Dr. Raúl González Enríquez and the Establishment of the Latin American Psychiatric Association

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Abstract

At the first World Psychiatry Congress (Paris, 1950), the Mexican doctor Raúl González Enríquez (1906-1952), at his own proposal and motion, created the Latin American Psychiatric Association (APAL), and the next year, between December 8th and 11th, 1951, with two branch offices already established in Mexico City and Jalapa, Veracruz, held the first APAL Congress, attended by delegates from 14 countries. That first Congress and the efforts of the founder have been maliciously dismissed in the annals of Hispanic American psychiatric history; thus, it is necessary to account for the events that passed, with the purpose of reclaiming the commendable work of such a distinguished, internationally renown psychiatrist.


Background: Paris, 1950

The first World Congress of Psychiatry was carried out in Paris, from September 18 to 17, in 1950, and from there did the World Psychiatric Association emerge. It was chaired by Jean Paul Lois Delay (1907-1987), and the direct responsibility for its organization fell on its general secretary, Henry Ey (1900-1977), both prominent psychiatrists at the Hospital Sainte-Anne of the French capital city itself. It is important noting that its preparation took 3 years, according to the international preparatory meeting that took place at the same city on October 23, 1947. The languages adopted as official were English, French, Spanish and Russian.

The context where this first mental health universal conclave took place was determined by the polarization that was starting to be observed between different psychiatrists of the world, with some calling themselves openly biologicists and others who wanted to continue on the path of orthodox psychoanalysis or other affine disciplines thereof derived. We should not forget that Delay introduced chlorpromazine antipsychotic effects and isoniazide antidepressant effects two years later. Contrary to what in some sources has been claimed, the program was in every sense eclectic. Certainly, many of the main scientific discussions around therapeutics addressed shock treatments, and it was until the 2nd Congress, in Zurich (Switzerland), in 1957, when the main subject on such topics was psychoactive drugs.

However, with regard to the subject under consideration, the most representative fact is that, at the aforementioned congress, on September 22, at the Sorbonne Council Hall, beneath the pulpit of Peruvian Honorio Delgado, chairman of one of the six main sessions of the event ("Clinical psychiatry"), different Ibero-American countries representatives gathered to consider two proposals: 1) the one by the Mexican group, led by Mexican academician Raúl González...
Enríquez' (1906-1952)\textsuperscript{6,7}, who used the event to germinate an idea conceived some time prior, which was the creation of a scientific society integrating all Latin American countries; 2) and the one presented by Ramón Sarró i Burbano (1900-1993), on the same subject, with the peculiarity that Spain and Portugal would be included. In the latter, a utopian Ibero-American unity was contemplated.

Only the first one was discussed, since the second was slighted by the participants after Valencian physician Román Alberca Lorente (1903-1966) explicit question on whether in the first point only Latin American countries would be considered; since there was a generalized affirmative answer, the subject was never addressed again.

Honorio Delgado asked González Enríquez to thoroughly expose his project, and “thus he proceeded, expressing the purposes and the problems it would try to solve, which included those relating psychiatric teaching both at schools and extra-cathedra, requirements and regulation for the professional practice of this discipline, unification of different countries in things concerning the psychiatric science and the way different societies dedicated to this discipline are linked\textsuperscript{8}. He proposed a division in geographic zones in order to facilitate and expedite any paperwork or works of the organization. Nin, from Havana, asked whether the Association would be individually formed or by Societies, to which González Enríquez replied that in those countries with sufficient organizational soundness it would be through them in order to obviate time. Seguín and Bustamante approved it entirely, whereas Martinez Dalke and Delafurich objected the division by zones.

Berman underscored that the Association constituted a necessity, “but proposes a new meeting that allows for exchange of ideas and deeper reflection as to the form and organization it ought to be given. He also proposes a 3 to 5-person commission for the presentation of an organic project”. The latter motion was approved and the following commission was appointed for that purpose: González Enríquez, Delafurich, Botelho and Krapf, under the honorary chair of Dr. Degado himself, with another meeting being left pending for Monday 26 at the same venue.

The assembly was instituted the 27\textsuperscript{th}, last day of the congress, only “to discuss some constitutive points of the Association presented by the commission appointed for this purpose […]]. The points were read one by one, as established by the Assembly, and were discussed and approved on the same order. Doctors Honorio Delgado, Eduardo Krapf, Seguín, González Enríquez, Bustamante, Nin, Martí Ibáñez [a Spaniard who represented the USA] and Delafurich intervened in the discussion\textsuperscript{9}. Thus, with the Organic Regulations agreed and, consequently, unanimously approved, there, in Paris, the APAL was also born. González Enríquez himself was appointed General and Coordination Secretary of that body, with executive functions until a Chairman and the definitive seat were available, which were to be designated during the works of its 1\textsuperscript{st} Congress.

