

## Editorial

## Advancing Collaboration of the East and West: Special Issues for the JSTP, WPATPS, and WACP Joint Meeting in Kamakura, April 2007

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**THE OCTOBER 2008** and January 2009 issues of *The World Cultural Psychiatry Research Review* are dedicated to the transcultural psychiatry meeting, which was held in Kamakura, Japan from the 27<sup>th</sup> to the 29<sup>th</sup> of April, 2007. It was a joint conference among the Japanese Society of Transcultural Psychiatry (JSTP), the Transcultural Psychiatry Section of the WPA (WPATPS), and the World Association of Cultural Psychiatry (WACP). I presided over the conference as the chair of the JSTP. As indicated in Table 1, 208 people from 21 different countries participated in the conference. It consisted of 3 plenary sessions, 3 lectures, 28 symposia, 3 movie sessions, 21 poster sessions, and 1 public lecture. The conference center was located on top of a hill which offered a beautiful view of Mt. Fuji. As well as enjoying the various sessions, participants took advantage of the good weather by taking scenic excursions to the ancient capital of Kamakura, also known as Little Kyoto.

**Table 1** Participants in the Kamakura Joint Meeting

Countries	#	Countries	#
Andorra	2	Nepal	1
Australia	3	Netherland	1
Belgium	2	New Zealand	4
Canada	14	Peru	1
China	4	Philippines	1
Finland	1	Spain	2
France	3	Sweden	1
Germany	1	Switzerland	1
Japan	127	UK	4
Korea	9	USA	25
Lithuania	1		
<b>Total</b>			<b>208</b>

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The main theme of the conference was “The New Era of Transcultural Psychiatry: Advancing Collaboration of the East and West”. This theme materialized through the active discussions and exchanges of friendship that took place among the participants. We hope to relate these encouraging interactions through the feature articles.

The feature articles focus on lectures given by Asian presenters, with a particular emphasis on the Japanese presentations. I hope these articles will help to improve the understanding of the present state of transcultural psychiatry in Japan. The topics encompass psychiatry, psychology, social welfare, and labor issues; the reason for this interdisciplinary thematic variety can be explained by discussing the JSTP.

The Japanese Society of Social Psychiatry has been in existence since the 1960's, however the JSTP was not founded until 1993. As of the end of 2007, the number of non-Japanese living in Japan, including immigrants, refugees, and overseas workers amounts to 1.69% of the national population. Compared with European countries, the U.S.A., or Canada, the ethnic minority population is extremely small. Consequently, there were very few Japanese psychiatrists interested in transcultural psychiatry, and those who were interested were regarded as peculiar folk engaged in “exotic” research. The JSTP was founded in 1993 by a group of psychiatrists who had predominantly studied abroad. They were exposed to culturally diverse societies as well as the concept of multiculturalism in Europe and North America. They felt that spreading the notion of transcultural psychiatry in Japan would be beneficial and would cater to the future needs of the nation. Prior to the inception of the JSTP, many of those who worked in the fields of psychology, education, social work and nursing were interested in the mental health care practiced in multicultural societies. However, there were no academic or professional communities that offered opportunities for their training, exchanging of ideas, or research. To meet these needs, the JSTP has been holding annual meetings and workshops to educate the general public and trained professionals alike, on transcultural psychiatry ever since its inception. It has grown to become an interdisciplinary organization with a membership of over 400 people, a large number of which are not physicians.

The JSTP ventures beyond typical psychiatric themes; it has been concerned with indigenous therapies of Japan, as well as medical anthropology, ethnology, and spiritual studies. For example, one of the feature articles discusses Naikan Therapy in this issue. The JSTP also covers issues surrounding ethnic minority groups in Japan. Another feature article in this issue discusses the situation of Japanese-Brazilians living in Japan. The JSTP also supports research on the mental health of Japanese business people, scholars and students living overseas. For example, this issue contains articles on Japanese living in Washington D.C., on mental health care given to Japanese living in New York after 9/11, and on the Japanese internment during WWII in North America.

The Japanese Ministry of Foreign Affairs and the JSTP collaborate on various projects concerned with administering mental health care to Japanese citizens living overseas. In addition, domestic issues such as pharmacotherapy and labor problems are discussed in this issue (cf. papers written by Kurabayashi, Murakami, Noguchi, Ishikawa). Another theme that is dealt with is educational exchange with other Asian countries. There is an article discussing an exchange between young psychiatrists from Japan and their counterparts from Korea.

The day before the World Congress of Psychiatry commenced in Yokohama in 2002, the JSTP and the WPATPS held a joint international conference on transcultural psychiatry. The 2007 Kamakura conference was the second such international meeting. Through these opportunities for dialogue, the JSTP members have been able to contribute to an international exchange of ideas on transcultural psychiatry.

Transcultural psychiatry has yet to become a mainstream branch of psychiatry in Japan. However, there is no question that Japan is turning into a multicultural society due to the advent of globalization. In order to be prepared for this coming change, the JSTP has a duty to educate Japanese society about transcultural psychiatry.

I would like our readers to view these feature articles as testament to the state of transcultural psychiatry in a Japan caught in the currents of change.

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