



AGLP

The Association of LGBTQ Psychiatrists

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Superior Court of Santa Clara, California, site of the Denial of Care Hearings. Update on page 6



Gene Nakajima, M.D.

IPS 2019 Recap

IPS MEETING WITH RECORD LGBTQ PROGRAMMING AND ATTENDANCE

The recent IPS meeting in New York had record LGBTQ programming and attendance at our sessions. Thanks to Leon Lewis, Director of Scientific Programs at the APA and Eric Yarbrough, MD the chair of the scientific program committee for IPS who were so helpful in promoting LGBTQ programming at the meeting. Most of the sessions had 50-100 people in attendance.

A highlight was the screening of Boy Erased, a film about conversion therapy with the author of the book the film was based on, Garrard Conley, participating in the discussion. Thanks to Jose Vito, MD and Amir Ahuja, MD for organizing the session.

The other highlight was the session In the Shadow of History: The LGBTQ Psychiatric Experience. It included Saul Levin, MD speaking about John Fryer, MD; Harshit Sharma, MD speaking about mental health issues in India; Adriana De Julio, MD, talking about mental health issues in the Military, and Amiclar Tirado, MD about domestic violence issues.

On Sunday morning, there were two well attended sessions, one by Petros Levounis, MD and the other on LGBTQ Youth chaired Kenn Ashley, MD.

About 20 people participated in an APA Caucus Meeting of LGBTQ psychiatrists followed by an informal lunch and a record number of people attended the fall planning meeting.

Several people went to see the Broadway play Inheritance, Part One. Many thanks to Lonny Behar, MD and Kenn Ashley, MD who organized a party at the Norwood Club where over 100 people attended. NY County Psychiatric

Continued on page 5

Election Issue: The candidates respond. See page 7.

The Newsletter of AGLP

Published quarterly from 4514 Chester Avenue,
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The views expressed in the Newsletter are those of the writer and do not necessarily represent the opinions of AGLP. The sexual orientation of any writer or any person mentioned in the Newsletter should not be inferred unless specifically stated. Mailing lists for the Newsletter are confidential, to be used only by AGLP, and do not imply sexual orientation.

INFORMATION FOR AUTHORS

Persons wishing to submit articles for publication should send them to the National Office, 4514 Chester Avenue, Philadelphia, PA 19143; phone 215-222-2800; Fax: 215-222-3881; E-mail: AGLPEditors@aglp.org. Submissions should be clearly readable. Submissions on electronic media are preferred. Submissions become the property of AGLP and will not be returned unless requested and accompanied by a self-addressed and stamped envelope. The Newsletter reserves the right to make editorial changes and to shorten articles to fit space limitations. Name, address, daytime telephone number, and a short biographical statement about the author should accompany the submission even if the author requests anonymity in publication (which is discouraged). The deadline for inclusion in the next issue is February 15, 2020.

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The Newsletter of AGLP accepts limited advertising depending upon space and applicability to issues affecting psychiatrists who either are gay or lesbian or treat gay and lesbian patients. The mailing lists for AGLP are confidential and never sold or provided to any vendor.

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AGLP National Office

Roy Harker, CAE, Executive Director
rharker@aglp.org
4514 Chester Avenue
Philadelphia, PA 19143-3707
Voice: (215)222-2800
Fax: (215)222-3881
aglp.org
www.aglp.org

Editor's Column Erick Meléndez, M.D.

AGLPEditors@aglp.org



Erick Meléndez, M.D.

Happy holidays! What a year! What a decade! As we look forward to a new year coming, I cannot help but reminisce about everything that has happened in the past years, we have learned so much, evolved so much and hopefully changed for good.

It is very important to reflect on all the work we have done in the field, as we have contributed to many transformations, no matter how small, that are now shaping our present and that also keep us striving to be better, bigger and wiser.

This edition though, is all about the future. We in AGLP are working hard to improve our services for the LGBT community, including access, knowledge and outreach. In the columns of this newsletter you will find out about the ways we are planning to do this; from improving our database of educational tools, our plans for the APA Assembly in 2020, to the new Social Media Committee.

We are also sharing the spot with some of the APA candidates up for election for the upcoming term; they have graciously cooperated with us and you can get to know part of their platform and ideas, especially regarding our community.

We might be living during difficult times, in which our rights and liberties are being considered not equal to others; but I am sure that this new year, and decade, will bring forth trailblazers who will pave the way for a better future for LGBTQ+ humans; and we, as AGLP, will be moving forward along them, always reaching for excellence, leadership and better care for the mental health of everyone.

■ ■ ■

Preparations for Philadelphia 2020 Roy Harker, C.A.E., Executive Director

RHarker@aglp.org



*Roy Harker, C.A.E.,
Executive Director*

Named National Geographic Magazine's "Best City to Visit in 2020," Philadelphia, like many urban areas in the country, has transformed itself in the last ten years. "Though the old-country traditions warm me, it's the glimmer of new possibilities and the promise of reinvention that capture my attention and draw me closer," writes Johnna Rizzo in this month's issue. APA will be holding its Annual Meeting in Philadelphia April 25 through April 29, 2020, and the AGLP Local Arrangements Committee has begun the work of providing a memorable and edifying experience for our members. Besides education and outreach programming important to our mission and goals, AGLP members and their families will be provided with an exceptional program of social, artistic, cultural, and culinary opportunities throughout the course of their stay.

The Loewes Hotel has been selected as our home base during the meetings. The hotel, formerly the Pennsylvania Savings Fund Society Building, centrally located across from the front entrance to the Convention Center, is a perfect example of the kind of can-do attitude that exists in this city. It has been transformed into a luxury hotel while retaining all of its important historic assets - including the custom-design Cartier clocks on every floor. A National Historic Landmark, the building was the first International Style



Designed by architects William Lescaze and George Howe, this poster from 1932 capitalizes on the groundbreaking image of the PSFS Building.

Continued on page 13

President's Column

Howard Rubin, M.D.

HRubin@aglp.org



Howard Rubin, M.D.

As I write my column at the end of October from my house in San Francisco, I am grateful to report that evacuation orders have been lifted and power restored to much of Sonoma County. Although the Kinkaid fire continues to burn, it is officially 60% contained. By the time you read these words, I hope we will have had our first rain. But as you all know, the effects of trauma can be long lasting, and repeated trauma even more injurious.

Despite the enormous progress LGBTQ citizens and AGLP members have made in our professional lifetimes, it has become clear that both the literal fires raging in California and the metaphorical fires we have fought in the struggle for LGBTQ rights are already starting to spark again. With a conservative supreme court and Senate in power, our freedom to live healthy, productive, and open lives as equal citizens in the United States are in jeopardy.

As psychiatrists, we are first responders trying to put out the political and social fires that are raging. Our job is to assuage the suffering of patients, loved ones, while not neglecting to take care of ourselves. This is no easy task.

I am happy to report that AGLP is working hard to protect and preserve our hard-won rights, but it remains vital that we not be complacent and that we remain visible and active.

“As psychiatrists, we are first responders trying to put out the political and social fires that are raging. Our job is to assuage the suffering of patients, loved ones, while not neglecting to take care of ourselves. This is no easy task.