Three administrative and working zones were admitted: the Mexico-Caribbean zone (Mexico, countries of Central America, Venezuela and the Antilles), the Southern Atlantic zone (Brazil, Uruguay, Paraguay, Bolivia and Argentina) and the Southern Pacific zone (Colombia, Ecuador, Peru and Chile); with two representatives each and their respective substitutes: Mexico and the Caribbean (incumbent: Raúl González Enríquez and Ángel Bustamante; substitute: Alfonso Millán and Ángel Nin); Southern Atlantic (incumbent: Adaudo Botelho and Eduardo Krapf; substitute: Mario Yahn and Luis Martinez Dalke) and Southern Pacific (incumbent: Honorio Delgado and Luis Acevedo Castillo; substitute: Alberto Seguín and Alberto Gallinato); although with their permanent seat being suggested in Mexico, Argentina and Peru, respectively.

Several commissions were also designated, such as the creation of the Revista Latinoamericana de Psiquiatria, entrusted to Berman; the 1\textsuperscript{st} Congress preliminary program was outlined, which would have two venues: Mexico City-Jalapa, 1951, State of Veracruz; as well as an organizing committee in charge of logistics, promotion and invitation of delegates\textsuperscript{8}.

It is false, and this must be emphasized, that the creation of the APAL was motivated by the fact that within the Paris Congress subjects were discussed that little or not at all involved Latin American specialists own interests. Some have stated that “Latin Americans who were present there felt that, in the Paris Congress, the problems of a region of the world were being debated with arrangement to their particular European perception\textsuperscript{9}”. This is, by itself, an absurd
claim. On the contrary, in González Enríquez original idea, it would strengthen their presence in the context of the world in a united manner. Therefore, it is a myth that the idea of Latin American unity collectively arose in a spontaneous form, with this denying the historical merit to its authentic founder.iii

In view of the above, it is no casualty the 1st APAL Congress in Mexico was convoked for two reasons of sufficient weight:

1) The 4th Congress of the World Federation of Mental Health (WFMH) was about to be celebrated in the capital city of this country on December 11 to 19, 1951, a circumstance that would attract an important number of representatives10.

2) Jalapa de Enríquez, a city that until these days carries APAL founder’s maternal grandfather’s family name, in those days still enjoyed the highest political and social considerations11.

Jalapa, Mexico, 1951

In a fabrication that has prevailed over time, and that has been fed by pretended psychiatry historians, it is mentioned that, at the referred WFMH congress, a report of the then nascent APAL activities was given, to subsequently travel to Jalapa. Actually, the opposite happened. The 1st APAL Congress took place in December 8 to 11, 1951, and it was there where the actions so far carried out were exposed.

According to Dr. Ramón Alcerro-Castro, delegate for Honduras, several representatives had a previous meeting at González Enríquez private home on December 7th. Following the established program, two sessions took place in Mexico City.

On December 8, at ten in the morning, in the facilities of the Instituto Mexicano del Seguro Social (IMSS) auditorium, activities were initiated. Delegates of the following countries were present: Argentina, Colombia, Costa Rica, Cuba, Chile, Ecuador, Guatemala, Honduras, Panama, Peru, Dominican Republic, Venezuela and Mexico. For obvious reasons, Mexican representation was the most numerous, since invitations were issued to all higher level education institutions in order for them so send their representatives.

The Universidad Nacional Autónoma de México (UNAM) rector, Luis Garrido Díaz, opened the works, with members of honor including the rector himself, the IMSS representative, Dr. Mario Quiñones, for the Organization of American States (OAS) cultural action office, psychiatrist José Luis Páliño Rojas, and for the WFMH, Eduardo Krapf.

First session board of directors was chaired by Eduardo Vasco Gutiérrez, from Colombia, and as secretary, previously mentioned Alcerro-Castro González Enríquez, as the incumbent General Secretary (in those days, the figure of Chairman was not contemplated) gave the referred report corresponding to the preceding year of activities (1950-1951). With regard to the document and to the Secretary’s work, Colombia, Cuba and Panama issued opinions; by the way, on a proposal by the latter delegation, he was offered a warm applause.

