

AEPEA Belgium

The Belgian section of the AEPEA has arisen from a coordination group which met regularly since 2006 to set up and maintain functional links between several scientific, professional and coordination and training associations involved in the field of the child and adolescent mental health in French-speaking Belgium. Further information about our section can be found on the web-site www.fpea.be, a network site set up by the initiative of the APPIJF (Association of the French-speaking child and adolescent psychiatrists).

Members of our section are individuals or associations and institutions delivering services in the field of child and adolescent mental health care. AEPEA Belgium works as contact group coordinated by the Belgian members of the board of the AEPEA, presently represented by Prof. Dominique Charlier and D^r. Jean-Paul Matot (who is also secretary of the board of the AEPEA). The section meets at least once a year.

The institutional members are :

- The Association of the French-speaking child and adolescent Psychiatrists (APPIJF) ;
 - The Belgian French-speaking Society for Psychiatry and Allied Disciplines in Childhood and Adolescence ;
 - The Belgian and Luxembourg WAIHM (World Association for Infant Mental Health) ;
 - The child and adolescent training of the IFISAM (Institute of Training for Interventions in Mental health) ;
 - The child and adolescent Psychiatric Department of the Academic Hospital Saint Luc (Brussels) ;
 - The child and adolescent Psychiatric Department of the Academic Hospital Queen Fabiola (Brussels) ;
 - The Pediatric Medical Center Clairs Vallons (Ottignies)
 - The Orthogenic Center (Marcinelles)
- The section also has individual members.

Objective of our work

A psychopathological perspective requires theoretical and clinical models allowing us to consider the emotional, cognitive, relational and identity dimensions, both conscious and unconscious, which are involved in the normal and pathological human functioning. Among these models, psychoanalysis occupies a very important place in its effort to conceptualize the links between conscious and unconscious psychic processes, as well as expressing the way the thinking processes which are considered as pathways of symbolization of experience and anchors at the same time in the body and in the human link, work.

This position requires three remarks. In the first place, the psychoanalytical models can be neither exhaustive or exclusive, they have to find ways to communicate with other models of human development and of psychic care, without claiming to annex them, but by trying to develop complementary positions in the respect for the underlying epistemology. Secondly, all these models, psychoanalytic or not, must be able to evolve, through the confrontation with their clinical limits, and with the advances of other fields of knowledge. Finally, these models have to take into account the evolutions of the social organizations and the cultural representations.

The working process of our Association is to question the theoretical models and the care settings, make

them work in order to increase their coherence, highlight their limits and their dead ends, even their ideological or commercial intentions, and to better specify their co-joint aspects and their contradictions. We need to distinguish two working axes. On one hand, the organization of the meeting and the discussion of the different theories and practices enlightening the fields of psychopathology, including human, biological and social sciences. But also, on the other hand, update and evaluate the relevance and the coherence of the concepts of the psychoanalysis itself, through critical discussion.