To that end, we have increased our presence at APA meetings, to educate our colleagues and ourselves and to advocate for our patients. This year's APA boasted a record number of LGBTQ themed presentations. We organized a huge number of events to help our members and allies' network and form the connections that will help us work together more effectively. We also managed a robust presence at this year's IPS in New York. We exceeded our goal and now have over 415 members. We are updating our LGBTQ psychiatric bibliography. The quality of our Journal has increased with more original submissions. We are trying to establish a more robust social media presence on Facebook and Instagram. At our meetings, we are trying to invite members to join us at art exhibitions, plays, and concerts because art can heal, show us the best and worst of ourselves, and help us make sense of our condition.

Political climate change is an unfortunate reality we are all struggling with. Please help AGLP as much as we can to mitigate the damage. Become more active with AGLP, APA, and in your local psychiatric organizations.

In the next few months you will receive solicitations from various worthwhile charities. Please also consider giving either a donation to AGLP or upgrading your membership either now or when your membership is up for renewal. Our ability to advocate for LGBTQ patients can be strengthened by increasing your membership dues from \$285 for a regular membership, to \$350 to become a Sponsor, \$500 to become a Patron, or \$1000 to become a Founding member.

Please feel free to contact me if you want to get more involved in AGLP in any way.



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| | |
|---|----------------------------------|
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| SECRETARY Sarah Noble, D.O. | SNoble@aglp.org |
| TREASURER Mark Messih, M.D. | MMessih@aglp.org |
| NEWSLETTER EDITORS Erick Meléndez, M.D. | AGLPeditors@aglp.org |
| JOURNAL OF GAY AND LESBIAN MENTAL HEALTH Chris McIntosh, M.D. | Editors@aglp.org |
| EXECUTIVE DIRECTOR Roy Harker, CAE | 215-222-2800 RHarker@aglp.org |

AGLP ADVISORY COUNCIL

| | |
|---|----------------------------|
| CHILD AND ADOLESCENT PSYCHIATRISTS Jonathan Weiss, M.D. | JWeiss@aglp.org |
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| SOCIAL MEDIA Mark Messih, M.D. | MMessih@aglp.org |
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Margie Sved, M.D.
MSved@aglp.org

President Elect's Column

Amir Ahuja, M.D.

AAhuja@aglp.org



Amir Ahuja, M.D.

ENHANCING OUR PROFILE

Hello everyone. I am happy to report that the APA Institute of Psychiatry Services this October in New York City was a success. We had many exciting sessions. In fact, there were so many LGBTQ sessions that we had many running concurrently, which is unfortunate as attendees did not get to experience all of the offerings. However, the abundance of content was a good problem to have.

I am also excited to report that we are getting more content to the Journal every year, and it has grown in leaps and bounds recently. This means that, more and more, we have committed members and allies disseminating key information that everyone needs to hear.

This was the first step in increasing our effectiveness as an organization in terms of education and sharing expertise. The next step is to maximize the audience for what we have to say. To that end, there are several things we can do as members and supporters of AGLP to assist in this mission.

One thing that everyone can do would be to use social media effectively. We have committed Board members' time to a Social Media Committee, and they will be coordinating and posting across social media platforms. Their posts will be about advocacy, policies, educational efforts, current events, and anything else related to LGBTQ Mental Health. Please help them in this effort by posting on your own pages about AGLP and sharing our content as well as adding your own.

Another thing we are actively working on is formalizing educational content and distribute through larger channels. To this end, we have become actively involved with the APA in making webinars focused on LGBTQ mental health. This started with our treasurer Mark Messih doing a Webinar about gay men's Psychiatry 101. Another upcoming webinar is being done by me and it regards Intimate Partner Violence in the LGBTQ community. This will be in coordination with my book on this topic, which is coming out in late 2020. Please contact us and let us know if you have a topic in mind for webinars, as we need all of the help we can get.

We also have many openings for people wanting to write book chapters. We are currently asking for authors for chapters in the Oxford LGBTQ Psychiatry Textbook, particularly on topics involving Gay Men and Lesbians. If you are interested in either of these, let us know.

Finally, we need to work on Media Competency for members of our organization, such that we feel comfortable and empowered to share our expertise on TV, Radio, and Internet outlets. Many times, there are relevant issues in the media that we could and should comment on, and we have not been forthcoming with putting a face to our organization, in particular, and to LGBTQ Psychiatry in general.



Vice-President's Column

Pratik Bahekar, M.D.

PBahekar@aglp.org



Pratik Bahekar, M.D.

Some answers are hidden in history. If we glance back, a real amendment has always been made and sustained through education. We cannot change Sexual and Gender Minorities' (SGM) healthcare outcomes without AGLP's active participation. The conquest of better healthcare is rendered by its foot soldiers. I am happy to announce, over the past few years, AGLP members have increasingly participated in international and national conferences.

For the upcoming 2020 American Psychiatric Association conference, AGLP members collaborated to submit more than ten SGM mental health scientific programs, both workshops and courses. We

look forward to the enticing discussion with the non-SGM mental health providers in these events.

What's out of sight is out of mind. Many of our members have done tremendous work to improve the quality of SGM health care. In the hope of stimulating a solution for the underappreciation of these efforts, AGLP has constituted a social media subcommittee. As the product of the subcommittee, we have a new presence on Facebook, Instagram, and Twitter. I invite you to like, subscribe, and share the official AGLP accounts.

As we move to the new decade, we should always be hopeful with the progress created so far. Yet, some things remain unchanged. Many SGM mental health topics, such as mental health in the aging population, intimate partner violence, and substance abuse, stay out of most conversations. AGLP is striving to be more diverse and is determined to address under-representation of the minorities within minorities, including female, transgender, intersexual, and gender non-conforming members. We are providing a distinct emphasis on the participation of the underrepresented.

New beginnings and summations square measure constant. It's up to all of us at AGLP to make change an ally. We are all ears for your suggestions, reach out to us via email or social media platforms.



Secretary's Column

Sarah Noble, D.O.

SNoble@aglp.org



Chris McIntosh, M.D.

A few years back Jack Drescher created a bibliography of articles that are important to LGBTQ scholarship. We are in the process of updating this list and I would like your help.

Current topics include general, history, clinical, development through the lifecycle, family/marriage/rela-

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IPS New York 2019 Recap

Continued from page 1

Society generously funded the reception. Members of NYGLP (NY Gay and Lesbian Psychiatrists) and GLPNY (Gay and Lesbian Physicians of New York) also attended. Next year the APA will not have an IPS meeting, but it will return to New York in October of 2021, we hope to see you there.



Robert Kertzner, M.D.

IPS ATTENDEES ATTEND THE INHERITANCE: A BROADWAY PLAY FOR OUR TIMES

Howard Rubin and I had the opportunity at this Fall's IPS to lead a media session on the Merchant-Ivory film adaptation of the E.M. Forster novel, *Howards End*. Following the media session, several of those in attendance saw the Broadway production of *The Inheritance*, which is also based on the novel. The play speaks to many issues of relevance to our patients and ourselves, some explicit but others worth drawing out.