The Cuban delegation was responsible for the scientific activity with the talk Points and general terms of psychiatric teaching in medical school and teaching to graduates. There were other works, and, remarkably, there was a unanimous opinion that “in Latin America, we also have to introduce the concept of total personality in the study of human medicine and no longer neglect, in the countries where we have done so, the teaching of the importance of the psychiatric aspects of the individual; we must tend to destroy the dominating prejudice that psychiatry should be only superficially studied in one of the [medicine] undergraduate courses. In this sense, advanced countries educate future physicians on the understanding of the normal and sick mind in four of the undergraduate program courses, by teaching in one general psychology, in another medical psychology, in another, psychopathology and psychosomatic pathology, and in the fourth and last, clinical psychiatry”. About the author we are alluding to, he states that “a formal recommendation on teaching prior and after physicians graduated […] was left for the next APAL meeting”.

The second session took place on December 9 at México’s General Mental Hospital (La Castañeda), at the Male Observation room, with the presence of Dr. Manuel Velasco Suárez, head of the Department of Neurology and Psychiatric Assistance of the Secretary of Public Health and Assistance. This session was chaired by Chilean Dr. Carlos Nassar, with Dr. Fernando A. Quiro, from Costa Rica, acting as secretary. One of the main points was the reading of

iii Almost all the universal literature that addresses this subject, including the Mexican, handles it invariably this way.

iv We refer to General Juan de la Luz Enríquez Lara (1836-1892), Constitutional Governor of the State of Veracruz from December 1, 1884 to November 30, 1888, at his first period, and from December 1 of the latter quoted year to March 17, 1892, which is the date of his death.
the modifications to the APAL provisional statutes (Fig. 1). Unfortunately, from that moment on, one of Cuba’s delegates, José A. Bustamante, became the bone of contention. He maintained a dissident posture throughout the session, arguing all points and trying to generate the same mood among the attendees (Fig. 2). After many discussions, a resolution was written where the statutes were provisionally accepted with the purpose to discuss them again and, if appropriate, ratify them at the next APAL congress12.

The new board of directors was immediately appointed, with Dr. González Enríquez being elected by majority of votes, a circumstance that, apparently, generated further annoyance in Bustamante, whose goal was, reputedly, to be left in front of the nascent association.

Following Alcerro-Castro narration, he refers that this was the moment when “Central America and Panama representatives exposed our purpose to construct a Central America and Panama Psychiatric Association (APCAP), which was considered not conflicting with the APAL, even when it did not endorse it, since for APAL these countries are within the Mexico-Caribbean zone components”13. In these words, the influence of the aforementioned Cuban delegate on such decision, and who was also known to have also tried to separate the South American zone through the Chilean and Venezuelan representations is appreciated. In spite of Bustamante’s attitude, regarded as little prudent and decorous, González Enríquez immediately gave his approval and support to the APCAP, again recovering the trust and acquiescence of its members. This way, in a sound form, germinated the only Central American Association of Psychiatry that has ever existed, on December 10, 1951, at the Mexican Federal District. The meeting where this was settled was carried out in Jalapa, and it was celebrated for this purpose by José Molina Fernández, from Guatemala, and Alberto Salazar Ricalde, from Mexico.

The second part of the 1st APAL Congress continued in the city of Jalapa from the 10th to the 11th, and for this reason, according to Alcerro-Castro narration, they travelled by train in “sleeping-cars” that same night of December 9, and he mentions one of the many tokens of attention they were offered. For example, all foreign representatives were declared Guests of Honor by the governor of the State, Marco Antonio Ruiz Turnbull, with this distinction being certified by the delivery of the respective documents crediting them as such.

The respective program continued, and on December 10, the third day of activities took place at the facilities of the Universidad Veracruzana, after a courtesy visit from the hosting rector. In this occasion, chaired by Panama, through the Dr. Mariano Górriz, and Dominican Republic José Patxot Vallejo acting as secretary, by means of its delegates (Alberto Seguin and Emilio Majluf), Peru was responsible for the presentation Fundamental points for a social psychiatry in Latin America. The work drew much attention, and it was widely discussed, among others, by doctors Nassar, Nin, Alcerro-Castro, Ricardo Ponce Ramírez, from Guatemala, and Alberto Salazar Ricalde, from Mexico.

The governor of Veracruz himself closed the event on December 11 at the conclusion of the sessions of the day (fourth), which were chaired by Julio Reymonides Soler, from Cuba, and José Antonio Campo, from Guatemala. Barely on time to return to Mexico City since, as previously mentioned, this last day, was the 4th World Federation of Mental Health Congress opening, which was attended by the majority14.

The National University of Honduras representative acknowledged that “all the attending countries were politely looked after by the Mexican and Jalapan colleagues, with multiple opportunities being offered to get to know both cities, the Teotihuacan archeological zone, etc.”15.

