

# International Union of Psychological Science (IUPsyS)

## NEWSLETTER

2011 Volume 10(1)



[www.iupsys.net/index.php/publications/newsletter](http://www.iupsys.net/index.php/publications/newsletter)

### The Editors' Page



James Georgas

The first Newsletter of 2011 presents articles about the International Union of Psychological Science and other issues that we believe will be of interest to our national members and other scientific bodies.

#### Report from the President of IUPsyS

The Report of the President of IUPsyS, Rainer K Silbereisen, addresses a number of issues related to the activities of IUPsyS this past year as well as looking ahead to events involving IUPsyS that are planned for the coming year and beyond.

#### 30th International Congress of Psychology

The 30th International Congress of Psychology will be held in South Africa from 22 to 27 July 2012. This is the first time that the quadrennial congress of IUPsyS will be held in Africa. Ann Watts, Secretary-General of the Conference Executive Committee and Deputy Secretary-General of IUPsyS, gives us a broad view of the Congress, from the scientific programme to the social events and local attractions. It promises to be a great Congress.



Nick Hammond

#### Revision of World Health Organization's ICD-10 Mental and Behavioral Disorders

Geoffrey Reed, Senior Project Officer of WHO, and Pierre L.-J. Ritchie, Secretary-General of IUPsyS and Main Representative (Psychology) to WHO, present an article on the Revision of World Health Organization's ICD-10 Mental and Behavioral Disorders. The Constitution of the World Health Organization mandates the production of international classifications on health to provide a consensual, meaningful and useful framework which governments, providers and consumers can use as a common language. The International Classification of Disease (ICD) is the global standard for reporting and categorizing diseases, health-related conditions and external causes of disease and injury, and is used in the development of health programs, prevention, reimbursement and treatment. The current ICD version 10 was adopted by WHO in 1992, and the ICD11 revision aims to improve clinical utility, to render it appropriate to primary care settings, and to make it compatible with new

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health information system technology. WHO has established a number of Topic Advisory Groups (TAGs), and the Mental Health TAG is chaired by Steven Hyman and the Chief Editor (Program Manager) is Geoffrey Reed. Dr Reed is in this critical position by secondment to WHO from the IUPsyS, which is the single accredited psychology organization to the WHO mental health branch. As Senior Project Officer, Dr. Reed has primary responsibility for managing all of the activities described in the report.

### History and current status of SIP

Maria Regina Maluf, President of SIP (in Spanish *Sociedad Interamericana de Psicología*, Portuguese *Sociedade Interamericana de Psicologia*, French *Société Interaméricaine de Psychologie* and English *Interamerican Society of Psychology*) presents its history and current status. SIP was founded by a group of behavioral scientists in 1951 in Mexico City and celebrates its 60th birthday this year. SIP represents the science and profession of psychology and related fields in North America, Central America, South America and the Caribbean. The Interamerican Congress of Psychology is held every two years ending in odd numbers and the Regional Conference in even years. It also publishes the *Interamerican Journal of Psychology* three times a year and the *Newsletter of the Society*. The article describes the structure of the society, its presidents and national members, its task forces and work groups, and the program of exchanges of members and students among countries. Dr Maluf describes the philosophy and goals of psychology as related to social and economic needs in Latin American countries. SIP is an affiliate member of the IUPsyS and also has collaborative relationships with other international societies of psychology.

### Psychology as a Core STEM discipline

We are including in this Newsletter the Executive Summary of a report of the American Psychological Association 2009 Presidential Task Force, published in June 2010, on the Future of Psychology as a STEM Discipline. The term STEM refers to the core disciplines responsible for scientific and technological progress: Science, Technology, Engineering and Mathematics.

While we have previously linked to the full report in the IUPsyS Monthly Bulletin, we include the summary here but because of the potential importance and relevance of the report for international psychology. The basic import of the APA Task Force was that, despite the fact that technology requires the use of human operators and that understanding human capacities and limits is essential for implementing technological advances, psychology in the United States is often excluded from the list of STEM disciplines. The goal of the report was to review the current status of psychology as a STEM discipline, articulate the problem of inconsistent recognition of psychology as a core STEM discipline in the United States, provide a rationale for consistent recognition of psychology as a STEM discipline, and recommend specific actions to achieve this goal.

The absence of the impact of psychological science on governmental programs is not limited to the United States but is a common concern across many countries throughout the world. Few ministers or presidents of nations in today's world will make a decision regarding policy or laws related to the economy without consulting economists, technology or industry, without consulting engineers, medical care without the opinion of medical experts, the rights of minorities without the opinion of constitutional experts. Throughout the countries of the world, scientific and professional associations representing these areas have established special relationships with governments. Psychology does not have this special relationship, neither with governments nor the general public. It is not that psychology has a poor image as a profession or a science, but rather that it has an unclear image or a limited image in most countries. In many countries in which psychology is highly developed at the university level, many, including governments, associate psychology with psychoanalysis. In many other countries, psychology has not been part of its cultural history. There is little awareness that the body of psychological knowledge is composed of phenomena such as cognition, personality, motivation, interpersonal interaction, social behavior, and their development throughout the life span. If we psychologists believe that

our science psychology can aid in solving many of the problems of the human condition, we should find effective techniques of projecting a truer image of psychology, and find means of influencing governmental policies. It is not enough for us to sit in our ivory towers. We know, but others do not, that psychological knowledge is applicable in generating

development and harmony in all spheres of society, in education, in industry, in government, in politics, in law, in athletics, to name but a few.

*James Georgas and Nick Hammond*

*The Editors*

## Report from the President

**Rainer K Silbereisen**



In the last Newsletter of 2010, I talked primarily about events that had happened throughout the year. For this first Newsletter of 2011 I would like to take the opposite stance and spend some time looking ahead to events involving IUPsyS that are planned for the coming year and beyond.

Before I begin, however, let me just remind readers of the reason for my writing these regular notes and reports. When I took over as President in 2008, I emphasized the need for a greater involvement of national members in the work of the Union. This could only be achieved if information concerning the activities of the Union, particularly those of the Officers, the EC, the Standing Committees and their respective Work Groups, was made available on a regular basis. This is the intention of the Newsletter (my thanks to Jim Georgas and Nick Hammond), of the regular Bulletins (thanks again to Nick), and of the Union's website (thanks to Merry Bullock, who was webmaster until the end of 2010, to Nick, who has taken over this role as part of his duties as Executive Officer, and to Psychology Press who host the website for us). I hope our aims are being met and that you find these information vehicles useful in keeping you up-to-date with Union activities and events. As always, if you have any general comments, or a particular burning issue you would like to bring

to our attention, please do get in touch – we are waiting to hear from you!

With regard to this year, the list of Union events and meetings is already pretty long. In February; I had highly successful meetings with the Rector of Tbilisi State University, concerning amongst other things the forthcoming 3<sup>rd</sup> Caucasus Workshop that will take place in Tbilisi later this year, and with Kwok Leung, President of IACCP concerning the cooperation between IUPsyS and IACCP in the ARTS program: The next ARTS will happen at the 2012 ICP in South Africa - see <http://www.iupsys.net/index.php/capacity-building/arts>. At the end of March, I attended the SRCD meetings in Montréal, Canada where I used the occasion to meet our Treasurer, Michel Sabourin, to discuss Union business, especially concerning the 2012 ICP and other conferences and workshops where IUPsyS is involved. I also met Simon Sommer from the Jacobs Foundation to discuss the funding we have been granted by the Foundation that will enable us to organize several important 'add-on' events at the 2012 ICP – see later in this article for more information.

As I have mentioned before, the day-to-day governance of the Union is through regular contact between the Officers. Primarily this is via email and phone calls, but we also meet regularly and at least once a year. This year we met in Marbach on the Swiss/German border in early May. The reason for this location and time is the close proximity to Zurich - the Headquarters of the Jacobs Foundation - and to Würzburg, Germany, where the capacity-building planning meeting, which involves several of the Officers, took place immediately prior to the Marbach meeting.