There is an often-commented scene towards the end of Part I of *The Inheritance* that is a heartrending evocation of the early years of the AIDS epidemic. Without giving too much away, this scene is a lamentation for those who died and lives that might have been, but it also speaks to the diasporic nature of many LGBT lives and an anxiety about eternal wandering. One line stands out in particular, spoken by one character to another: "Welcome home".

Playwright Matthew Lopez found in Forster's novel a story of characters in search of a home - a literal and metaphysical place of rootedness - and recognized its relevance to gay men's lives. The characters in *Howards End* and in Lopez's play risk disinheritance because they are non-conforming in their respective worlds. We watch the play wondering how the protagonists will persevere and how the legacy of past generations of LGBT people can support this perseverance.

Lopez suggests several answers to these questions. As made explicit by the text, he calls for gratitude to those who fought for LGBT rights and those who confronted AIDS and its attendant perils of fear, ostracism, and foreshortened lives. In doing so, the play's protagonist, Eric Glass, discovers what his home is; it is a rootedness in a creating a community based on caring for others. The Eros of his youth is joined by a *caritas* of adulthood.

The home of Eric Glass's adulthood may not be your home, but his story speaks to a widespread desire for "place" in terms of how an individual's life will matter and what meaning it will have. These are questions with a particular resonance for LGBT persons, who are refugees from conventional assumptions about sexuality and gender identity in search of authentic lives. With good fortune, we find kindred souls and unhindered opportunities for the realization of who we are as sexual and gendered human beings. Love is no less important. AIDS disrupted these possibilities as *The Inheritance* dramatically underscores.

But I think Lopez has something else in mind, as I do. Home signifies a place built upon more than a necessary embrace of who you are and who you love; it is the place of connectedness with what has preceded and will follow you. His characters' banter about aging and obsolescence reflects an anxiety about finding this sense of place. Your tears in watching *The Inheritance* are not just for lost lives and unpassed torches. They are also for the acknowledgment of

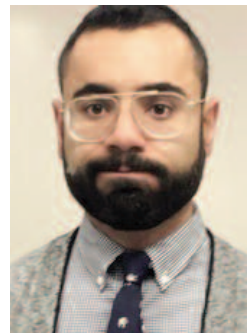
questions about legacy, belonging, and what the future holds. Far from being ever so humble, home in *The Inheritance* signifies a bridge between what you have inherited and what you will bestow upon others. This is a bridge that many of our patients - and ourselves - seek to construct.



Social Media Committee Column

Mark Messih, M.D.

Social@aglp.org



Mark Messih, M.D.

PSYCH-GEIST: DISCUSSING SOCIAL MEDIA PRESENCE

Hashtags, tweets, messages and even gifs, snapchats or Instagram stories, options for sharing thoughts, feelings and opinions seems to change at an increasing rate thanks to social media.

According to the Merriam-Webster, social media refers to forms of electronic communication through which users create online communities to share information, ideas, personal messages, and other content. Social media is also becoming a predominant way of learning, connecting and advocating. One only has to look at the use of social media platforms in the coordination of large-scale social movements such as protests in Hong Kong, the #MeToo Movement and the Arab Spring to name a few.

Bringing the conversation into the realm of the individual, social media increasingly represents a means of self-expression. The use of Instagram has allowed people to share photos from their lived experiences, art and stories about their day. The use of twitter to disseminate 280-character thoughts has been present for over 13 years.

That being said, increasing attention has been placed on the role of social media use by clinicians. How does one manage online presence, how does this impact what is shared or not shared on an account? Particularly in psychiatry, where concerns for transference and countertransference are important components of the therapeutic relationship, how does an online presence inform how patient's see us.

The clinical interaction is one level of this discussion, another are legal concerns. The Goldwater Rule is one such example. Even in training, PRITE and board review suggests knowing that this rule states that it is unethical for a psychiatrist to provide a professional assessment of public figures. While there is a litany of concerns about what to not share, there are also benefits such as disseminating new research, advocacy and increasing public awareness of determinants of mental health.

This balance of pros and cons comes at a time when supported data, advocacy for marginalized groups and public awareness is needed more than ever. This is the context in which the AGLP finds itself expanding its social media presence.

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Gene Nakajima, M.D.

AGLP membership has increased sixty-three percent! Gene Nakajima, M.D.

GNakajima@aglp.org

At the end of 2017, AGLP reported an all-time membership low of 261 members. In the subsequent months we organized a membership drive at the APA annual meeting in New York in May 2018, called "40 Years, 400 Members, 1 Vision" to increase our membership to 400 members in time for our 40th Anniversary as an organization. By January 2019, we had 360 members,

and by April 2019, we had 384 members. During the recent APA meeting in San Francisco in May, we were thrilled to reach the goal of 400 members, and as of October of 2019 we have 428 members.

We are grateful to our members who have worked hard to increase awareness of our organization. The end of this campaign in no way means the end of our efforts to attract and maintain a healthy membership base. Our goal for the next year is to build on the success of that membership campaign in hopes that our membership will increase to 450. Please consider your role in recruiting members for AGLP. Encourage your LGBTQ colleagues to (re)join AGLP. You can find out who is a current member of AGLP by logging in to our membership directory (if you need help logging in, please don't hesitate to contact our executive director Roy Harker).

Over the next few months, we will be sending updates by email concerning our activities for the APA meeting in Philadelphia. Forwarding these emails is also a great recruiting tool for AGLP. If you have any suggestions on how to increase membership by using list serves and other social media, please let us know. We have a newly-formed Social Media Committee led by Pratik Bahekar, M.D. You can reach him at social@aglp.org. Special attention is directed towards medical students, residents and early career psychiatrists. At our next annual meeting, we will distribute AGLP business cards that you can give to your colleagues to encourage them to sign up.

And, again, thank you for all of your contributions that contribute to the growth and vitality of AGLP!

Roy Harker, C.A.E.,
Executive Director

Victory in Denial of Care Case!

You have won. The court in Santa Clara v. HHS vacated the so-called "conscience" rule in its entirety. The court also ruled that you have standing to assert claims on behalf of your patients, and that your claims are ripe. The court denied defendants' motion to dismiss our constitutional claims, although it did not reach them on the merits. What a thrilling result!

From the court: "When a rule is so saturated with error, as here, there is no point in trying to sever the problematic provisions. The whole rule must go."

Back in May, AGLP officially joined GLMA, Whitman-Walker Clinic, the Los Angeles LGBT Center, the Mazzone Center (Philadelphia) and several other leading LGBTQ organizations and individuals to fight the Trump Administration's Denial of Care regulation as plaintiffs in a lawsuit filed by Lambda Legal in the county of Santa Clara, California. The lawsuit, a legal challenge to the U.S. Department of Health and Human Services rule entitled "Protecting Statutory Conscience Rights in Health Care: Delegation of Authority," would encourage more discrimination in the healthcare field against LGBTQ patients, people living with HIV, and women. In essence, this so-called "conscience rule," would have encouraged healthcare workers to deny care or services based on a religious or moral objection. Religiously-affiliated healthcare institutions would have, under this act, been able to prohibit providers access to medically necessary care of their patients.