During the 1st APAL Congress, González Enríquez exposed the convenience to study the idiosyncratic characteristics of Latin American mental pathology and a commission for the development of a working and investigation plan was therefore developed, which was divided in two groups: one formed by two Ibero-African countries (Cuba and Brazil) and another by two Indo-Hispanic countries (Mexico and Peru). This commission was named Latin American Group of Trans-cultural Studies (GLADET), with the people responsible of them being Bustamante for the first, and Seguin for the second one, coordinated by González Enríquez16. Since many years prior, González

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v Alcerro-Castro, “Informe”, 1952. He also took advantage of the opportunity to get to know the Mexican infrastructure in terms of hospitals, in support of the planning of the National Psychiatric Hospital of Honduras, accompanied by architects Francisco Pratts and Luis Ulloa.
Of its denomination.
1° By approbatory voting of all Countries represented at the Paris Psychiatric meeting, celebrated on September of the present year, an inter Latin American body is created, which carries the name of Psychiatric Association of Latin America (APAL).

Of its purpose.
2° Its fundamental purposes are the following:
   a. To establish and invigorate Latin American Psychiatrists relationships (by means of correspondence, grants, congresses, teachers' exchange, etc.).
   b. To institute psychiatric groupings' common technical bases, in order for them to meet the minimal qualities indispensable to this type of associations.
   c. To promote the support of psychiatric teaching in schools and to postgraduates.
   d. To study and put under consideration of its members the required programs for said teaching.
   e. To recommend to the respective authorities the necessary and adequate measures required in order for psychiatric, investigation and teaching services to adjust to a current scientific position and to the needs of each country.
   f. To make available an instrument for scientific expression and informative bulletins if deemed necessary for the organization.
   g. It will promote the writing of a general regulatory code that protects the psychiatric patient.
   h. It will try to obtain the necessary subsides for its purposes.
   i. It will strive for the regulation of psychiatric professional practice.
   j. At its members' request, it will conditionally intervene on issues not specified in the present general points.

Of its organization.
3° The following points must be regarded as general and subject to the regulation that for this purpose is created:
   a. Three organizational and working zones are admitted, which from north to south are: the Mexico-Caribbean zone, comprising Mexico, the Central American countries, Venezuela and the Antilles; the Southern Atlantic zone: Brazil, Uruguay, Paraguay, Bolivia and Argentina; the Southern Pacific zone: Colombia, Ecuador, Peru and Chile.
   b. Each zone will have responsible representatives named zone representatives, which will be elected between the countries of it. For the purposes of transient organization, each zone representative will rely on country Delegates assigned to this effect.
   c. There will be a general and coordination Secretary, the incumbency of which will last until the next convention establishes the definitive organization, according to a body of organic regulations.
   d. In the aforementioned convention, a Chairman will be designated, which will remain two years in charge, and the definitive seat of the General Secretary will be established.
   e. The elections will be held in the respective convention by the representatives of national groups. The votes of those representatives that might not have been able to attend the convention will be valid.
   f. Zone delegations permanent seats are suggested to be in Mexico, Lima and Buenos Aires.
   g. The General Secretary will be able at any moment to resort for aid from the zone committees, and these, from accessory secretaries or regional committees, according to their determination.
   h. Global works will be carried out by means of commissions, which will be able to be designated at the periodical conventions or by the secretaries of action where appropriate.

Of the members.
4° Members will be admitted:
   a. By proposal of Societies that are affiliate to or approved by the Association.
   b. At personal request, in compliance with the regulatory prescriptions formulated on the subject.

Of the economic means
5° The Association's life will be supported:
   a. By member contributions.
   b. By private contributions.
   c. By donations of governments or institutions, with the limitation or amplitude granted by the regulations.

Transitory provisions.
   a. A sufficient body of regulations will be elaborated in the course of the coming year.
   b. A convention will be celebrated by the end of year 1951 for a report on works carried out and determinations.
   c. Two representatives of each zone will be appointed in order for preliminary organizational works to be carried out, under the direction of an elected delegate.

Once the above terms were approved, the Assembly voted unanimously:
1. That Zone Representatives were to be the following: Mexico and the Caribbean: Doctors Raúl González Enríquez and Ángel Bustamante (substitutes: Doctors Alfonso Millán and Ángel Nin); Southern Atlantic zone: Doctors Adauto Botelho and Eduardo Krapf (substitutes: Doctors Mario Yahn and Luis Martínez Dalke); Southern Pacific zone: Doctors Honorio Delgado and Luis Acevedo Castillo (substitutes: Doctors Alberto Seguín and Alberto Gallinato).
2. That Mexico would be the first General Secretary seat.
3. That Dr. Raúl González Enríquez was elected as General Secretary.
4. That the approved convention would be celebrated in Mexico City, on December 1951.