The capacity-building planning meeting is organized by Laura Hernandez (Chair of the Steering Committee on Capacity Building) and Pierre Ritchie, our General Secretary, and is aimed at reviewing the Union's current capacity-building activities and at identifying the best future targets of capacity-building, whether related to historic activities or to new initiatives. This is a particularly important meeting because, not only has capacity-building been an integral part of the Union's mission and objectives for most of its existence, it has assumed even greater importance over the past decade, particularly in the context of its quadrennial Strategic Plan. This has led to us seeking greater support from external sources of funding as our capacity-building work increases – a good example is the funding we applied for from the German Academic Exchange Service (DAAD) to hold the 3<sup>rd</sup> Caucasus Workshop (see later in this article for more information) – which requires careful coordination and planning. As well as members from within the Union's governance, participants at this meeting will also include persons with IUPsyS National Member, NGO, and other institutional capacity-building experience.

In July, I will attend the European Congress of Psychology in Istanbul, Turkey, where I have been invited to give a keynote speech in my role

as President of IUPsyS. Our Secretary-General has also been invited to organize a symposium there so this will facilitate a meeting between us, which is helpful as a pre-planning exercise for the main Officers' and EC meeting that takes place in Beijing in August. Here I would just like to mention the support the Union has received for these meetings from the Chinese Association for Science and Technology (CAST) that has been arranged by our Vice-President, Kan Zhang.

In October this year, the 3<sup>rd</sup> Caucasus Workshop will be held in Tbilisi, Georgia. I can now confirm this because we have heard that the DAAD (the German Academic Exchange Service) has again granted us funding, without which these capacity-building workshops could not take place (see a translation of my interview with the DAAD on the IUPsyS web – [www.iupsys.net/images/announcements/1101-daad-rks-interview.pdf](http://www.iupsys.net/images/announcements/1101-daad-rks-interview.pdf)). Arrangements are well underway but not yet complete. Suffice to say that our plans to take this third workshop to the region itself will be met, that we already have a fully developed draft schedule for the five days of the workshop, including faculty and potential participants list, and that we have a regional organiser, Professor Tea Gogotishvili, who is very active on our behalf. I will have a further planning meeting with Professor Gogotishvili during the Würzburg capacity-building meeting in May.



Officers and guests at Hohenklingen Castle, Stein am Rhine

Finally, with regard to a review of some of the activities happening under the auspices of IUPsyS in 2011, in November there will be a Regional Congress of Psychology (RCP) in Nassau in the Bahamas hosted by the Caribbean Psychological Association ([www.caribbeanpsychology.org](http://www.caribbeanpsychology.org)) with the theme, 'Psychological Science and Well-Being: Building Bridges for Tomorrow'. IUPsyS, together with the International Association of Applied Psychology (IAAP) and occasional other partners, regularly sponsors RCPs in areas of the world where psychology is developing. More information on RCPs can be found on our web

[www.iupsys.net/index.php/capacity-building/regional-conferences-of-psychology](http://www.iupsys.net/index.php/capacity-building/regional-conferences-of-psychology). I will attend in my capacity as President of IUPsyS, as well as being a plenary speaker on the subject of 'Social change and human development: Recent research on the consequences of political change and globalization'.

Before I close, I would like to mention the 2012 ICP that will be held in Cape Town, South Africa. As anyone who has ever been involved with organising such an event will know, it is a very long process, taking about eight years from the first idea to submit a bid to the actual event taking place. At first, things move quite slowly but as the time of the congress draws near, then of course activities increase apace. This is certainly true of the 2012 ICP. With just over a year to go, things have certainly moved up a gear; the website has more information (see [www.icp2012.com](http://www.icp2012.com)) and the second Announcement for abstract submission has been issued. I have been urging you to do all you can to attend this ICP for some time now and I hope it has had an effect and that you are planning to be there.

I should add that my encouragement for you to attend this ICP is not simply because these Congresses are a crucial part of Union life, or because the 2012 ICP is breaking new ground by being held in South Africa for the first time, but because we have been very fortunate in getting sponsorship from the Jacobs Foundation to hold several important 'add-on' events. One of these is a series of controversial debates that were first introduced in 2008 at the ICP in Berlin where they proved to be immensely popular and stimulated discussion lasting well after the debates themselves. Other activities include an Emerging Psychologists Program for young scientists with travel stipends and a lecture series on "translational research," which will look at how well-founded empirical findings of basic or applied science can be translated into policy and practice related to the development of children and youth. There will also be a number of Change Fellowship Awards on offer. These will have a special emphasis on young researchers (post-doc and higher) from the Sub-Saharan African region with the aim of encouraging them

to conceive and carry out own research programs that address the role of social change for individual behaviour and development among young people in their country.

It is also at the 2012 ICP that the new IUPsyS-sponsored awards will be presented for the first time. These awards, which are the result of much hard work by the Work Group on Awards (Chair: Kan Zhang) have important outcomes for the Union, such as helping increase our visibility and supporting the implementation of our strategic plan, as well as recognizing personal achievement. There are three categories of awards: the Young Investigator Award, which recognizes young post-doctoral scientists who have already made a significant contribution to psychological science; the Achievement Against the Odds award, which honours a researcher or team of researchers who succeeded in conducting research under extremely difficult circumstances; and the Lifetime Career Award, which honours distinguished and enduring lifetime contributions to international cooperation and advancement of knowledge in the field of psychological science. The Mattei Dogan Prize, which recognizes a contribution that represents a major advancement in psychology by a scholar or team of scholars of high international reputation, will also be presented at the 2012 ICP. This will be the second time this prize has been awarded, the first being presented to Michael Posner, Emeritus Professor at the University of Oregon, USA, at the Berlin ICP in 2008. However, the most important message here is that the deadline for receipt of nominations for the 2012 Awards is **30 September 2011**, and we want to have as many nominations as possible. Nomination forms and information on the nomination process, as well as information on all awards, can be found on the IUPsyS web site at [www.iupsys.net/index.php/prog-awards](http://www.iupsys.net/index.php/prog-awards). Please get involved in this by organising the nomination of someone you feel merits one of the awards, or by passing on information about the awards to others. Again, all information is on the IUPsyS website, or if you have any questions then contact the Executive Officer at [awards@iupsys.org](mailto:awards@iupsys.org).

Concerning the 2016 International Congress of Psychology, it was agreed at the Assembly in

Melbourne last year that this will take place in Yokohama, Japan, 24-29 July. As I mentioned in my 2010 end-of-year letter, the first site inspection visit was made in December 2010. Since then, the process of transforming the theoretical, paper-based bid into the actual, functioning event is well under way. The Local Organizing Committee and Chair of the Scientific Program are in place and working hard.

Tragically, Japan has been at the forefront of our minds recently for other reasons. When the horrible news of the earthquake, tsunami, and atomic power plant failure in Japan arrived at my desk, I immediately shared my feelings with Kazuo Shigemasa, our future congress organizer, and sent my condolences on behalf of IUPsyS to those who lost loved ones and expressed my hope that our colleagues would be able to deal with the difficult and tragic situation. Japan is such a strong society, and I am sure that in overcoming the current turmoil our friends will give testimony to that. Hopefully, the experience

IUPsyS has gained in strengthening capacity to deal with disasters will be helpful. We have organized several international workshops on such topics, as already mentioned, and we recently submitted a proposal to ICSU for funds to develop capacity building concerning disasters. It goes without saying that once the needs of our Japanese colleagues are clearer we will support them to the very best of our ability.

Finally, thinking about all the work and even challenges with which one is sometimes confronted when serving IUPsyS, I know for sure that Presidents and Officers in the not so distant past had a much more difficult time in navigating between science and politics in a world divided by ideology then we do today. I am thankful for that, but there is still much to do. In particular, we need to work with all diligence to overcome the divide across countries in resources and opportunities for our discipline that is still present.