AGLP was represented, pro bono, by Mayer Brown, LLP, attorneys in Washington, DC. We argued that the Denial of Care Rule:-

- would foster greater discrimination against LGBTQ patients who already experience widespread discrimination in obtaining health care and hence suffer significant health disparities in comparison to the general population. Research documents the history of this discrimination and the negative health outcomes that result.
- would result in greater discrimination against LGBTQ patients and in increased denials of services based not just on the medical services that patients seek, but on the patients' LGBTQ identities.
- would present a direct conflict with nondiscrimination standards adopted by all the major health professional associations who have already recognized the need to ensure LGBTQ patients are treated with respect and without bias or discrimination in hospitals, clinics and other health care settings.

Decades of advocacy, research, and testimony by AGLP members formed the basis for Mayer Brown's arguments.

Lambda Legal is to be commended for their part in assembling this large number of significant LGBTQ+ organizations and individuals from around the country in this fight. And of particular note, we congratulate Jamie A. Glikberg, Senior Attorney, who led the legal team and worked tirelessly for this result.



Social Media Committee

Continued from page 5

To this end we have coordinated our online presences on multiple platforms including Twitter, Facebook and Instagram. A new board focused on social media content was formed at the last IPS meeting and is looking for individuals interested in contributing media and joining the board.

A social media policy has been drafted to structure the goals and content we hope to add to our pages. Our goal is to disseminate, advocate and connect resources with members and the broader psychiatric community. To this end we hope that members will join these forums, share posts and engage in important discussion we will be leading moving forward. For any additional questions please contact social@aglp.org. We look forward to hearing from you!



The Candidates Respond: AGLP Q & A Session

Erick Meléndez, M.D.

AGLPeditors@aglp.org

In order to bring AGLP members a bit closer to the 2020 Candidates for the APA, the AGLP Newsletter posed four questions to the full slate of candidates. All nominees were contacted via the candidate's email as listed in the APA 2020 Election Announcement. We requested statements that reflect on these questions, and a photograph for publication in this issue of the Newsletter.

- The questions posed to the candidates this year were:
- Why do you think AGLP members should vote for you?
- What is the next step for APA in terms of LGBTQ mental health?
- How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?
- What can a psychiatrist do in their practice to better serve the LGBT?

We requested that these responses be returned no later than Friday, November 29, 2019. What follows are the responses received by press time for the newsletter.

Voting Begins
January 2, 2020

Voting Deadline
January 31, 2020, at 11:59 p.m. (ET)

PRESIDENT-ELECT

David C. Henderson, MD - NO RESPONSE RECEIVED BY PUBLICATION DATE

Distinguished Fellow
david.henderson@bmc.org • (617) 638 8141



Henry A. Nasrallah, MD

Distinguished Life Fellow
henry.nasrallah@uc.edu • (513) 407 0833

Why do you think AGLP members should vote for you?

The main reason is because I am highly qualified to serve as APA president due to my extensive involvement in APA governance and components as well as my 40 years as an academic professor, researcher, educator, department chair, associate dean, editor of 3 journals and a fierce advocate for

the seriously mentally ill. However, when it comes to AGLP members, I have been a strong supporter of LGBTQ colleagues within the APA and friends and family members in my personal life. I recall celebrating with my fellow gay residents when the APA voted to remove homosexuality from the DSM on December 15th, 1973. I became a close friend of the late John Fryer when we were fellow examiners for several years on the same oral Boards Team. To me, he was a genuine hero who was instrumental in eliminating the discrimination against homosexuality when it was classified as a mental disorder. As a long-time schizophrenia researcher, I am aghast at Freud's archaic and misguided explanation of the etiology of schizophrenia as "latent homosexuality". In the early 1980's, when the tragic AIDS epidemic began, I was involved in assessing several individuals with AIDS who presented with serious cognitive and psychiatric symptoms. I was heavily involved in brain imaging research during that time and was able to see extensive cerebral effects of AIDS in my young patients.

What is the next step for APA in terms of LGBTQ mental health?

Despite major advances in the acceptance of LGBTQ individuals within the APA, there are still many real-life challenges for them in society at large. That can trigger several stress related disorders that can lead to both mental and physical ailments. I was a Co-investigator on a large NIMH grant to examine the cognitive effects of HIV in gay men. Apart from the cognitive variables we measured, we also did a complete psychiatric assessment in the 300 gay men volunteers, and found that irrespective of HIV status, a significant proportion of the subjects suffered from anxiety, depression, and substance use. Thus, the APA must help in wellness and resilience education and training as early as possible in LGBTQ individuals when they initially recognize their sexual / gender identity and provide them with support and early biopsychosocial interventions to help them accept themselves and prevent the development of stress-related disorders. Coming out early is vital to avoid the stress and anxiety of living "in the closet". Peer support is vital, and I am heartened by what the AGLP has accomplished for its APA members.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

The APA as the leading psychiatric organization in the U.S. and the world, must use its moral authority take strong stands against discrimination and abrogation of civil rights of LGBTQ, as it must also do for all oppressed minorities. This would be reflected not only by strongly worded position statements, but also by intense lobbying with policy makers and legislators, and by partnering with other medical and social organizations who share our human values. We must persist until our goals of full civil rights for LGBTQ are realized.

What can a psychiatrist do in their practice to better serve the LGBT?

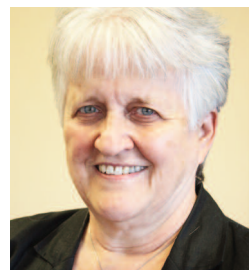
Several ways come to mind: 1. Educate themselves about the LGBTQ community and the challenges they continue to face, 2. State on their website that LGBTQ who need psychiatric care are welcome, 3. Have meaningful conversations with LGBTQ colleagues about their issues, 4. Introspect as to whether they may harbor an unconscious bias towards LGBTQ, 5. Educate medical students and residents they supervise or teach about the special needs of the LGBTQ individuals

I hope the above responses will help my AGLP colleagues decide whether I deserve their vote.

Vivian B. Pender, MD - NO RESPONSE RECEIVED BY PUBLICATION DATE

Distinguished Life Fellow
vp52@columbia.edu • (212) 496 2856

TREASURER



Ann Marie Sullivan, MD

Ann Marie T. Sullivan, MD

Distinguished Life Fellow
drannsullivan@gmail.com
(347) 262 2610

Why do you think AGLP members should vote for you?

Disparities in access to care, quality treatment and discrimination in our healthcare system are critical issues for the LGBTQ community. As a public sector psychiatrist working in large systems of care, I am well aware of these disparities and the challenges in eliminating them.

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As an officer of the APA I will work within the APA and with AGLP to address these through 1) Federal and state advocacy, 2) Education throughout the medical profession and 3) Enforcement of parity.

The Treasurer must also keep the APA financially strong into the future. As the current Commissioner of the New York State Office of Mental Health, and previously as the CEO of a public hospital, I have the skills to manage large budgets and implement strategic financial planning. My leadership roles in the APA as current Chair of the Finance and Budget Committee, and past roles as Speaker of the Assembly and member of the Board of Trustees, give me the APA experience to be an effective Treasurer.

