collaboration activities that have been done will be discussed for building options for future collaborations.

**YW 3-2**

**Various views and approaches toward severe behavior disorder in Asian countries**

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The history of intervention in Japan for the handicapped, especially for the severe motor and intellectual disabilities (SMID) is not so long. At the end of the World War II in which the weak were abandoned with justification of the plan for enriching the nation, we had the first ward for the SMID in Japan at last in the 1960’s, with the help of rapid economic growth. On the other hand, there were a group of SMID people left, who had many difficulties in having standard care for SMID because of their extremely severe behavior disorder. They are so called ‘moving SMID’, in contrast to the most SMID who haven’t got the skills of walking and moving. In 1972, The Hospital Hizen Psychiatric Center has established the first ward for the ‘moving SMID’ in Japan, and started to struggle and pioneer intervention for them. They have many severe behavior problems such as pica, self-inflicted injury, heavy harm for others, painting excrement, panic, impetuous behavior, and also silent body symptom such as severe infection, ileus and so on. In the present, our hospital continues to intervene for the most severe behavior disorder of ‘moving SMID’, using basic pharmacotherapy and behavior therapy approach adapted for individual patient’s level. In this presentation, we will report our daily clinical intervention, the actual care and issues of this field in Japan, and want to share how those efforts have been carried on in other Asian countries.

**YW 3-3**

**Collaboration of young psychiatrists in Korea**

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Collaboration of Young Psychiatrists has some difficulties in Korea. Nevertheless, young psychiatrists are sharing concern about mental health problems in Korea such as Stiga of Psychiatric patients, social issue of Psychiatry in Korea. We have the community called Korean Young Psychiatrists Organization. Under the community, we had a small meeting about community mental health and psychiatric problems of multicultural family for 2 years. And it is good experience to all of the members. In this session I will share the experience about the small meeting. And I will tell more about the problems of young psychiatrists’ collaboration and the future of young psychiatrists’ collaboration in Korea.

**YW 3-4**

**Networking between young psychiatrists: The Malaysian experience**

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Malaysia has around 224 psychiatrists for a population of nearly 29 million people. This equates to a ratio of 1:121 000 psychiatrists per population compared to the recommended ratio of 1:50 000 by World Health Organization (WHO). Close to a third completed training since 2006 after the introduction of the Conjoint Board Committee for Psychiatry Postgraduate Training in 2003. This new development in psychiatry training enabled the pooling of limited teaching and training resources between the three major universities that confer the Clinical Masters qualifications certificates, an exit examination to become a registered psychiatrist in Malaysia. The majority of these new psychiatrists, otherwise known as young psychiatrist (YP) or the recently renamed early career psychiatrist (ECP) are attached with the Ministry of Health and therefore are posted to various parts of Malaysia. These placements can be either a rural or urban centre in any of the 13 states or three federal territories that make up Malaysia. At times, these YPs have to work in isolation with minimal contact depending on where they are placed. With these limitations and issues in mind, it is important therefore to establish networking between the YPs for peer support, ongoing mentoring and continued medical education. The Malaysian Psychiatric Association (MPA), the main organization representing psychiatrists in Malaysia, noted these concerns and formed the YP chapter of MPA in 2004. The main objectives were to provide networking, support and continued mentorship and education early in the career of a psychiatrist. Since 2010, there have been renewed efforts by the YPs in networking through non-conventional means such as the use of the internet, social media and...