## 30<sup>th</sup> International Congress of Psychology

Ann Watts



The 30<sup>th</sup> International Congress of Psychology (ICP) will be held in Cape Town, South Africa from 22 to 27 July 2012. This is the first time that the quadrennial congress of IUPsyS will be held in Africa. Organised around the theme *Psychology Serving Humanity*,

Congress President Saths Cooper notes that “the Congress will showcase new frontiers of psychological science and practice as a means for improving, developing and enriching human life. This theme acknowledges that the discipline of psychology is inextricably engaged with



the global and local communities in which we live, learn and practice”. As Rainer Silbereisen, IUPsyS President, states in the ICP 2012 Final Announcement “being set in such a vibrant context with such a wide variety of experiences to explore, the combination of a rich scientific programme with the possibility to visit areas such as Table Mountain, or even perhaps those further afield like the Cradle of Humankind, where the 2.3 million year-old remains of Australopithecus were discovered, is likely to mean that attending this ICP will be truly a once-in-a-lifetime opportunity”.

ICP 2012 is hosted by the National Research Foundation and the Psychological Society of



South Africa under the auspices of IUPsyS. In addition, most leading South African universities are ICP 2012 Academic Partners. Regional partners are the Botswana Association of Psychologists, the Mozambique Psychological Association, the Psychological Association of Namibia and the Zimbabwe Psychological Association.

### Preliminary Scientific Programme

The scientific programme will feature a range of cutting edge state-of-the-science lectures, distinguished keynote addresses, controversial debates, translational research lectures, as well as presentations by leaders in the various fields of psychology. Special activities will include focal country symposia and an exciting Emerging Psychologists' Program, Advanced Research Training Seminars (ARTS) for psychologists from economically developing countries and a series of pre-congress workshops dealing with current scientific issues. Over 300 leading figures in psychology have already confirmed their participation in the invited component of the scientific program. These include Toni Antonucci (life-span), Tomohide Atsumi (disaster), Soledad Ballesteros (aging), Oscar Barbarin (family), Reuven Bar-On (emotional social intelligence), Michael Billig (social), Erica Burman (critical psychology), Daniel Christie (peace psychology), Ghislaine Dehaene-Lambertz (cognitive), Keith Dobson (psychotherapy), Giorgia Doná (refugees), Pat Dudgeon (indigenous psychology), Paul Ekman (health psychology), Rocio Fernandez-Ballesteros (aging), Susan Gathercole (working memory), Nicola Gavey (gender), Daniel Gopher (human factors), Janet Helms (ethnicity/racism), Tor Hofgaard (primary care), John Hunsley (assessment), Cigdem Kagitcibasi (culture), Brigitte Khoury (clinical psychotherapy), Uichol Kim (cultural), Hugo Klappenbach (history), Elizabeth Loftus (false memory), Maria-Regina Maluf (education), Girishwar Misra (poverty & disadvantage), Maritza Montero (community), Bame Nsamenang (developmental), Thomas Oakland (education), Isaac Prilleltensky (community well-being), Mark Savickas (education), Mohamed Seedat (violence), Ralf Schwarzer (health psychology), Michael Rutter (child and

adolescent psychopathology), Martin Seligman (learned helplessness/positive psychology), Danny Wedding (clinical), and Barbara Wilson (neuropsychology/cognition).

Additional highlights of the scientific programme include the IUPsyS Presidential Address by Rainer Silbereisen titled *Social change and human development*, while his Presidential symposium topic is *Acculturation among diaspora immigrants*. IUPsyS Secretary-General, Pierre Ritchie, will convene a symposium dealing with *Underutilisation of important psychological knowledge*, featuring IUPsyS President Rainer Silbereisen, and Past Presidents Bruce Overmier, Michel Denis and Gery d'Ydewalle.

An innovative aspect of the Congress is the Change Fellowship Awards that will enable early career researchers to design and implement their own research programs that address the challenges and opportunities confronting children and youth developing in situations of social change and the particular cultural and economic situation in their countries. Change Fellowships are intended to provide applicants with an opportunity to demonstrate their research capabilities in a manner that will advance their careers and attract future opportunities for support. Seven awards are available and Change Fellows will be required to present their initial research results at ICP 2012. These awards are made possible by a major grant from the Jacobs Foundation, with additional support from the National Research Foundation in South Africa and IUPsyS. The support of the Jacobs Foundation for the controversial debates, lecture series in translational research and travel grants for young scientists is also acknowledged.

The Emerging Psychologists' Program will take place prior to ICP 2012 from 20-22 July 2012. A nested 3-day intensive training colloquium aimed at facilitating the interaction of leading emerging psychologists from across the world has been developed that will provide a formal site for North-South and South-North skills transfers to participants from among the leading available psychological scientists globally. It will also facilitate exchanges between young but potentially influential psychologists from around

the world, which is ultimately a key prerequisite for the development of a cutting-edge and globally relevant discipline committed to the service of humanity. The Call for Applications is on the Congress website and the deadline for the receipt of applications is 30 September 2011.

A program of scientific visits has been developed that includes the Universities of Cape Town, Stellenbosch and the Western Cape, the Medical Research Council, the Human Sciences Research Council, and the Phelophepa Healthcare Train.

### Topic Categories/Divisions

ICP 2012 has 46 topic categories that cater to all fields of psychology and cognate disciplines. International experts are included in the various topic committees that underpin the Scientific Program, instead of having an international advisory or honorary committee. The membership of topic committees is available on the Congress website.

### Abstract Submission

Abstract submission is now open and abstracts may be submitted for papers, symposia, interactive posters, and rapid communication posters online. When online submission is not possible the Congress Office may be contacted on [info@icp2012.com](mailto:info@icp2012.com). The following **important dates** pertain to abstract submission:

- 1 December 2011  
Deadline for abstract submission
- 1 March 2012  
Deadline for submission of rapid communication posters  
Notification regarding regular abstract submissions
- 1 April 2012  
Notification regarding rapid communication poster submissions

### Continuing Education Credits

The entire Scientific Programme, including the Pre-Congress Workshops, will enjoy Continuing Education (CE) credits where possible. This will enable psychologists and other professionals from various countries to keep abreast of their continuing education requirements. A list of these credits will be available on the Congress website. South African psychologists will, for example, be entitled to at least 45 CE Units, including 6 CE Units in ethics.

### Satellite Conferences, National Conferences and Events

The 21st International Conference of the International Association of Cross-Cultural Psychology (IACCP) will be held from 17 to 21 July 2012 in Stellenbosch, while the 5th International Conference on Teaching Psychology (ICOPE) will be held as a specific track during ICP 2012, as will the 70<sup>th</sup> Annual Conference of the International Council of Psychologists. In addition, the following South African organizations will subsume their national conferences as part of ICP 2012: the Psychological Society of South Africa (PsySSA) - 18th PsySSA South African Psychology Congress; the South African Clinical Neuropsychological Association



Members of the ICP2012 Executive Committee. From left, Basil Pillay, Fatima Seedat, Ann Watts, Kopano Ratele and Saths Cooper



(SACNA) - 13th Biennial SACNA Conference; the South African Aviation Medicine/Psychology Association (SAAsMA) - Biennial Conference of SAAsMA (previously SASAEM); and the Society for Industrial and Organizational Psychology of South Africa (SIOPSA) - Annual Conference. Symposia are being convened by the International Test Commission (ITC) and certain divisions of the International Association of Applied Psychology (IAAP).

