Data Trends

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A letter to the editor of Psychiatric Services (vol. 51, no. 2) by Dean X. Parmelee, professor of psychiatry and pediatrics at Virginia Commonwealth University, comments on an article by Soltys, et al., that appeared in the February, 2000 issue (vol. 50, no. 12) of the journal. In their article, "Child psychiatrists as leaders in public mental health systems: Two surveys of state mental health departments," Soltys and colleagues advocate for increased leadership roles by child psychiatrists in mental health administration, particularly at the state level, and provide some thoughtful suggestions for developing such skills and expertise (e.g., through enhanced medical school curricula and residency rotations in public child psychiatry programs). To this end, the "ideal child psychiatrist" would be skilled at each level of service to children and families, i.e., continuum of care, policy, and clinical practice.

In his letter, Parmelee agrees that psychiatric training programs that include community-based, system of care services would benefit children's mental health service systems at both the clinical and policymaking levels. According to Parmalee, however, the challenge will not merely entail incorporating systems of care research into medical training curricula, but more importantly, to "shift from teaching the psychopathology-focused perspective on a child and family to a perspective that emphasizes and builds on their strengths." Combined, Soltys et al. and Parmelee make progress toward further collaboration between professionals involved in systems of care, psychiatric medical education, policy, and practice.

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