than half of the respondents gave excellent grades to how clearly the material was presented and how well their questions were answered (55% and 53% respectively). In both of those categories, nearly 10% responded average; the rest answered good. There is plenty of room for improvement here.

Eighty-three percent of survey respondents said that participation in the program would have a positive impact on their practice behavior, while another 6% answered maybe. What we present obviously is good. We just have to work harder on how we present it.

Despite our (primarily my) ranting and raving about learning objectives, many people didn't match the content of their presentations with their learning objectives and are going to have to try a lot harder next year. Table 1 shows the numbers.

Continued next page

From the desk of the Executive Director, continued**Table 1: How well were the Learning Objectives of this activity met?**

	Very Well	Well	Average	Disappointing	Poor
Describe three key cultural factors related to including the generation of knowledge and practice in global mental health	62.12%	25.76%	10.61%	1.52%	0.00%
Describe methods and provide case examples by which cultural processes influence human rights, ethical practice, and policy.	62.12%	30.30%	4.55%	3.03%	0.00%
Demonstrate cultural adaptation techniques for mental health assessment tools and mental health intervention through case-based practice.	67.19%	23.44%	6.25%	3.08%	0.00%
Describe the three pathways by which social factors impact the etiology, severity, and prognosis of mental illness.	60.00%	23.08%	13.85%	3.08%	0.00%
Identify barriers and potential solutions to scaling up mental health services in low resource settings, incorporating methods and concepts in dissemination and implementation research.	59.38%	31.25%	0.00%	1.56%	0.00%

Many people commented that the program was great or excellent, and that it was well organized, but people want fewer PowerPoint presentations and more interactive dialogue among participants, and more time allocated for open discussion. People would like to see more open dialogue between psychiatrists and social scientists and more on psychotherapy. They also want us to continue doing more workshops.

Topics and applications that people would like to see next year are:

- Cultural adaptation of treatment protocols and assessment using the CFI.
- Policy solutions to the disparities that exist both domestically and globally.
- "Etiology of mental health conditions and explanatory models".
- Policy and practice issues for the cultural psychiatrist.
- Case-based learning: seminars in which a group can consider a case study and how cultural ideas can help find solutions in complex situations.
- Continued discussion of the tensions that can emerge with attention to local contextual needs and the integration of quality, evidence-based care.
- Telepsychiatry as a way of accessing marginalized populations.
- Technology and legal issues.
- More workshops on methods in cross-cultural research and practice.
- Marital and family health across cultures.
- Integrated care.

Continued next page



Russell Lim receives the Creative Scholarship Award from incoming President Roberto Lewis-Fernández at the Annual Meeting



Jim Boehnlein receives the Lifetime Achievement Award from President Steven Wolin at the Friday lunch and Business Meeting at the Annual Meeting in Providence, RI

From the desk of the Executive Director, continued

What are we going to do about your feedback? The Program Committee has taken your feedback seriously. We are strongly encouraging the submission of interactive workshops and case presentations and hope we will be blitzed. You can find the 2016 Call for papers on pages [6-7](#) as well as on our website. The final deadline for submission is September 30, but we will start reviewing proposals as we receive them and strongly encourage early submissions. Anyone who wants a preliminary review and feedback before finalizing their proposal must submit a draft by September 15.

Please note that all proposals must be submitted electronically and sent to sspc2016@gmail.com. If you have trouble with your submission please contact Brandon Kohrt (brandonkohrt@gmail.com) or Bonnie Kaiser (bfullard@gmail.com) and they will try to help you.

Also please note that the deadline for submissions is hard and fast, *and no late submissions will be accepted*.

I hope you all had a great summer and wish you the best for fall. Meanwhile get in those abstracts for 2016!!! And don't forget those learning objectives!

Annual Meeting Award Recipients

Shannon Suo

Congratulations to the award recipients at the 2015 Annual Meeting!