## Registration

Development of the Congress registration fee structure involved careful consideration of and research into a number of factors, including purchasing power parity, GDP, the IUPsyS formulation for National Members' dues, as well as comparison with other congresses. As indicated on the Congress website, the fee structure is divided into High Income Countries, Middle Income Countries, All Other Countries, Full-time Students and Accompanying Persons. Registration will open on 1 July 2011 and the following **important deadlines** for the payment of registration fees should be noted:

- 1 December 2011  
1<sup>st</sup> deadline for reduced registration fee
- 1 February 2012  
2<sup>nd</sup> deadline for reduced registration fee
- 1 April 2012  
Deadline for reduced registration fee

## Exhibitors

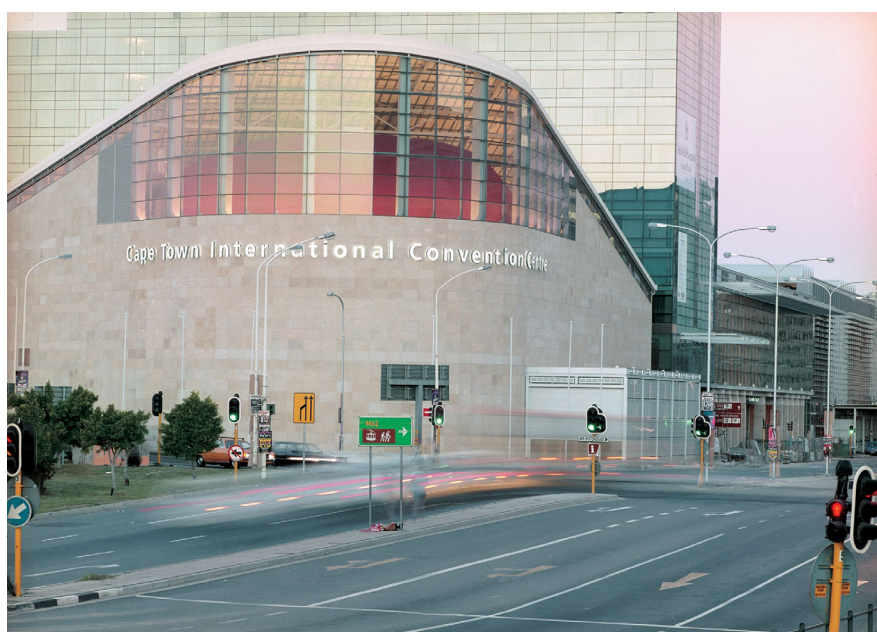
There will be a wide range of exhibits by leading publishing houses, technological innovators, international organizations in psychology, and products of interest to delegates in the CTICC Exhibition Area. Information for potential exhibitors is available on the Congress website.

## Venue

The host city, Cape Town, has been the recipient of many global accolades and destination awards.

These include being voted *Trip Advisor* Traveler's Choice Best Destination in the World for 2011, One of the World's Top 20 Cities by *Condé Nast Traveller* Readers' Travel Awards in September 2010, One of the World's Most Beautiful Cities by *Forbes.com* in February 2010, and Africa's Leading Destination by the *World Travel Awards* for the past six years.

The Congress will be held at the Cape Town International Convention Center (CTICC), an impressive modern structural design prominently located alongside the main highway into Cape Town on its northern foreshore. The CTICC is currently a finalist for the best congress center in the world and was awarded the Meeting Professionals International (MPI) Recognising Industry Success and Excellence (RISE) Award this year, which recognises leadership in innovation, influence, global transferability and impact on complete sustainability. The CTICC is only a 20-minute drive from the Cape Town International Airport and within walking distance of Cape Town's leading cultural attractions, recreational amenities, and shopping areas, including the internationally acclaimed Victoria and Alfred Waterfront. Table Mountain is on its doorstep and within an hour's travel are some of South Africa's leading tourist destinations, including Kirstenbosch Botanical Gardens, Table Mountain National Park, Robben Island, the Cape



Cape Town International Convention Centre

Winelands, and Cape Point. Energy saving devices and sound environmental practices have been incorporated into the CTICC, ensuring that the building conforms as closely as possible to a Green Building Rating system. In addition, the CTICC complies fully with international access norms as defined by the Americans Disabilities Act (ADA) and the South African National Building Regulations (NBR) standards, ensuring that this facility is an inclusive venue for both able-bodied and physically challenged delegates and visitors.

## Accommodation

Cape Town boasts a wide range of quality accommodation within the vicinity of the CTICC, as well as budget accommodation suitable for students. Careful consideration has been given to securing a selection of reasonably priced accommodation for Congress delegates.

## Travel

Most airline carriers fly to South Africa. Johannesburg is the main hub and there are regular daily connections to Cape Town, a 2-hour flight away. A number of international airlines also fly directly to Cape Town. Whether flying into Johannesburg, Durban (also a 2-hour flight away) or directly to Cape Town, there will be ICP

2012 Help Desks in the Arrivals Halls of these airports from 15-25 July 2012 for the convenience of Congress participants.

## Social Events and Tours

An exciting array of social events and tours has been developed for delegates and accompanying persons, that embraces the culture, history, wildlife, flora and fauna, and sights for which Cape Town and its surrounding areas are renowned. Notable are the Congress Opening Ceremony and Welcome Reception that will be held on 22 July 2012. In addition to selected addresses, the Opening Ceremony will feature a South African cultural extravaganza showcasing the best of the country's music, song and dance. The Welcome Reception thereafter will afford delegates an opportunity to sample special South African cuisine and wine, whilst connecting with colleagues from around the globe. The Closing Ceremony and Handover to the 31st ICP to be held in Yokohama, Japan in 2016 will take place on 27 July 2012.

South Africa boasts eight World Heritage sites, including the Cradle of Humankind, Robben Island (Cape Town) and the Cape Floral Kingdom/Table Mountain National Park (Cape Town). June to October is safari season in South Africa and the Kruger National Park

has the greatest variety of wildlife species on the African continent. South Africa is also ranked first in the world for its floral kingdom, whilst close to Cape Town is the longest scenic wine route in the world. For the more adventurous and sports enthusiasts activities such as diving with the great white sharks, bungee jumping, hang gliding, hiking, cycling along what are arguably some of the most scenic routes in the world, surfing the big waves at world renowned



Victoria and Alfred Waterfront, with Table Mountain behind

beaches, and playing golf on world class greens are also available. The FIFA Soccer World Cup was held in South Africa in 2010 and the Cape Town soccer stadium that was specially built for the event was the venue for a number of key matches. South Africa's hotels, game lodges and restaurants are frequent winners of top global awards, with Cape Town being a leading tourist, business, political and professional destination. Travel packages that should appeal to all tastes have been developed that include visits to these key attractions. Tours may be booked on the website or at the Tours and Travel Desk during the Congress.

In addition to the option of taking these tours, the Accompanying Persons' Programme will

include a free half-day tour of Cape Town, with the option of taking the cable car up Table Mountain (weather permitting), as well as attendance at the Congress Opening Ceremony and Welcome Reception, and Closing Ceremony.

The ICP 2012 team looks forward to welcoming you to South Africa and to your participation in what promises to be a stimulating, exciting and memorable Congress.

Please visit the Congress website ([www.icp2012.com](http://www.icp2012.com)) for the latest information on the Congress and address any queries to [info@icp2012.com](mailto:info@icp2012.com).





# Revision of World Health Organization's ICD-10 Mental and Behavioural Disorders

Geoffrey Reed, PhD Senior Project Officer, WHO

Pierre L-J Ritchie, PhD Secretary-General IUPsyS and Main Representative (Psychology) to WHO

## 1. Background

The Constitution of the World Health Organization (WHO) mandates the production of international classifications on health to provide a consensual, meaningful and useful framework which governments, providers and consumers can use as a common language. Internationally endorsed classifications facilitate the storage, retrieval, analysis, and interpretation of data. They also permit the comparison of data within populations over time and between populations at the same point in time as well as the compilation of nationally consistent data.

WHO carries out this mandate by developing and promoting classifications in the range of settings in the health field across the world. The primary type of classification is the "reference classifications" that include the International Classifications of Diseases (ICD), the International Classification of Functioning Disability and Health (ICF) and the International Classification of Health Interventions (ICHI).

## 2. The ICD and Mental Health, Psychology and IUPsyS

The International Classification of Disease (ICD) is the global standard for reporting and categorizing diseases, health-related conditions and external causes of disease and injury, and is used in the development of health programmes, prevention, reimbursement and treatment. Countries use it to compile basic health statistics and to monitor health spending, and individual practitioners and researchers use it to categorize disease and health status and to compare findings across countries.

