## The Value of an Academic Appointment or Department of Child and Adolescent Psychiatry

Within the Union of European Medical Specialists (UEMS), Child and Adolescent Psychiatry (CAP) is a separate specialty from (Adult) Psychiatry. Similarly, the academic European Society for Child and Adolescent Psychiatry (ESCAP) is a separate organisation in its own right. Although there is fundamental common ground between adult-centred and youth-centred approaches to psychiatric research and practice, important differences exist.

This is important not just for clinical practice but for research and teaching too. CAP uses developmentally oriented research designs, tools and conceptual frameworks compared with adult practice. Significant advances in CAP's academic practice are now published in journals or presented at conferences specifically concerned with child and adolescent psychiatry and psychology. Grants for research often come from different sources of funding than adult-centred psychiatry.

There are comparable issues when teaching is considered. CAP addresses different conditions in different contexts such as families of origin and schools. It necessarily involves appreciation of a developmental dimension and a family context. It uses multimodal treatments and applies these primarily in an out-patient setting.

From the point of view of CAP, academic leadership is important for maintaining high standards of academic and clinical practice with a bio-psycho-social practice in mind. The training of specialists similarly needs to be as modern as possible and based on a spirit of enquiry which encourages lifelong learning in the specialty. An academic post or department with knowledge in depth, research activity, and international links is crucial in this respect. It should be headed by a full professor.

Normal professional clinical activities such as using structured assessments, selecting evidence-based treatments or carrying out audit in order to provide quality assurance need academic input. That is alongside the need to advance the subject of CAP through research and teaching at all professional levels.

Many of the issues central to CAP overlap with paediatrics and general practice. This is particularly true for undergraduate teaching and postgraduate training. Of note are

- the skills of talking to children of various ages
- similarly, the ability to talk with several family members in a single interview
- taking a view of the child in the context of his or her family
- the practice of working mainly within a multidisciplinary team
- considering the aims of a medical intervention from the potentially disparate views of what parents, young people, referrers and clinicians want
- the integration of biological, psychological and social contributions to a clinical problem and its resolution.

There are also joint areas of research interest with psychiatry, paediatrics, ,community medicine and general practice especially in early psychosis, psychosomatics, child neuropsychiatry, epidemiology, and prevention.

With this in mind, the development of university posts and departments in child and adolescent psychiatry is essential, not simply to develop and maintain high standards in the teaching, research and practice of CAP but to contribute to the development of other areas within medicine. Although free-standing, autonomous academic departments of CAP should be the ultimate aim within a university, it may also be appropriate to grow such departments by creating senior academic posts in CAP within existing departments of paediatrics or general practice as well as within psychiatry.

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