The act was closed with a round of applause for Dr. Honorio Delgado for his pertinent performance as chairman. The Zone Representatives appointed Doctor Ventura C. Darder, Uruguay delegate.

Figure 1. APAL provisional statutes. La Sorbonne, Paris, 1950.
Enríquez had shown signs of his extraordinary knowledge on the subject\textsuperscript{16}. This organization is also part of his plagiarized work\textsuperscript{17}. It is regrettable that some highly renowned psychiatrists have openly disdained their origins, and with much affliction we realize that Mexican and foreign prestigious authors persist with dishonor. Recently, GLADET was reorganized (not founded), and on April 17 to 20, 2008, its First International Congress was celebrated in Guadalajara, Jalisco, Mexico. In the corresponding report, erroneous dates and circumstances of its origin are written down; it incorporates Bustamante’s wishful thinking and he is paid homage to\textsuperscript{18}.

**Conclusions**

The decease of Raúl González Enríquez on the night of October 18, 1952, in tragic conditions, needlessly disarticulated the incipient APAL. The rest of the pioneers lacked the required assertiveness to give continuity to the works. It is important to point out again that, since the Paris event, some Latin American psychiatrists wanted to seize the opportunity to head the nascent scientific organization. The Cuban Bustamante, as already mentioned, was one of the main ones: at APAL 1st Congress he tried to fraction the subcontinent by facilitating the creation of APCAP. Although the possibility of a South American professional association was contemplated (there was some precedent), this never crystallized; however, while APAL remained apparently inactive, Nassar, from Chile, created the Latin American Association pro-Mental Health\textsuperscript{19}, with more than five congresses getting to be celebrated (Brazil, 1954; Argentina, 1955; Peru, 1958; Chile, 1960, and Venezuela, 1963, among others), endorsed by the WFMH, with its activities being especially important on behalf of the aforementioned geographic area.

Likewise, all historical misrepresentations with regard to APAL history are attributable to Bustamante and, unfortunately, these are still being replicated by historians of dubious credibility. He was the propagator of the version that, in Paris, Latin American psychiatrists had spontaneously expressed themselves. He is also responsible of the false belief that the APAL
foundation took place in Havana in 1960, and the 1st Congress at Caracas on the following year\textsuperscript{20}. Similarly, Bermann took over the \textit{Revista Latinoamericana de Psiquiatría}, with not quite flattering results: he only managed to publish 11 issues between 1951 and 1954, and quarreled with everyone owing to his political and public health ideology\textsuperscript{21}. He started it with Brazilian Claudio de Araujo Lima as a bilingual publication, in Spanish and Portuguese. The Editorial Board was formed by Pedro Reyes, for Venezuela; Alberto Seguín, for Peru; Julio Endara, for Ecuador; Raúl González Enríquez and Alfonso Millán, for Mexico; and Emilio Mira y López, for Spain. His presence heading the journal was the result of assignments

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arisen in Paris; it was not, as Alarcón has wrongfully stated, “a corollary to his apostolic action”15.

In 1975, Seguín had to vigorously intervene22 to correct the wrongful numeration of APAL congresses, and publicly expressed, as other authors did, that the association had been born in Paris as a personal project of multi-mentioned González Enríquez (Table 1)23-26.

Finally, and to conclude for the moment, at the 30th APAL Congress, celebrated at Isla Margarita, Venezuela, on November 18 to 22, 2008, the General Assembly reformed its statutes with the purpose, apparently, to keep them current, and according to the document (Ch. IV, Art. 7, section a and Ch. V), the 1961 Congress is still regarded as the first one and its organizers as the pioneers: Raúl González Enríquez isn’t even taken into account!

Before the lights of science, how should this insult to history and to science itself be qualified? Is it by any chance justifiable by the untarnished chauvinism of some and the pettiness of others? Or is it that in an appropriately near future, under a conveniently serene analysis, will the necessary vindication occur, even with all the negative things and the shameful attitude the APAL has conducted itself in this sense?

In some occasion, the Argentinean physician and seditious, Ernesto “Che” Guevara stated that “Historical truth must be respected, since capriciously fabricating it doesn’t lead to any good result”.

APAL founder members

Gregorio Bermann (1894-1972), Enrique Eduardo Krapl Haase (1901-1963) and Luis María Martínez Dalke (1904-1988), from Argentina; Adauto J. Botelho (1895-1972), of Brazil; Raúl González Enríquez (1907-1995), from Perú; Venturo C. Darder, from Uruguay, and probably others.

Founder countries

Argentina, Brazil, Chile, Cuba, Mexico, Peru, Uruguay and probably others.

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