The current ICD is version 10. It was adopted by the WHO in 1992 and began to be used by member countries in 1995 (the US is still using

ICD 9 codes, and anticipates moving to begin using ICD 10 codes in 2012). Changes since the 1990's in the landscape of global disease, in scientific developments, in advances in service delivery, and in health information systems require a revision of ICD. The major goals of the ICD10 revision are to improve clinical utility (e.g., to improve the ICD as a diagnostic tool), to render it appropriate to primary care settings, and to make it compatible with new health information system technology. It is envisaged that there will be three distinct versions of the new ICD-11: a succinct version for use in primary care, a detailed version for use in specialty settings and an advanced version for use in research.

WHO has established a number of Topic Advisory Groups (TAGs) to serve as the planning and coordinating advisory body in the update and revision process. These groups include TAGs for Dermatology, Ophthalmology, Neurology, Musculoskeletal, Rare Diseases, Internal Medicine, and Mental Health.

The Mental Health TAG is chaired by Dr. Steven Hyman (Harvard University, former NIH Director) and the Chief Editor (Program Manager) is Dr. Geoffrey Reed. Dr. Reed, who also serves as Senior Program Officer for the Revision of ICD-10 Mental and Behavioural Disorders, Department of Mental Health and Substance Abuse, WHO, is in this crucial position by secondment to WHO from the International Union of Psychological Science (IUPsyS), which is the single accredited psychology organization to the WHO mental health branch, and through financial support provided by the American Psychological Association (APA)<sup>1</sup>. As Senior Project Officer, Dr. Reed has primary

1. Other national and regional psychological associations that are members of IUPsyS are also contributing resources to this project.

responsibility for managing all of the activities described in this report.

### **3. Revision of ICD-10 Mental and Behavioural Disorders, Department of Mental Health and Substance Abuse, WHO**

The Revision of ICD-10 Mental and Behavioural Disorders continues to benefit from the advice of the TAG and a number of workgroups to be described below. In this report, we focus on 7 central areas of activity, each of which is managed by Dr. Reed. These are:

1. Clinical Utility as a Priority for the ICD Revision
2. Incorporating Classification of Mental and Behavioral Disorders into Primary Care
3. Overview of the structure and functioning of the advisory and working groups
4. WHO - global practitioner survey
5. Field Trials
6. Regional Meetings
7. Relational processes in ICD-11

#### **3.1 Clinical Utility as a Priority for the ICD Revision**

The ICD is an integral part of the efforts of the WHO Department of Mental Health and Substance Abuse to reduce the global burden of mental disorders. Because people are only likely to have access to the most appropriate mental health services when the conditions that define eligibility and treatment selection are supported by a precise, valid, and clinically useful classification system, WHO is emphasizing that the classification system should be applicable across a wide variety of health care settings—including primary care settings—by a range of health personnel.

Based on well-documented problems with the clinical utility of current diagnostic classification systems, WHO decided that improving clinical utility will be a major orienting principle of the current ICD-10 revision. Clinical utility is important to practitioners because it affects their

daily lives. Moreover, WHO views clinical utility as a global public health issue. This emphasis is described in a recent article published in *Professional Psychology: Research and Practice* (Reed, 2010). This article appeared as part of a Special Section on clinical utility and diagnostic classification.

#### **3.2 Incorporating Classification of Mental and Behavioral Disorders into Primary Care**

To reduce the disease burden of mental and behavioral disorders and address the enormous gap between those who need treatment and those who receive it, WHO believes it is important to be able to identify people who need mental health services in those settings where they are most likely to come into contact with the health care delivery system—that is, in primary care settings.

For ICD-10, where the classification system intended for use in a wide variety of primary care settings by health personnel who were not mental health specialists was published as a subsequent adaptation to the ICD-10. In contrast, for the ICD-11 the WHO Department of Mental Health and Substance Abuse is developing the classification intended for use in primary care settings *simultaneously* with the development of the mental health specialist version. Simultaneous development means that the needs, specificities, and presentations characteristic of primary care patients can shape the classification of mental disorders directly, rather than primary care settings having to use a system that is based on experience in mental health settings.

WHO has appointed a Primary Care Consultation Group, consisting of a mix of mental health and primary care professionals from across the globe, including substantial representation of low- and middle-income countries. The Primary Care Consultation Group has prepared a first draft of a primary care classification system for mental and behavioral disorders for ICD-11, which is currently undergoing a first review and comment by global experts in the area.

After the integration of expert comments, the next important step will be field-testing of the draft primary care classification system. Testing will particularly focus on the clinical utility of the draft system across a range of primary care settings and primary care personnel in both developed and developing countries. Testing will be carried out in two phases. During 2011 the initial draft will be tested and revised based on field study results. During 2012 the revised primary care system will be tested and then finalized to be released simultaneously with the main ICD-11 classification.

### 3.3 International Advisory Group and Working Groups

#### 3.3.1 Mental Health Topic Advisory Group

The International Advisory Group for the Revision of ICD-10 Mental and Behavioural Disorders (the TAG) is charged with assisting WHO with all phases of the revision. Multidisciplinary and regionally representative membership was a specific requirement in appointing the current Advisory Group. IUPsyS is represented on the Advisory Group by Dr. Ann Watts (South Africa), who is now Deputy Secretary General, IUPsyS. Advisory Group members Dr. Brigitte Khoury (Lebanon) and Dr. Maria Elena Medina-Mora (Mexico) are also psychologists.

#### 3.3.2 ID Revision Working Groups

Psychology is also well represented on the ICD Revision Working Groups that WHO has appointed. Specifically:

The Working Group on the Classification of Mental Disorders in Children and Adolescents includes psychologists Dr. John Lochman (US), and Dr. Malavika Kapur (India).

The Working Group on the Classification of Intellectual Disabilities includes psychologists Dr. Rune Simeonsson (US) and Dr. Leyla Akoury Dirani (Lebanon), as well as Professor Ruth Luckasson (US), who is a lawyer by training but is a Distinguished Professor in the Department of Educational Psychology at the University of New Mexico.

The Working Group on the Classification of Personality Disorders includes psychologists Dr. Roger Blashfield (US), and Dr. Michaela Swales (UK).

The Working Group on the Classification of Psychotic Disorders includes psychologists Dr. Philippa Garety (UK) and Dr. Michael Green (US).

The Working Group on the Classification of Substance Use Disorders includes psychologists Dr. Thomas Babor (US), Dr. Neo Morojole (South Africa) and Marina Piazza (Peru).

Each of these Working Groups is actively involved in generating material for the ICD-11, which will be circulated for review and comment upon completion and subsequently field tested. Additional Working Groups will be appointed during early 2011.

### 3.4 Global Practitioner Surveys

During 2010, WHO began to assess the views of “on-the-ground” practitioners about their experiences with the classification of mental and behavioral disorders. Practitioners’ views are particularly important, as one of WHO’s main goals for ICD-11 is to improve the classification’s clinical utility.

To date, WHO has worked with the World Psychiatric Association (WPA), and has conducted the most extensive international and multilingual survey of psychiatrists’ views and experiences with the classification of mental and behavioral disorders ever conducted. A main purpose of the survey was to assess practicing psychiatrists’ priorities for the development of ICD-11. To date, 54 WPA Member Societies from 51 countries have participated, including 30 low and middle-income countries, in more than 20 languages. The survey has been conducted primarily via the Internet, with minimal difficulty even in developing countries. To date, over 4000 psychiatrists have participated.

The survey focused on key practical and conceptual issues, such as the most important purpose of a classification, desired number of categories, desirability of a strict criteria-based approach in contrast to a more flexible one,



how to incorporate severity and disability, and cultural applicability. Respondents provided ratings of ease of use and goodness of fit for each diagnostic category they reported using at least once per week. Results of the global psychiatric survey are currently being written up for publication.

WHO began the survey with psychiatrists because WPA was particularly keen to launch it and because psychiatry has had a more developed infrastructure for participation in classification activities. At the same time, WHO has been clear throughout the revision process that psychiatrists are not the only constituency for the ICD and has also been eager to collect information about the perspectives and experiences of professionals from other disciplines.