What is the next step for APA in terms of LGBTQ mental health?

The APA needs to continue a robust platform in key areas to ensure quality mental health care for the LGBTQ community. Three key areas include: 1) work to eliminate disparities in access to care, and actively promote services for the specialized needs of the LGBTQ community; 2) work to implement effective education on LGBTQ health and mental health in the training programs of medical students, psychiatric residents and all physician residencies; and 3) work to specifically target the review and enforcement of covered services and payment for treatment and services that affect LGBTQ patients.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

APA's advocacy division needs to be a major force working at the federal, state and local level for LGBTQ civil rights. The APA must be a champion for civil rights at the national level, but also needs to strengthen its role in assisting members and district branches in identifying and intervening on issues at the state and local level as well.

Psychiatrists also need to be supported in their personal and professional lives in dealing with these recent setbacks and APA should expand its outreach and work with AGLP and the APA LGBT Caucus to meet member's needs.

What can psychiatrists do in their practice to better serve the LGBT?

Psychiatrists in practice need to be knowledgeable about the issues, needs and the best practices available in working with their LGBTQ patients. Psychiatrists need to know, understand and incorporate this knowledge in their work with each individual patient. We also need to be advocates with insurers and systems of care to ensure our patients receive the services they need.

Psychiatrists should also be knowledgeable about the social determinants and societal issues that affect their LGBTQ patients and the impact they have in their treatment and in their lives.



Richard F. Summers, MD

Richard F. Summers, MD

Distinguished Life Fellow
richardfsummersmd@gmail.com
(610) 527 4112

Why do you think AGLP members should vote for you?

I am a straight cis-gender white male psychiatrist who strongly supports the equality, rights and inclusion of gay, lesbian, trans, bisexual, queer, and questioning individuals and hopes to continue

to advance their inclusion in every regard in my leadership activities. In my numerous leadership roles at the APA, and as Co-Director of Residency Training and now Senior Residency Advisor at University of Pennsylvania, I have made a commitment over many years to understanding the experience of LGBTQ patients, colleagues, friends and members of the public.

Although we have made significant gains in achieving equality, justice and respect for LGBTQ Americans, we have a long way to go, and there is reason to worry greatly that the national climate regarding attitudes, policy, and laws related to LGBTQ individuals, is in danger of turning more discriminatory and reversing some of those gains.

Were I to serve as Treasurer of APA, my leadership would focus on what is best for psychiatrists and psychiatric patients, including LGBTQ individuals, and I would rely on consultation and input from all constituencies within APA, including AGLP and LGBTQ Caucus members.

What is the next step for APA in terms of LGBTQ mental health?

We need to continue to broaden our inclusion of LGBTQ members of APA in all aspects of the organization. Saul Levin's leadership of our organization has resulted in important gains, including his visibility as the first openly gay CEO and Medical Director of APA. But, we need to continue to promote LGBTQ members in the elected leadership, Board of Directors, Assembly, Councils and Committees, and the Foundation. We need to develop position statements and materials that champion LGBTQ mental health issues and support training of all psychiatrists in the unique challenges facing LGBTQ patients, as well as continue to support and nurture experts with especially deep knowledge and expertise.

If I am elected to the position of Treasurer of APA, I would make sure that the voices of the AGLP and APA LGBTQ Caucuses are heard in our financial decision-making.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

APA has the unique opportunity to use our "bully pulpit" as a leading national organization focused on mental health. We are at a unique point in the history of our field because there is increased awareness and interest in mental health and mental illness in the national discourse — partially because of recognition of the prevalence and seriousness of mental illness and its impact of many social problems, but also because of the rise of violence — and it is an opportunity for APA to lead in that national discourse to promote awareness, diversity and inclusion for LGBTQ Americans, especially those with mental illness. If elected, I would also use my platform to address discrimination and issues of access of care.

What can a psychiatrist do in their practice to better serve the LGBT?

Excellent and sensitive care starts with humility and an interest in learning. As psychiatrists, we can never know everything we need to know about that diverse patients we see. But, we can know what we don't know and make it our business to develop fundamental understanding of the major groups of individuals we see and treat. Psychiatrists need to understand the social challenges LGBTQ individuals face and the common struggles they deal with, and they need to be open to understand the wide range of sexual and gender experiences of the patients they see. They need to approach the care of LGBTQ individuals (like all patients) with commitment, openness, humility, warmth, empathy, and a strong medical knowledge base.

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The Candidates Respond: AGLP Q & A Session

*Continued from page 8***TRUSTEE-AT-LARGE***Frank Clark, MD***Frank Clark, MD**

Fellow
 tapkidmd@gmail.com
 (312) 286 0890

Why do you think AGLP members should vote for you?

The members of the Association of LGBTQ Psychiatrists seek to promote mental health equity by advocating for a community that is often marginalized by society. I too join in their fight as a young black male psychiatrist, who recognizes the importance of intersectionality of LGBTQ and

minority health. I have served in many leadership roles in organized medicine that have allowed me to collaborate with various other advocacy groups. During my tenure as chair of the American Medical Association (AMA) Minority Affairs Section Governing Council, I along with the leaders of AMA Advisory Committee on LGBTQ Issues and the Medical Student Section Minority Issues Committee co-sponsored sessions focused on the intersectionality of LGBTQ and minority health. I believe that collaborations such as these are imperative for our American Psychiatry Association, if we hope to improve the health outcomes of the LGBTQ community. I am committed to help foster those collaborations.

What is the next step for APA in terms of LGBTQ mental health?

Our APA serves as a vehicle to help provide resources for patients and families in order to enhance their knowledge and understanding of various topics related to mental health. Currently, under the category of "Patient and Families" on our website there are links for additional topics that do not include LGBTQ mental health. One suggestion as we move forward in our advocacy efforts would be to provide educational materials for our patients and their families regarding this important topic.

Other steps the organization could take in terms of LGBTQ mental health center around promoting leadership opportunities for individuals who identify as LGBTQ. It is essential for individuals to have a seat at the table that welcomes inclusivity and reflects the growing diverse population.

How you plan to support LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

I view my position as Trustee-At-Large as being a champion for mental health equity on a local and national level for the LGBTQ community. Discrimination is a social determinant of health and mental health that can have deleterious effects on person's well-being. History is replete with examples of discrimination in the LGBTQ community. I currently serve as one of the APA delegates to the AMA House of Delegates. I am proud to say that my colleagues and I recently provided active testimony in favor of a resolution that asked the AMA to develop model state legislation to oppose conversion therapy for sexual orientation or gender identity. The resolution was adopted and is now official AMA policy. I will continue to use my voice in my new position to speak on behalf of the LGBTQ community as we seek to fight to narrow the mental health disparity gap.

What can a psychiatrist do in their practice to better serve the LGBT?

The therapeutic alliance remains essential to providing the best care for communities, regardless of race, socioeconomic status, gender, or sex. That being said, I believe we as psychiatrists must practice cultural humility and acknowledge our implicit biases when working with individuals in the LGBT community. We must be

willing to increase our knowledge and understanding of the barriers that individuals in this community face on a daily basis. I also believe that collaboration with other disciplines in medicine who have expertise in working with the LGBTQ community will help us provide optimal care.

