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8 August 2007

Dear Pierre,

As you know, WHO has decided to revise the International Classification of Diseases and related Health Problems, Tenth edition (ICD-10). The revision of ICD-10 is an important normative function of WHO and is scheduled to be completed by 2012. WHO's Classification and Terminology Team has developed a common strategy and work platform for all chapters of the ICD. The Department of Mental Health and Substance Abuse is taking a lead in the revision of the Mental & Behavioural Disorders section of ICD-10, working closely with the Classification and Terminology Team.

WHO has constituted an *International Advisory Group for the Revision of ICD-10 Mental and Behavioural Disorders*. The Advisory Group has the primary task of advising WHO in all steps leading to the revision of Mental and Behavioural Disorders in ICD-10 in line with the overall revision process.

The specific functions of the Advisory Group are as follows:

1. To assist WHO in identifying the steps involved in the revision of ICD-10 for Mental and Behavioural Disorders;
2. To advise WHO on constitution of working groups to undertake generation of necessary evidence, develop proposals for changes and to focus on specific issue as needed;
3. To assist WHO in identifying appropriate representatives of various stakeholders and in establishing effective collaboration/consultative mechanisms;
4. To advise WHO in developing the various drafts of the revision of the ICD-10 for Mental and Behavioural Disorders in line with the overall production timeline of ICD-11;
5. To assist WHO in developing protocols for and in implementing field trials to generate evidence and experience with proposed changes in diagnostic codes, categories, and criteria in line with the overall field trials process; and
6. To advise WHO in finalizing the revision of the ICD-10 Mental & Behavioural Disorders for approval by WHO Governing Bodies.

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The Advisory Group has been constituted initially for a period of two years but is likely to be extended further, two years at a time until the revision process is completed. The first meeting of the Advisory Group was held at WHO headquarters in Geneva on 11 – 12 January 2007. The report of that meeting has been provided to you previously.

Based on the recommendations of the Advisory Group, the WHO secretariat located within the Department of Mental Health and Substance Abuse is planning a set of activities for the revision process; the attached table enumerates these and gives approximate resource needs for them in terms of professional time and activity costs. It is important to note that the staff resources required for this effort as outlined in the table do not include the considerable time that the WHO regular staff (Dr Saraceno, Dr Saxena and other technical staff) will spend on the project. Similarly, all estimated activity costs are in addition to existing WHO resources.

Based on the International Union of Psychological Science's long-standing relationship with WHO and IUPsyS's status as a non-governmental organization (NGO) officially recognized by WHO, IUPsyS has made available to WHO some portion of Dr Geoffrey Reed's time as a contribution to this effort. Dr Reed has been an invaluable resource to us. He was extensively involved with the preparation of materials for the first Advisory Group meeting. He worked closely with me to develop the agenda, background paper, and materials for the meeting. He served as rapporteur for the meeting and worked with us to produce the meeting report.

The specific purpose of this communication is to make a formal request that IUPsyS make available the funding for Dr Reed to be devoted full-time to this project beginning 1 January, 2008. As you can see in the attached table, as of 2008 we expect to require the efforts of two full-time equivalent senior professionals on this project, and we would like for Dr Reed to be in one of these two positions. (We expect that the other senior position will be filled by a psychiatrist.) As we have discussed, there are a number of possible administrative arrangements between IUPsyS and WHO to make this happen, but the availability of funding for Dr Reed's efforts would seem to be a precondition of any further discussion along these lines. We would also hope that IUPsyS understands that this is a multi-year project. Although we understand that funding allocations are made by most organizations on a year-by-year basis, we would hope for Dr Reed to be available to work on this project for a minimum of 2 – 3 years.

Availability of Dr Reed to work on this project full time will be a substantial assistance to WHO for revision of ICD-10 mental and behavioral disorders. It would be our intention that Dr Reed functions as a member of the small core team for the revision work; this team will have the primary responsibility for coordinating the work of the Advisory Group (a role he has already begun to occupy). He will also be directly involved in the drafting and redrafting of categories and criteria and in the development and implementation of field trials. His extensive knowledge and experience with the ICF will also enable him to play a key role in the harmonization of the ICD-10 with the ICF.

We have already discussed by telephone many of the specific reasons that Dr Reed is in our view ideally suited for such a role in this project, so I will not repeat those here. I also believe that you are aware of his potential role in this position in helping to ensure that psychological research and practice is well represented throughout the process.

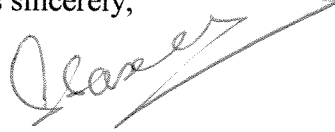
If I can provide any additional information, please do not hesitate to contact me.

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Because the agreements and administrative structures required for this type of position will take time to set up, we will be grateful for an early decision on this matter.

I take this opportunity to thank IUPsyS for excellent collaboration on this and other joint activities.

Yours sincerely,



Dr S. Saxena
Coordinator
Mental Health: Evidence and Research
Department of Mental Health
and Substance Abuse

ENCL: AS STATED

cc: Dr Geoffrey Reed

Revision of ICD-10 Mental and Behavioural Disorders: Provisional Activity Plan and Resource Needs

Note: the following resource needs are in addition to the existing resources available with WHO.

Year	Activities	Professional Time (Full Time Equivalent)		Activity Cost (not including professional time) USD
		Senior	Junior	
2007	<ul style="list-style-type: none"> • Coordination • Literature review 	0.5	1	100,000
2008	<ul style="list-style-type: none"> • Coordination • Literature review • Obtaining and assimilating comments • Liaison with other organizations (including the DSM Group) • Drafting categories and criteria • Development of protocols for field trials 	2	3	500,000
2009	<ul style="list-style-type: none"> • Coordination • Obtaining and assimilating comments • Liaison with other organizations (including the DSM Group) • Completion of the first draft • Field trials 	2	4	500,000
2010	<ul style="list-style-type: none"> • Coordination • Obtaining and assimilating comments • Liaison with other organizations (including the DSM Group) • Field trials • Analysis of field trial data • Redrafting of categories and criteria • Development of versions (including for primary care) 	2	4	500,000
2011	<ul style="list-style-type: none"> • Completion of the second draft • Harmonization with other classifications (e.g. ICF, DSM) • Final review • Translation • Dissemination 	2	2	200,000