### 3.4.1 Role for Psychology

WHO is now conducting an international and multilingual survey of psychologists' perspectives regarding mental disorders and priorities for the ICD revision in collaboration with IUPsyS and national psychological associations. Although the survey is quite similar to the psychiatric survey to allow comparability of data, a number of questions about the specific role of psychologist participants in diagnosis and classification have been added to encompass the considerably wider international variation in psychological practice as compared to that of psychiatry. It is expected that a similar number of psychology associations and individual psychologists will participate in the survey as participated in the survey of psychiatrists. APA was the first national psychology association to launch the survey, in December 2010; other psychological associations will begin the survey in 2011.

The data collected from this international survey will be jointly owned by the national association, WHO, and IUPsyS. When the data collection has been completed, WHO and IUPsyS will provide participating psychological associations with a database containing the data collected from its members. National psychology associations will be free to use these data in publications,

presentations, or other reports after WHO and IUPsyS have published the aggregate data. Publications of these data by WHO and IUPsyS will focus on regional or global aggregations of data and comparisons between countries. WHO and IUPsyS will clearly acknowledge the role of participating national psychology associations in any such publications.

### 3.5 Global Field Studies

During 2010, WHO has initiated a systematic program of global field studies as a basis for improving the clinical utility of the ICD-11 classification of mental and behavioral disorders.

Efforts during 2010 focused on formative field studies, undertaken early in the development process in order to inform decisions about the basic structure and content of the classification. To implement these field studies, WHO established a series of International Field Study Centers. WHO made special efforts to establish Field Study Centers in large low- and middle-income countries under the leadership of specific investigators who have a record of productive research and international collaboration. These include the following:

**Brazil:** Universidade Federal de São Paulo, São Paulo, Brazil; Dr. Jair de Jesus Mari, Director

**China:** Shanghai Mental Health Center, Shanghai, China; Dr. Zeping Xiao, Director

**India:** All India Institute of Medical Sciences, New Delhi, India; Dr. Pratap Sharan, Director

**Lebanon:** American University of Beirut, Beirut, Lebanon; Dr. Brigitte Khoury, Director (Field Study Centre for the Arab Region)

**Mexico:** National Institute of Psychiatry, Mexico, DF, Mexico; Dr. Maria-Elena Medina Mora

**Nigeria:** University of Idaban, Idaban, Nigeria; Dr. Oye Gureje, Director

Between them, five of these countries—Brazil, China, India, Mexico, and Nigeria—account for more than 43% of the world's population. (Note that although Lebanon is a small country, this Center is specifically intended as a regional one.) As noted above, Drs Khoury and Medina Mora are psychologists.

WHO has also established Centers in several high-income countries, with the understanding that WHO will not provide direct support for their activities. These include:

**Japan:** Tokyo Medical University, Tokyo, Japan; Dr. Toshimasa Maruta, Director

**Spain:** Universidad Autónoma de Madrid, Madrid, Spain; Dr. José Luís Ayuso-Mateos, Director

**USA:** University of Kansas, Lawrence, Kansas, USA; Dr. Michael C. Roberts, Director (a psychologist)

### 3.5.1 Specific Formative Field Studies Conducted

Formative field studies were conducted during 2010 to address two main questions:

1. How disorder categories should be organized for maximum clinical utility; and
2. What disorders, conditions, or problems should be included in a diagnostic system in order to facilitate appropriate identification and treatment of mental and behavioral disorders at each level of care.

Specific protocols were developed in consultation with the Field Study Center Directors to collect consistent data across countries and languages. Small awards were made to the Centers in Brazil, India, and Nigeria. The Centers in China, Mexico, and the high-income countries were able to support their own activities.

These protocols were administered through the International Field Study Centers detailed above. Implementing the studies through global Centers specifically focused on low- and middle-income countries has helped to ensure applicability global and cultural applicability of the results, as has administration in multiple languages including Chinese, Japanese, Portuguese, and Spanish in addition to English.

**3.5.1.1 Study A.** The first global study focused on clinicians' conceptualizations of the interrelationships among mental disorders categories using a paired comparisons methodology. Participants were 1371 psychiatrists and psychologists from 64

countries, representing all WHO regions. The study was administered via the Internet in either English or Spanish. Sixty mental disorder categories were used as stimuli, for a total of 1770 possible pairs. Each participant rated the similarity of 100 randomly selected pairs, and provided basic demographic and practice information.

Data were analyzed using Multidimensional scaling (MDS), a procedure that uses repetitive random sampling to calculate the perceptual distance of each stimulus (i.e., disorder label) from all others and to generate a conceptual map of the stimuli in Euclidean space based on knowledge of all distances. Results indicate a highly stable dimensional structure across clinicians, with no differences in basic dimensional structure between those who participated in English and those who did so in Spanish, according to country income status, according to geographic region, or between psychiatrists and psychologists.

Clinicians used three dimensions for determining the relatedness of mental disorder categories: 1) internalizing vs. externalizing; 2) developmental vs. acquired; and 3) 'neurotic' vs. organic. By plotting disorder categories according to these dimensions in 3-dimensional space, discrete clusters or groupings of disorders can be observed. In turn, these results will be used as part of the basis for the creation of the metastructure or architecture for the ICD-11 classification system. Results of this study are currently being written up for publication.

**3.5.1.2 Study B.** The second study investigates clinicians' working or 'folk' taxonomies of mental disorders, based on the idea that a classification that more closely resembles clinicians' taxonomies will be more intuitive and user-friendly, and therefore more clinically useful. The study has been administered in eight countries—Brazil, China, India, Japan, Mexico, Nigeria, Spain, and the US—in the local language of each country. At least 60 mental health professionals have participated in each country, including psychiatrists, psychologists, social workers, and psychiatric nurses. Participants were asked to sort 60 cards, each containing

the name of a mental disorder category, into groups based on their own perceptions of the relationships among them and the similarity of their treatment and management. Participants were then asked to aggregate these groupings into higher-order sets, and to disaggregate them into more specific ones, in order to examine the perceived hierarchical relationships among mental disorder categories. Clinicians were also asked to indicate which mental disorder categories they had never used in clinical practice, and which categories they believed should not be part of a classification system mental disorders.

Data collection for Study B is nearly complete. Multidimensional scaling (MDS) and other analytic techniques will be used to generate a map of mental disorders based on the frequency of their co-membership in clinicians' groupings. Clinicians' groupings will be compared with existing classification systems (ICD and DSM), and with current proposals for the classification architecture. Differences according to country, language, and profession will also be examined, and the results used in developing a clinically useful classification of mental disorders.

### 3.6 Regional Meetings

During 2010, WHO initiated a highly successful series of regional meetings for the purpose of developing recommendations to WHO related to the ICD revision based on the experience in those regions, and to assist WHO with developing a work plan for regional revision activities. WHO has particularly focused on low and middle income, non-English speaking countries, as these countries historically have much higher barriers to participation. Psychologists have participated in all of the regional meetings.

The specific purpose of the regional meetings was to provide recommendations to WHO regarding:

1. Specific changes that should be made to the classification;
2. How the other national or regional classifications—for example, the Chinese Classification of Mental Disorders, the Latin American Guide to Psychiatric Diagnosis—should be considered as a part of the ICD revision;

3. Areas in which additional information or data is needed, and specific methods for gathering it; and

4. How participation of regional mental health experts in the revision of the ICD mental and behavioral disorders classification should be structured and organized. This includes:

- a. Review of the relevant regional scientific literature;
- b. Identification, collection, and analysis of information about current use of mental disorders classification in the region, and the views of these systems held by regional health professionals; and
- c. Participation in formative and evaluative field studies developed by WHO.

The first regional meeting was held in São Paulo, Brazil in May 2010. The meeting involved experts from Brazil and other Latin American countries including Mexico, Peru, and Argentina.

The second meeting was held in St. Petersburg, Russian Federation in June. The meeting included experts from Russian-speaking countries including the Russian Federation, Belarus, and Ukraine.