Charles Hughes Fellowship in Cultural Psychiatry: Alyssa M. Ramirez Stege

John P. Spiegel Fellowship in Cultural Psychiatry: Minoo Ramanathan

Lifetime Achievement Award: Jim Boehnlein

Creative Scholarship Award: Russell Lim

2016 Annual Meeting Hotel Information

You can start planning for Minneapolis and book your hotel rooms at the Commons Hotel. Call 800-822-6757 or 612-379-8888 and tell them you are with the Society for the Study of Psychiatry & Culture 2016 or go to the hotel site directly [here](#). The room rate will be \$144.00 per night, single or double occupancy if reserved by April 10, 2016 and transportation will be provided between the hotel and the Humphrey Center.

In Memoriam, Bob Kraus*Edited by Liz Kramer, original by Thomas W. Miller*

Robert F. Kraus, M.D., professor emeritus of Psychiatry and Anthropology at the University of Kentucky, died on March 3rd at the age of 84. He had a long, distinguished academic career in the area of transcultural psychiatry and served as chairman of the Department of Psychiatry at the University of Kentucky from 1981 to 1991.

Bob was a Charter Member of the Society for the Study of Psychiatry & Culture. He was an expert in circumpolar mental health and was a member of the American Society for Circumpolar Health. However, he derived the greatest pleasure from the care of patients and training of future physicians. His love of medicine continued, even as his health slowed him over the past years.

Bob fostered clinical and research affiliations with the American Indian and Alaska Native Mental Health Research Center, University of Colorado, National Mental Health Research Center, Academy of Medical Sciences, Moscow, Russia, Tomsk Medical Institute (Siberian Medical School), Tomsk, Russia, Siberia, Khabarovsk Medical Institute (Siberian Medical School), Khabarovsk, Russian Far East; School for Young Psychiatrists, U.S.S.R. Academy for Medical Sciences, Suzdal, U.S.S.R., Traditional Healing Community Council, Tribal Doctor Program, South Central Foundation, Alaska Republic Hospital for Nervous Diseases.

He was a fellow of the American Anthropological Association, American Psychiatric Association, Kentucky Psychiatric Association, Society for Psychological Anthropology, the American Association for the Advancement of Science, American Academy of Psychoanalysis and the World Psychiatric Association, and a member of the American Psychiatric Association.

He served on the editorial boards of the American Journal of Psychiatry, American Anthropologist, Culture, Medicine and Psychiatry, Hospital and Community Psychiatry, Arctic Anthropology, Journal of Nervous and Mental Disease, and Anthropologica.

He received many honors and awards, among the most cherished of which was the Lifetime Achievement Award, from SSPC for his contribution to Cultural Psychiatry and Circumpolar Research, which was presented at a joint meeting of the Society and the Transcultural Psychiatry of the World Psychiatric Association.

Bob is survived by his beloved wife of 58 years, Dolores "Dee" Kraus; his son Fritz Kraus of Kasilof, Alaska; his daughters Karen Kraus, M.D. of Fresno, CA, Karla Kraus of San Diego CA and Kristin Denton of Anchorage, AK; and 7 grandchildren.

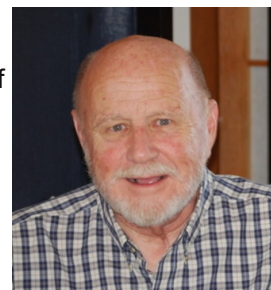


Photo: legacy.com website

Dr. Kraus was a Charter Member of the Society for the Study of Psychiatry & Culture

In Memoriam, Luke Kim*Shannon Suo*

On July 12, cultural psychiatry lost another gentle giant in the form of Dr. Luke Ik Chang Kim, namesake of the only cultural psychiatry professorship in the United States: the Luke and Grace Kim Endowed Professorship at UC Davis. Dr. Kim and his family fled North Korea when he was only 15 and he obtained both his MD and his PhD in clinical psychology before entering psychiatry residency. He was the founder of the Association of Korean American Psychiatrists and published numerous works about the mental health of Asian American immigrants. I met Dr. Kim during his 32 year tenure at Davis, where he functioned as my supervisor, mentor, and eventually, my most gracious employee when I became medical director of one of the clinics where he worked. He never tired of introducing me as his "boss" when we went to meetings together.

He is survived by his wife of 53 years, Grace; 2 sons, David and Danny; 4 grandchildren; and siblings Iknan, Iksung, and Pau Ikpoong.



