

第 103 回日本精神神経学会総会

シ
ン
ポ
ジ
ウ
ム

Child and Adolescent Psychiatric Training —The American Model—

Kusaka Yuko (private practice)

In the United States child and adolescent psychiatrists are expected to apply biopsychosocial knowledge in performing a comprehensive diagnostic examination of a child/adolescent, and design a treatment plan that pays attention to the physical, genetic, developmental, emotional, cognitive, educational, family, peer, and social components. Treatment plan may involve individual, group, or family psychotherapy; medications; consultation with other physicians and professionals from schools, juvenile courts, social agencies, and community organizations.

The training of child and adolescent psychiatrists requires four years of medical school, another three years of accredited residency training in medicine, neurology, and general psychiatry, then additional two years of training in an accredited child and adolescent psychiatry program. The accreditation is given by the Accreditation Council for Graduate Medical Education (ACGME), which assures that the training program meets certain standard.

During child and adolescent psychiatric training, the trainee acquires knowledge of normal child development, psychopathology, and treat-

ment. Special importance is given to disorders that appear in childhood, such as pervasive developmental disorder, attention-deficit hyperactivity disorder, learning disabilities, mental retardation, mood disorders, anxiety disorders, drug dependency, and conduct disorder. Having completed this training and successfully passing the certification examination in general psychiatry given by the American Board of Psychiatry and Neurology (ABPN), he/she is eligible to take the additional certification examination in the subspecialty of child and adolescent psychiatry, which assures that he/she meets high medical standard.

With some 10 million American youths suffering from mental, behavioral, or developmental disorders, and approximately 6,000 board certified child and adolescent psychiatrists nationwide, there is a serious shortage of child and adolescent psychiatrists. This ratio is not expected to change radically in the near future. The child and adolescent psychiatrist, is, therefore, expected to take an even more active role in collaborating with other professionals to meet the needs of the community.