The third meeting was held in Shanghai, People's Republic of China. A very important development for WHO was that, on the basis of this meeting, the country's mental health leadership agreed that they would collaborate with WHO in the development of the ICD-11 and would not engage in further development and promotion of the Chinese Classification of Mental Disorders (currently in its third version) unless it becomes clear at some point in the future that the ICD-11 will not meet China's needs.

During 2011, Regional Meetings are planned in Beirut, Lebanon (for the Arab Region) and Mexico, DF. Additional meetings in the African and South-East Asian Region are under discussion.

### 3.7 Relational Processes in ICD-11

During 2010, Dr. Reed also worked with an international group interested in improving the



conceptualization and integration of relational issues in the ICD-11 classification. This group is predominantly composed of psychologists, but also includes psychiatrists and other health professionals. (Psychologist Dr. Nadine Kaslow has been an active part of this effort.) The group has been working over the past several years with the collaboration and support of the Fetzer Foundation, but had not developed specific proposals for the revision of the ICD classification. Such an effort is complex because it involves issues that cut across different areas of the ICD classification. Although the phenomena of concern have important psychological and behavioral predictors and sequelae, they are not generally mental disorders *per se*.

Dr. Reed worked with this group and with the Fetzer Foundation to put together an international meeting on Relational Processes in ICD-11, held in Switzerland in late 2010. Areas of discussion at the meeting included: 1) partner maltreatment; 2) partner relational problems; 3) child maltreatment; and 4) parent-child relational

problems. A key goal of the meeting was to develop specific proposals for ICD-11 categories. For the most part, these proposals concern categories located in the ICD chapter on Factors Influencing Health Status and Health Services, but some also appear in the ICD chapters on Injuries and External Causes (e.g., in relation to maltreatment syndromes). The group expects to submit internationally vetted final proposals for consideration as part of the ICD revision by March, 2011. The group will also propose that there be links to these categories from relevant mental and behavioral disorders categories.

#### Reference

Reed, G.M. (2010). Toward ICD-11: Improving the clinical utility of WHO's international classification of mental disorders. *Professional Psychology: Research and Practice*, 41, 457-464.

Note: This article is based on the 2010 Annual Report prepared for funders of the IUPsyS contribution to the ICD project. Particular appreciation is conveyed to the American Psychological Association for a multi-year grant in support of the project.



## History and current status of the Interamerican Society of Psychology

**Maria Regina Maluf, President 2009-2011**



Maria Regina Maluf received her PhD in Psychology from the University of Leuven. She works as a professor at the Universidade de São Paulo, Brazil. She is the president of the Interamerican Society of Psychology (2009-2011). Her research

focuses primarily on literacy teaching, sources of difficulty in learning to read and instruction that facilitate this process mainly for children endangered by poverty.

In 2011 the Interamerican Society of Psychology (SIP in Spanish, Portuguese and French: Sociedad Interamericana de Psicología, Sociedade Interamericana de Psicologia, Société Interaméricaine de Psychologie) celebrates its 60th birthday.

The Interamerican Society of Psychology (SIP) was founded by a group of behavioral scientists on December 17, 1951, in Mexico City, during the Congress of the World Federation of Mental Health. The first officers were Eduardo Krapf (Argentina), Werner Wolff (USA) and Oswaldo Robles (Mexico).

SIP is organized as a nonprofit, scientific and professional organization, serving psychologists in the Americas and internationally. The purpose of this Society is: "(1) to foster scientific and professional collaboration among persons concerned with psychology and related fields in the countries of North America,

Central America, the Caribbean, and South America and (2) to aid in the development of psychology as a science and as a profession in all of the countries of the Americas" (article of SIP Incorporation as International Nonprofit Corporation, 1999).

The Society also aims to further international understanding by using a broader conceptualization of cultural differences and communicating across national boundaries. It strives to contribute to international understanding by fostering learning about cultural differences and encouraging its members to interact across national boundaries.

To achieve its objectives, the Society adopted as official languages the four most spoken languages in the Americas, namely: Spanish, Portuguese, English and French. These four languages are accepted in all of the SIP's activities, e. g., the Interamerican Congress of Psychology (held in odd years), the Regional Conference (carried out in even years), the Interamerican Journal of Psychology published three times a year ([www.psycorip.org](http://www.psycorip.org)), and the Newsletter of the Society ([www.sipsych.org](http://www.sipsych.org)).



Congreso Regional de SIP\_Asunción, Paraguay, 2010 - Ouverture

The Interamerican Journal of Psychology has been published since 1967; its first editor was Carl F. Hereford, 1967-1970. During the past eight years the editor of the journal has been Silvia H. Koller and the current editor is Edil Torres-Rivera. The editorial policy reflects the developments occurring in psychology in the continent, both from theoretical and applied professional perspectives; in doing this the journal aims to promote communication and cooperation among psychologists from the different countries of the Americas. All active members of SIP receive the Journal without additional cost.

SIP membership is open to psychologists and other behavioral and social scientists interested in psychology and/or culture of the Americas. It is also open to students enrolled in a graduate or undergraduate psychology program or related field. The officers of the Society can be elected or appointed. The elected officers are the President-Elect, the President, the Past President, the Treasurer, the Vice-President for Canada and the United States, the Vice-President for South America, and the Vice-President for Mexico, Central America and the Caribbean. The appointed officers are the Executive Secretary for Canada and the United States, the Executive Secretary for South America, the Executive

Secretary for Mexico, Central America and the Caribbean, and the Secretary General.

SIP has a network of National Representatives from the different countries in the Americas who serve as a liaison between their countries and the Central office. SIP sponsors work groups, from different areas within the discipline of psychology, whose members work together to exchange information and generate common projects. In 2011 these task forces address psychology fields such as environmental, community, education, ethics, history, organizational, health, violence. One of these working groups is students, who have become very active in recent years.

Every two years SIP recognizes two psychologists with the Interamerican Psychology Award who have greatly contributed to the development of psychology as a science and as a profession in the Americas: one English or French speaking and one Spanish or Portuguese speaking. SIP also awards two Interamerican Student Prizes for the best graduate and undergraduate papers submitted to the committee every two years.

The Interamerican Congress of Psychology, sponsored by SIP every two years, has been promoting exchanges and obtaining an overview of psychology in the countries of the Americas. For many psychologists in Latin America, SIP's Congress has become their major international conference focusing on all areas of psychology.

The XXXIII Congress will be held in the city of Medellin, Colombia on June 26-30, 2011 and the theme is: "For the health of the people: Psychology Committed to Social Transformation." We consider that it is an opportunity to develop scientific and professional relationships, to learn about and to present research, programs of intervention and other services of relevance to psychology in the Americas, and to come to know



IUPsyS and Brazilian Colleagues, SIP's members: Merry Bullock, Maria Cristina Ferreira, Rainer K Silbereisen, Silvia Koller, Jairo Borges



the richness and cultural diversity of the host country.

SIP has been active for 60 years and is definitely the best known psychology society in Latin America. It gathers together psychologists from throughout the American Continent to its Congress held every two years. Three of these Congresses took place in the US (1955, Texas; 1964 and 1976, Miami). All the others, out of 32, took place in Latin American countries and played an important role in the development of psychology in these countries (Dominican Republic, Chile, Argentina, Mexico, Brazil, Costa Rica, Puerto Rico, Ecuador, Venezuela, Cuba, Uruguay, Panama, Colombia and Guatemala). It is easy to understand the relevance of these meetings for the development of psychology in Latin America during these 60 years. They contributed to the dissemination of knowledge, the exchanges and partnerships, the improvement of research, and the training of psychologists.

In my view, psychology in Latin American countries continues to grow and is seen as of great regional importance, especially during the past 15 years. This process of growing and acquiring regional importance is occurring particularly in Brazil, Mexico, Colombia, Chile, Argentina and other countries of Latin America. Nevertheless, psychology in Latin American countries is not known enough as we can conclude from international psychology data.