Photo: twitter.com

May 5–7, 2016

Minneapolis, Minnesota

Hubert H. Humphrey School of Public Affairs, University of Minnesota

Abstract submission deadline: September 30, 2015**[Click here for Abstract Submission Forms](#)**

Transforming Policy and Practice for Culturally Competent Mental Health Care

The theme of the annual meeting is ***Transforming Policy and Practice for Culturally Competent Mental Health Care***. We are particularly interested in submissions based on how culture is addressed in policies and practice of clinical care, research, education, and advocacy. What is and what should be the role of culture in policies ranging from the Affordable Care Act to Psychiatry Milestones in clinical training to the National Institutes of Health? How can the systematic inclusion of culture transform practice in a range of health-related activities? We also welcome papers, symposia, workshops, and posters in other clinical, education, and research areas of cultural psychiatry. Examples of topics and domains related to the conference theme include the following:

1. *Culture in education and training* – What policies, guidelines, tools, and curricula are used or should be developed to integrate culture in medical, nursing, psychology, social work, and public health education? What is the content of existing policies, guidelines, curricula, and evaluation material in mental health education? What has been the impact on cultural knowledge and skills of recent developments in policies, guidelines, and tools such as the Psychiatry Milestones project and the Cultural Formulation Interview?
2. *Policies and practices to address healthcare disparities* – How do guidelines and policies work to reduce (or exacerbate) disparities in health, health care, and research across population groups, between settings with varied cultural contexts of care, and between high- and low-income settings? How do policies address racism and discrimination in care and research? How do policies regarding services such as telemedicine and access to medical interpreters affect mental health outcomes?
3. *Culture in international, regional, national, local, and institutional service guidelines* – How is culture operationalized in guidelines and policies for mental health service delivery across a range of regional and institutional levels? What is the impact of this operationalization on practice and outcomes? How do regional and institutional service guidelines address existing health disparities and how do they attempt to prevent of disparities in services?
4. *Comparative practices and mental health systems* – How do mental health policies differ across countries or regions? What is the status of voluntary vs. involuntary care; community-based care practices; training requirements; and prevention of health disparities across countries?
5. *Multidisciplinary teams and practices* – How is culture addressed at patient and provider levels when working in multidisciplinary treatment and research teams? What are examples of policies that integrate culture and minimize discrimination in multidisciplinary approaches? What roles do social scientists play in developing and implementing guidelines in care and research initiatives?
6. *Culture in humanitarian mental health response* – How is culture addressed in guidelines, policies, and implementation of mental health services during humanitarian emergencies, such as earthquakes in Haiti, China, and Nepal and the Ebola virus disease outbreak in West Africa?
7. *Culture in research guidelines* – With recent developments in research recommendation and other guidelines to influence the strengthening of health systems, observational research, and clinical research, how do these

guidelines impact practice and what are the commonalities across recommendations? (e.g., see the Lancet Commission on Culture and Health or National Institutes of Health Roadmap for Including Culture in Health Research)?

8. *Cultural competency guidelines and practice* – Given the strengths and weaknesses of an approach based on the concept of “cultural competency” to guidelines and practice in health, what are the lessons learned and best practices to improve care? What are approaches that can supplement or substitute for cultural competency, for example, structural competency?
9. *Policies and aspects of identity* – How do policies and guidelines categorize and incorporate (or neglect) groups and individuals based on geography, language, religion, age, gender, sexual identity, social identity, immigration or refugee status, exposure to torture and other traumas, living with medical conditions, and living with disabilities?
10. *Collaboration with persons with mental illness* – How do policies promote (or hinder) collaborative engagement with persons with mental illness, family members, and other advocates to improve care, education, and research?

Categories for Submission

Abstract forms can submitted for Workshops, Symposiums, Individual Free Papers or Posters, and Trainee Fellowship Papers. Workshops for participants to gain skills in policy and practice issues related to culture are strongly encouraged and will be given priority. Symposium submissions are also encouraged. Submissions with qualitative, quantitative, or mixed methods primary data and clinical encounters will be given preference over position pieces. Participants are encouraged to submit abstracts early. SSPC will provide technical assistance for abstract submissions up to 48 hours before the deadline.

[Click here for abstract submission forms.](#)

Workshop – Workshops are approximately 2 hours long. They should have one organizer and up to four co-facilitators. Workshops are required to have hands-on activities for participants a should address specific skills, debates, and/or concepts in policy and practice.