*Mark Komrad, MD***Mark Komrad, MD**

Distinguished Fellow
 mkomrad@aol.com
 (410) 494 4411

What is the next step for APA in terms of LGBTQ mental health?

- Increase focused education on marginalized LGBTQ+ populations in medical student and residency training through encounters with psychiatrists who are LGBTQ+ leaders from the local community. Also, the APA needs to put on

programs watching and discussing excellent media depictions of the mental health needs of this community, such as the FX series POSE.

- Improve partnerships between the APA and other advocacy/lobbying organizations at the state and national level to educate legislators about the current state-of-the-art understandings of LGBTQ+ persons, and the need for more targeted mental health resources for them.
- As a psychiatrist highly experienced with the media, I want the APA to make use of their excellent studio resources to recruit LGBTQ+ psychiatrists to do short video interviews about their personal experiences as persons with these preferences and how that informs their understanding of the mental health needs of others in this domain. These should be then posted on YouTube and social media that may be particularly accessible to young people.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

I am approaching this issue from my background as a medical ethicist, as well as a clinician.

- I will maintain the attention of the APA Board on the recent roll back in areas of LGBTQ+ human rights. I will ensure that the APA is diligent in its opposition to marginalizing gays: e.g. allowing discrimination justified by religious belief and attacking transgender people with policies like those prohibiting them from military service.
- As a Trustee-at Large Board member I will have some influence on the scientific programming at our annual meetings. I will work with to the programming committee on the need to encourage and support scientific sessions on the mental health consequences on LGBTQ+ patients of emerging changes in laws and policies. Also, I want to support recent APA initiatives on diversity and health equality.

What can a psychiatrist do in their practice to better serve the LGBTQ+?

- Psychiatrists need to be encouraged to make more inquiries into the possibility that they have an LGBTQ+ patient, as that is often unasked and unaddressed. This knowledge can reveal sources of stress and be an important lens in which a patient's psychological suffering can be understood, both in their developmental years and as adults.
- Psychiatrists need more education about LGBTQ+. This year, the APA

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President asked me to put on a symposium at the annual meeting in San Francisco, in recognition of the APA's 175th anniversary, about some aspects of psychiatry's history that were wrong turns and regrettable. That symposium, which I entitled "Dark Psychiatry," included a talk by David Scasta MD about this particular part of American Psychiatry's history and the APA's evolution in its attitudes and understandings of homosexuality. This was an extremely helpful and lively symposium that illuminated many attendees.

- Understanding and treating LGBTQ+ issues must be in the common toolbox of all psychiatrists, and not considered primarily something to outsource to colleagues with a special interest and expertise. However, there may be times when such experts need to be consulted; it is important to know who those psychiatrists are in one's community.



Michele Reid, MD

Michele Reid, MD

Distinguished Life Fellow
mreid@cnshealthcare.org
(313) 575 6809

Why do you think AGLP members should vote for you?

Throughout my 35-year career, my focus has been on ensuring that underserved populations have access to quality and culturally competent care. As Chief Medical Officer at CNS Healthcare, a Community Mental Health Center serving Wayne and Oakland Counties in Michigan, I was a member

of a team that, in 2018, sought and received a two-year federal grant to become a Certified Community Behavioral Health Clinic. This funding includes requirements to improve access to culturally competent care for the LGBTQ community. Our needs assessment survey documented areas of need for the LGBTQ population including suicide, depression, alienation, substance abuse and lack of basic care, especially among those who live in poverty. As a result of discrimination, older members of the LGBTQ community are often less likely to participate in many activities created for senior citizens and are more likely to experience depression, chronic illness, alienation and loneliness. We have insured that clinicians are educated and sensitive to the unique needs of the LGBTQ community and the stresses caused by stigma and discrimination. We are expanding our anti-stigma programming to educate mental health professionals and the general public on the unique needs of this population.

What is the next step for APA in terms of LGBTQ mental health?

The Excellence in Mental Health and Substance Abuse Expansion ACT has a focus on expanding Americans' access to mental health and addiction care in community-based settings and improving services to the underinsured, uninsured and underserved. Expanding culturally competent services to the LGBTQ community has been identified as an area for improvement. APA should increase resources aimed at full funding for CCBHC's nationwide and expand from the fully funded 66 CCBHC's in: MN, MI, NV, NJ, NY, OK, OR and PA.

Additionally, the APA should utilize the expertise of our LGBTQ members and ensure that they are included in policy making, promoting evidence-based treatments, and educating the public, the government and health agencies about the needs and vulnerabilities of this population. The APA should advocate for openness, equality and full access to needed services and important government benefits. The APA should be a strong voice for supporting LGBTQ youth and families and advocating for their rights. The APA must continue to support and emphasize culturally competent training to ensure psychiatrists understand and respect the

unique issues facing the LGBTQ community.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

As a lifelong advocate for underserved populations and for the provision of culturally competent services, I feel I have the history and knowledge-based authority to give weight to my support of the LGBTQ community. Working closely with the AGLP and the LGBTQ Caucus and Assembly representatives, I will be an advocate supporting LGBTQ rights always mindful of the health detriments caused by intolerance and discrimination, especially when those attitudes are supported by government policies. I will work with the APA to advocate for the LGBTQ community and add the weight of its membership to ensure that hard won rights of LGBTQ citizens are not reversed and eliminated.

What can a psychiatrist do in their practice to better serve the LGBTQ?

Psychiatrists must be better educated about the unique stresses of the LGBTQ population. We need to be better educated about the developmental pathways for sexuality and gender, and be more aware of the many ways people may feel excluded, misapprehended, misunderstood and mistreated. As assessors and treaters of mental disorders, we must advocate for equality of care. The people we serve must be able to expect culturally competent health care from providers who know, respect and understand them.

AREA 2 TRUSTEE

James Kelleher, MD

James P. Kelleher, MD, MBA

Distinguished Fellow
jkelleher@caa.columbia.edu
(845) 348 2000

Why do you think AGLP members should vote for you? Advocacy for issues important to the LGBTQ community is a key responsibility of APA leadership. I hope to, as Area II Trustee, continue advocacy for transgender in military, preservation of rights to healthcare, oppose conversion therapy, promote greater positive recognition of LGBT identity, and promote further research related to the

LGBTQ community. My interest in these issues is longstanding both as a doctor and as a citizen.

What is the next step for APA in terms of LGBTQ mental health?

In addition to continued advocacy, I think the benefits of more research are great. Identity formation is central to human development. Sexuality is an essential aspect of that process. Cultural factors have made that developmental step unnecessarily difficult for many LGBTQ people. Even with cultural progress, many challenges remain. The APA can help us understand these issues more precisely.

How do you plan to support the LGBTQ community in your new position especially given the setbacks against LGBTQ civil rights?

The APA is a standard bearer for fairness for the LGBTQ community. It has a powerful voice. I seek the role of Area II Trustee to take a leading role in shaping the delivering that message. To learn more, I'll need to listen to the concerns of everyone in our organization. When the LGBTQ community experiences a civil rights setback, like the transgender military ban, the APA must be persistent. The strength and duration of that advocacy can lead to lasting change.