International dissemination of research in Latin American countries is rather precarious. This is a serious issue since science is international and psychology is a science. Researchers and Latin American associations in psychology are creating networks of collaboration among individuals and organizations that have similar interests. Councils of psychology, trade unions, as well as scientific associations in psychology (both general and specific fields) are becoming more

and more organized throughout Latin America, and in this manner they are encouraging the progress of the discipline. National and Regional Congresses and similar events are being held more frequently as a form of cooperative exchanges. Students from Latin American countries where psychology is less developed are taking graduate studies (master and doctorate) in other countries of Latin America, where psychology is more advanced. Many look for programs offered by European Universities, in countries such as Portugal and Spain, where they can work in Portuguese or Spanish. Important initiatives are taking place to create peer-reviewed journals in psychology in order to disseminate their research in Portuguese and Spanish. I would mention at least three databases which I consider the most important in Latin America: Redalyc (Red de Revistas Científicas de America Latina y el Caribe, España y Portugal - [www.redalyc.com](http://www.redalyc.com)), Scielo (Scientific Electronic Library Online - [www.scielo.org](http://www.scielo.org)), BVS (Biblioteca Virtual em Saúde - [www.bvs-psi.org.br](http://www.bvs-psi.org.br); <http://www.psi.bvs.br/php/index.php>; <http://regional.bvsalud.org/apps/mapbvs/?lang=pt>).

Psychology in Latin America is developing rapidly and is focused on individual and group behavior in its cultural and social context. It aims at investigating issues relevant for social development. We are not as interested as in the past in replicating research designed for other



Congreso Regional de SIP\_Asunción, Paraguay, 2010

socio-cultural realities. I would say that there are many researchers who innovate and create new concepts and procedures taking into account basic principles of scientific research. Some of them seem to care more about the rigor of method in their research than about the social relevance of their work. At the same time we can find psychologists who are very concerned about social relevance but not concerned enough about the rigor of methods and procedures.

The development of Latin American psychology is still little known in other areas of the world. From my point of view it appears as if a Latin American psychology is being created that is not part of "international psychology." This Latin American psychology aims at giving valid answers to social and individual needs of people from Latin American countries. This is a recurring theme in presentations and debates among Latin American psychologists.

Some psychologists describe the psychology outside the US as Rest-Of-the-World Psychology (ROW), or as Psychology from the Majority World. In my view Psychology in Latin American countries can be called "native", since it is focused on the social, human, and political reality of Latin American countries. Some describe this ongoing process in these countries as "indigenization".

The manner of development of psychology in Latin American countries can be seen as

challenging the ruling paradigms of modernity which presumed order and stability of the world. It trusts new epistemological and societal dimensions that are emerging (I borrow this concept from Boaventura de Souza Santos' writings, 1988, 1989, 2000). We are looking for a psychology that opposes all forms of accumulated oppression and social exclusion, a psychology which provides a new emancipatory horizon that establishes links between epistemological and sociological truths and states that knowledge can be objective but is not neutral.

I emphasize that linguistic similarity, in addition to the similarities in social, cultural, and political realities, facilitates the creation of forms of exchange and collaboration. Language is not the only factor to explain this process but it is definitely one of them. I believe that a major challenge that we face today is the acceptance of this unique opportunity for dialogue between "international psychology" and "psychology that is being constructed in Latin American countries".

Finally I would like to say that it is a pleasure to state that SIP is an affiliate member of the International Union of Psychological Science and also has collaborative relationships with other international societies of psychology that foster mutual interest in the development and application of psychology.



SIP members and IUPsyS officers after IUPsyS breakfast during the XXXII SIP's Congress, Guatemala 2009

# Psychology as a Core Science, Technology, Engineering, and Mathematics (STEM) Discipline

## Report of the American Psychological Association 2009 Presidential Task Force On the Future of Psychology as a STEM Discipline, June 2010

**James H. Bray, PhD, 2009 APA President**

Task Force Members: John F. Dovidio, PhD, Yale University, *Chair*; Francis T. Durso, PhD, Georgia Institute of Technology; David J. Francis, PhD, University of Houston; David Klahr, PhD, Carnegie Mellon University; Jennifer J. Manly, PhD, Columbia University Medical Center; Valerie F. Reyna, PhD, Cornell University  
APA Staff Liaisons: Cynthia D. Belar, PhD, Education Directorate; Steven J. Breckler, PhD, Science Directorate; Howard S. Kurtzman, PhD, Science Directorate; Rena F. Subotnik, PhD, Education Directorate.

### Executive Summary

Psychological knowledge is essential to scientific and technological innovation.

Technology requires the use of human operators, and understanding human capacities and limits is essential for implementing technological advances. Nevertheless, psychology is often excluded from the list of core disciplines responsible for scientific and technological progress – the STEM disciplines of science, technology, engineering, and mathematics.

The goal of this report is to review the current status of psychology as a STEM discipline, articulate the problem of inconsistent recognition of psychology as a core STEM discipline, provide a rationale for consistent recognition of psychology as a STEM discipline, and recommend specific actions to achieve this goal.

STEM initiatives in education and training enhance human capital by providing:

- Scientists and engineers who continue the research and development that is central to the economic growth of our country;
- Technologically proficient workers who are able to keep pace with rapidly developing scientific and engineering innovations; and
- Scientifically literate voters and citizens who make intelligent decisions about public policy and who understand the world around them.

Psychology is a core STEM discipline because of its direct scientific and technological innovations, as well as its indirect contributions to education and learning in science and technology. The achievements of psychological science include:

- Designing new technologies, including airplane cockpit displays, air traffic control digital communications systems, the computer mouse and other computer interfaces, anesthesiology displays, and redesigning everyday tools, such as the toothbrush, for greater effectiveness;
- Promoting public safety with innovations such as the centered high-mounted brake light, which has been mandated on all passenger cars made since 1985 due to its life-saving effects;
- Improving public health with basic and applied research leading to effective smoking cessation interventions, techniques for improving medication adherence, and activities to maintain cognitive vitality in aging;
- Introducing new statistical techniques that are widely used in other fields, contribute to applied mathematics, and advance understanding of complex social behavior and decision-making; and
- Developing educational techniques that facilitate students' mathematical and scientific learning and that help people address everyday problems by enhancing analytical skills, scientific literacy, and problem-solving strategies.



Technological solutions to large-scale problems routinely fail when they do not consider how people interact and behave in different contexts. The failures can be dramatic as with Three-Mile Island, Chernobyl, and the recent oil spill from the off-shore platform in the Gulf of Mexico. Even when projects do not fail outright, quality, productivity, and efficiency can often be substantially improved by considering human capacities and behavior.

Nevertheless, psychology is not consistently recognized as a STEM discipline, and psychologists are often ineligible for STEM funding that provides support for education, training, and research. Consistent recognition of psychology as a core STEM discipline would:

- Include a critical component – the human being – within scientific and technological
- solutions to pressing questions of national interest;
- Acknowledge the past success of psychological science in providing important
- breakthroughs in critical problems of public health, public safety, education and learning, and national security; and
- Capitalize on a large and diverse source of human talent that can contribute directly to national technological and scientific achievements.

The Task Force offers specific recommendations for achieving consistent inclusion of psychology

as a STEM discipline and also identifies specific initiatives the American Psychological Association can take to facilitate the recognition of psychology as a core STEM discipline. The underlying goals for all of the recommendations are to:

- Enhance psychology's prominence as a core STEM discipline.
- Improve public understanding of the scientific basis for psychology.
- Increase, through pedagogic collaboration and scholarly engagement, psychology's involvement with other STEM disciplines.
- Expand educational resources and opportunities in psychological science.

Promote the applications of psychological science to daily living.

Without deep consideration of human abilities and behavior, the benefits of technology and science are compromised. Thus, consistent recognition of psychology as a core STEM discipline and inclusion in STEM funding and initiatives are essential for achieving the goals of STEM initiatives and for ensuring States into the future.

The full APA report can be found at:

<http://www.apa.org/science/about/psa/2010/08/stem-report.pdf>