Symposium – Symposia are approximately 2 hours long. Three original papers may be included, with a recommended presentation time of 20 minutes each. The organizer or moderator may provide introductory remarks on the topic. A discussant may be included if desired. Be sure to allot a minimum of 30 minutes for open discussion.

Individual Papers or Posters – Abstracts may be submitted by individuals indicating preference for paper or poster presentations. Individual papers will be grouped into symposia by the conference organizers.

Trainee Fellowship Presentations – Trainees in clinical or social sciences (masters, MD, PhD, or post-doc level) may submit papers for consideration for a fellowship presentation. A maximum of two fellowships are given each year. SSPC Fellows have registration costs waived and receive a \$500 honorarium to offset travel costs.

The deadline for all submission types is **September 30, 2015**. [Click here for submission forms for each category](#). Email completed PDF submission forms to SSPC2016@gmail.com. All submissions undergo a multiple-reviewer selection and scoring process. Notification of acceptance or rejection will be sent by early 2016. After notification of acceptance, all presenters, workshop facilitators, and discussants are required to pay the conference registration fee by February 1st for their submission to be included in the annual meeting.

For additional information, please visit the Annual Meeting page of www.psychiatryandculture.org.

If you have any questions, please contact

Brandon Kohrt, Co-Chair of the Program Committee, at brandon.kohrt@duke.edu, or
Liz Kramer, Executive Director, at ekramer931@gmail.com, phone: (484) 416-3915.

*37th Annual Meeting
Society for the Study of Psychiatry and Culture*



ABOUT THE SSPC

The Society for the Study of Psychiatry and Culture (SSPC) is a nonprofit, interdisciplinary organization devoted to furthering research, clinical care, and education in cultural aspects of mental health and illness.

We aim to promote cultural psychiatry in North American professional groups and to collaborate with national and international organizations in the development of policy and practice. Primarily rooted in North America, we provide an interface for domestic and international interests of cultural psychiatry and mental health.

For more information, visit:
psychiatryandculture.org

SSPC MEMBERSHIP

Visit psychiatryandculture.org to learn more about our membership benefits, which include reduced registration at our annual meeting.

Save the Date!
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**Transforming
Policy and Practice
for
Culturally Competent
Mental Health Care**

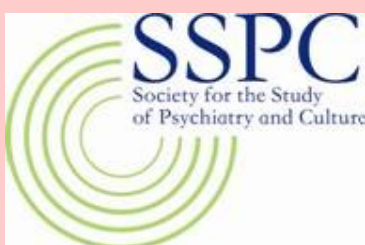
May 5 – 7, 2016

**Hubert H. Humphrey School of Public Affairs
University of Minnesota**

For more information, visit psychiatryandculture.org

Society for the Study of Psychiatry and Culture

SSPC is a 501(c)3 charitable organization
Tax ID #931133972
Dues are not deductible as a charitable expense, but may be deductible as a business expense. Consult with your tax advisor for details.



Get a jump on membership for 2016! Click [here](#) to pay your dues online. You do not need a PayPal account to use PayPal—just a credit/debit card! Please complete the demographics form in its entirety and it will lead you to PayPal.

New members joining now will get 4 months free and start enjoying membership now with dues applied to their 2016 membership!

Leave a legacy—consider donating to SSPC or recognizing SSPC in your will. While dues are not tax-deductible as charitable, donations are!

psychiatryandculture.org

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Medical professional liability policies can vary widely from one company to the next. It is important for psychiatrists to know the full – and accurate – story on a policy. Whether it is reviewing the difference between occurrence and claims-made policies or explaining how another policy might leave the doctor with an uninsured risk, I have done my job when I help psychiatrists evaluate their options to make the right choice.

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Help Us Stay Organized!

Elizabeth Kramer

As the organization grows in size and complexity it becomes increasingly more important for us to stay organized, especially since we are such a geographically diverse group. Unless otherwise instructed, please do not send email to sspc2016@gmail.com. That box is for limited administrative functions and is not checked often. Instead, please send your emails directly to the people for whom they are intended. If you're not sure to whom they should go, send them to Liz and she will forward them appropriately. Thanks!

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