What can a psychiatrist do in their practice to better serve the LGBT?

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The Candidates Respond: AGLP Q & A Session

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Be sensitive to the key issues related to LGBT identity. Continue to grow in understanding historical aspects of the struggle for respect. And finally, foster growth – individually and communally - moving forward.

Glenn A. Martin, MD - NO RESPONSE RECEIVED BY PUBLICATION DATE

Distinguished Life Fellow
doctor@glennmartinmd.com
(718) 268 2044

AREA 5 TRUSTEE

Jenny Boyer, MD

Jenny Boyer, MD, PhD, JD

Distinguished Fellow
jennyboyer@hotmail.com
(405) 535 0594

Why do you think AGLP members should vote for you?

Members of AGLP are not a monolithic group. They have independent issues of concern that may include minority or diversity issues, MOC, licensure and joining the military or other corporate entities. A candidate needs to represent its membership with specific attention to specific population issues.

Focusing solely on gender issues is self-defeating. If I were to focus only on issues of veterans, then non-veterans – a majority of the population, would turn their backs on all my activities. If, however, I am inclusive, then I can engender support for specific populations such as LGBTQ members. By treating groups as spheres of influence, treated equally, then progress is made with the assistance of those that are either neutral to the issue or somewhat negatively biased.

What is the next step for APA in terms of LGBTQ mental health?

Each minority group, whether it is the mentally ill, the homeless, the veteran, the non-white minorities, the LGBTQ community, need to be recognized as having non-mainstream needs. APA, as it does with the veterans/military track at its annual meeting should use that as a model and have a similar track for LGBTQ issues. Awareness, and similarity of needs are what the overarching community needs, not focusing on the differences in lifestyle if inclusion is to be the focus of the APA. Exclusion leads to further discrimination; this is recognized even as you pose the third question below.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

Civil rights are defined by the Constitution and federal, state, and local laws, regulations and ordinances. The legal and social setbacks appear to be secondary to social and cultural prejudices. To show how the lifestyle may differ, the need for the same protections as other social, demographic, cultural, and religious classes, is a basic imperative requires outreach and education of psychiatrists, other mental health professionals and the community

What can a psychiatrist do in their practice to better serve the LGBT?

Psychiatrists should perceive themselves as more than clinicians addressing the mental health needs of one patient or family at a time. Psychiatrists have a responsibility to be community spokespersons, to educate their communities, to not

refuse to treat patients whose lifestyle is different from theirs. My husband became involved in dealing with the AIDS epidemic before it was even called AIDS. He was effective because he treated all he met as individuals, some he liked; some he did not. It was an individual approach which allowed him to be effective in communities in which others were extruded or denied entry. The message is – you are different, accepted, but how can we work together toward a goal where all are more comfortable in the community. Sharing of experiences brings down prejudice, and allows more equal participation, constant confrontation does not produce acceptance or brotherhood or sisterhood.



Philip Scurria, MD

Philip L. Scurria, MD

Distinguished Fellow
pscurria59@gmail.com
(601) 883 4017

Why do you think AGLP members should vote for you?

I am an open-minded individual, and I make it my goal to accept all people for who they are. Coming from a small Southern town, I have heard first-hand—from both friends and patients--the pain, shame, and sorrow that an anti-LGBTQ setting can often cause.

From a wider perspective, I believe strongly that all members of the APA deserve a voice in the organization, especially those who are in the minority or in a historically disadvantaged group.

Because I do not come from a historically disadvantaged group, I would not be so presumptuous as to claim that I can fully know the lived experience of AGLP members. However, I am empathetic, aware, and willing to listen.

What is the next step for APA in terms of LGBTQ mental health?

We need to encourage additional research into how being a member of an LGBTQ community affects mental health, approaching this from a biopsychosocial perspective and with sound research methodology. Without dismissing individual narratives and experiences, we need to champion changes backed by data.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

We definitely need to address laws that discriminate against the LGBTQ community and continue to lobby lawmakers so that they are informed about the issues. The recent political climate has become conservative and intolerant in many aspects. Our influence is needed to redress this closed-minded view.

What can psychiatrists do in their practice to better serve the LGBTQ?

Access to care for all psychiatric patients is a major issue. I am the only full-time psychiatrist for a 50-100-mile radius of my town. We need more psychiatrists and that can only be accomplished by working with the ACGME to obtain more residency spots. Individual psychiatrists can be active in their communities to support LGBTQ activities and to educate the public on LGBTQ issues. We must fight the prejudice that has come from years of misunderstanding and narrow thinking.

I would be glad to discuss any issues with members of the AGLP. Thanks again for giving me this forum to express my views.

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RESIDENT-FELLOW MEMBER TRUSTEE-ELECT (RFMTE)

Mariam Aboukar, DO - NO RESPONSE RECEIVED BY PUBLICATION DATE

Resident Fellow Member

maboukar@gmail.com • (614) 446 0500



Aatif Mansoor, MD

Aatif Mansoor, MD

Resident Fellow Member
aatif.mansoor@gmail.com
(304) 388 1022

Why do you think AGLP members should vote for you?

As a resident training in both psychiatry and internal medicine, I am in a position to understand healthcare disparities amongst LGBTQ patients from a psychiatric AND medical perspective. This allows me to approach patient care in a holistic manner, and this approach would give me a unique

perspective amongst the other RFM Trustee-Elect candidates. I have advocated for the rights of minority groups in all stages of my medical training, and my values and convictions have not changed in residency. As RFM TE, I believe I can be a strong advocate who would work alongside the AGLP and the APA LGBTQ caucus.

What is the next step for APA in terms of LGBTQ mental health?

I do believe the APA has been ahead of other professional societies in terms of taking a stance on relevant issues, and I believe the APA needs to remain a leader amongst the medical professional societies when it comes to issues directly affecting LGBTQ patients and communities. I think the 2013 APA position statement on homosexuality was an important stance for the APA to take, but I believe position statements like this need to be coming out years (if not decades) earlier. I say this not as a critique of the APA in terms of inaction, but more so on the timing of such action. The APA should advocate for rights that are not yet afforded to LGBTQ patients, instead of making statements at politically opportune or less "risky" times.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

Given the current political climate, now is NOT the time to back down from fighting for equality and civil rights, in fact, it is the time to fight for what we stand for. I believe that any effective leader needs to have a strong foundation of knowledge, both to articulate their beliefs and convey this message to others. My platform focuses on creating educational psychiatric curriculum for residents in all specialties to use, focusing on topics residents from other specialties may not often think about (or be incentivized to think about). LGBTQ health would be an integral part of such curriculum. It will be these residents who will represent our field in the near future (whether they practice psychiatry or not), and it is imperative that they are educated on LGBTQ issues that may otherwise go uncovered. Additionally, I plan to consistently vote in favor of taking progressive stances that stand for what I believe is right - equal access to high quality, comprehensive healthcare for all.

What can a psychiatrist do in their practice to better serve the LGBT?

