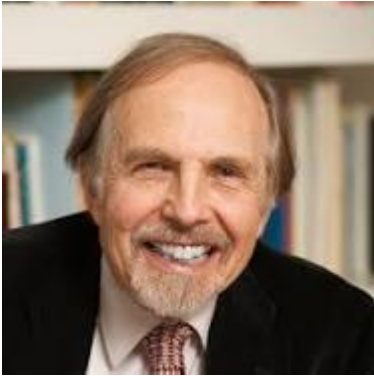


DPS' Årsmøde 2019

– årets internationale gæst



Lecture for the Danish Psychiatric Association's Annual Meeting,

14th of March 2019

ABSTRACT

“The Tail Wagging the Dog: How Global Mental Health and Cultural, Consultation, and Geriatric Psychiatry will Save Psychiatry from Itself”

By Arthur Kleinman

Psychiatry is in trouble. Few findings in biological psychiatry over the last three decades have significant implications for current clinical practice. Community, cultural, and consultation psychiatry have received little in the way of resources or academic development. Psychotherapy has been transferred from psychiatry to psychology and social work. Medical students interested in neuroscience are much more likely to go into neurology than psychiatry.

For these and other reasons the future of psychiatry is cloudy, paradoxically, at the same moment that global mental health is receiving huge attention around the world and is in the process of forming a moral movement similar to the HIV/AIDS movement two decades ago. It is those components of contemporary psychiatry that have received little support and hence have become marginal to the discipline that will save psychiatry in the future.

Global health will make psychiatrists increasingly relevant, albeit they will have to learn to work in teams and task-share. Consultation psychiatry brings psychiatry smack into the crisis of care giving in primary care and medical specialties and could make psychiatry much more relevant to the current efforts at humanizing medicine and improving the quality of care. Cultural psychiatry in an era of vast migrations and immigration crises makes psychiatry central to issues of refugee trauma and the problems of multi-ethnic societies.

By 2050, Japan, China, Korea, the United States, and Western European societies will experience an aging phenomenon unlike any seen before on our planet. Between 25 and 40% of the populations of societies will be over 65 years of age and the number of people over 60 will be greater than the number of people under 18 years of age. This demographic shift has profound significance for Alzheimer's disease and other dementias. Again, a minor branch of psychiatry, this time geriatric psychiatry, will keep psychiatry oriented to this key development.

What will be the consequence for psychiatry itself as the tail wags the dog?