This can apply to psychiatrists, as well as any medical professional, but there are seemingly simple things that every psychiatrist should already be doing such as asking their patients their preferred pronouns and using said pronouns (this practice should be reflected by all medical professionals and staff), ensuring

clinics/hospitals use forms that are inclusive of individuals of all genders, and gender non-conforming individuals. Additionally, we need to be allies when we are with patients AND when we are with colleagues - we are responsible for changing the stigma against LGBTQ people that exists not only in our communities, but WITHIN THE MEDICAL COMMUNITY! Additionally, we as psychiatrists need to take time to study and understand the healthcare disparities found in LGBTQ communities nationally and regionally and understand the social underpinnings as to why such disparities exist, all in order to better serve our patients.



Sanya Virani, MD

Sanya Virani, MD, MPH

Resident Fellow Member
svirani@maimonidesmed.org
(612) 756 5552

Why do you think AGLP members should vote for you?

As a woman of color, I understand the challenges that minorities face. I consider myself a strong AGLP group ally who is eager to represent the voice of minorities because I would love to see our profession become more and more inclusive, and

diverse - it is truly the best way to improve patient care. Some of my endeavors in my potential new role would be to promote recognition of the unique challenges to addressing LGBTQ mental health through educational initiatives. I see AGLP as one of the most important ways to bring patient-centered care to focus for the LGBTQ population, therefore I will actively strive to create avenues for closer RFM involvement in this group.

What is the next step for APA in terms of LGBTQ mental health?

Education, education, education, more specifically:

- Promoting continued training for psychiatrists across the US in being respectful, inclusive, and compassionate towards their LGBTQ patients.
- Promoting culturally competent care to the LGBTQ population.
- Educating psychiatrists and other mental health providers (especially in rural and suburban areas) on working with LGBTQ individuals, especially transgender patients respectfully and compassionately, and involving them in decision-making.
- Starting a larger conversation around gender dysphoria and transgender care and taking a more focused approach to the issue of LGBTQ suicide and substance use issues.

How do you plan to support the LGBTQ community in your new position especially given the recent setbacks against LGBTQ civil rights?

I am fortunate to serve on APA's Assembly as the Area 2 NY State RFM Representative. This has given me a platform to be the voice of RFMs on current issues that need advocacy efforts. I wish to continue this approach (although there is not always full support from APA's membership) and bring this experience to my potential new position on the Board of Trustees and suggest creative avenues for promoting political/civic activity by psychiatrists. I think psychiatrists taking an active and vocal stance on political issues that advocate for their patients is important. Promoting evidence-based, scientific views on LGBTQ care/issues is one way to do that. This brings me back to education (especially in light of recent setbacks): I think it would be very important to circulate resources and information regarding standards of care, and advocating for LGBTQ patients - I am particularly referring to WPATH (definitely among the best for trans care: I find many useful

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Listings of Upcoming Subspecialty Meetings of Interests to Members

Many AGLP-ers are members of other organizations such as the ones listed here. As a way to increase the visibility and effectiveness of AGLP, members that participate in other organizations are encouraged to hold gatherings at these meetings to increase networking potentials. In the past these have ranged from a hosted get-together at a member's home to more formal presentations combining the issues central to AGLP and the primary meeting issue. If you are interested in improving communications between the subspecialties and AGLP, contact our Executive Director, Roy Harker, CAE, for more details and suggestions.

American Academy of Psychiatry and the Law (AAPL)
<http://www.aapl.org/>

American Academy of Psychoanalysis and Dynamic Psychiatry
<http://www.aapdp.org/>

American Association for Emergency Psychiatry
<https://www.emergencypsychiatry.org/>

American Association for Geriatric Psychiatry (AAGP)
<http://www.aagppa.org/>

American Association of Directors of Psychiatric Residency Training (AADPRT)
<http://www.aadprt.org/>

American College of Psychiatrists
<http://www.acpsych.org/>

American Psychiatric Association (APA)
<http://www.psych.org/>

2020 APA Annual Meeting • Philadelphia, PA • April 25-29

2021 APA Annual Meeting • Los Angeles, CA • May 1-5

Association of Women Psychiatrists
<http://www.associationofwomenpsychiatrists.com/index.php>
 Meetings have been in conjunction with the Annual APA Convention

Black Psychiatrists of America (BPA)
<http://www.blackpsych.org/>

■ ■ ■

Secretary's Column

Continued from page 4

tionships, homophobia/anti-homosexual attitudes, public policy, psychodynamics/psychoanalysis, research, transgender issues, bisexual issues, interpersonal violence/survival sex, and substance use.

Please take a moment to let me know if there are topics that you think we are missing. Also please send me content that you think is essential reading for anyone looking to improve their knowledge around LGBTQ care. The education section of our website is an area we're very proud of, and we want to remain one of the primary resources on LGBTQ mental health.

■ ■ ■

JGLMH available online FREE to AGLP Members



The *Journal of Gay and Lesbian Mental Health*, the official journal of AGLP, is now available for viewing online free to all AGLP Members. The content is searchable with search words and phrases, and you can even download and print particular articles if you like.

The production editors at Taylor & Francis have developed a new and streamlined way to access all of the content for articles published in the *Journal of Gay and Lesbian Mental Health*. AGLP members with valid and

current memberships can now access the Journal directly through the AGLP website free of charge as a member benefit. Go to www.aglp.org, click on the Members Area link (upper right hand of the screen) and once you are logged in, a box will appear on the right side of the blue banner to access the content.

Online help is available for any problems you may encounter. We hope that this new method will provide greater ease and dependability to the entire process.

■ ■ ■

The Candidates Respond: AGLP Q & A Session

Continued from page 12

publications listed on their website and their standards of care are the gold standard), Gender Identity Research and Education Society in the UK, the APA's section on LGBT health, materials by SAMHSA and finally the curriculum on the AGLP's website, which includes a detailed history of sexual and gender minority psychiatric research and provides many publications.

What can a psychiatrist do in their practice to better serve the LGBT?

- Get comfortable discussing LGBTQ issues and being upfront and respectful about bringing up those questions early in the course of treatment e.g. asking about preferred pronouns/names and even recording sexual histories appropriately.
- Provide resources and education, especially in underserved areas where LGBTQ people are still forced to remain closeted due to fears of retaliation in their personal lives, in their jobs, or in social settings.
- Do small gestures - keep an LGBTQ-signaling book or item (i.e., a rainbow pen) on display in the office to make LGBTQ patients more at ease and willing to bring up their concerns with their psychiatrists. Overall this sends the message that psychiatrists are making their workplaces more tolerant and educating themselves and associated staff.

■ ■ ■

Planning for Philadelphia

Continued from page 2

skyscraper constructed in the country.

The Local Arrangements Committee is proud to invite you to our city. We'll be following up with more details, events, and suggestions for things to do in the near future. Stay tuned through our website at www.aglp.org.

I'll look forward to greeting you personally in Philadelphia!

■ ■ ■

THANKS TO THE FOLLOWING WHO HAVE GENEROUSLY SUPPORTED AGLP FOR 2019-2020

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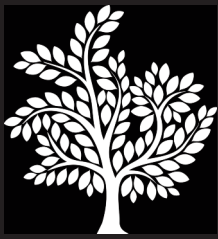
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CURRENT BALANCE: \$91,285.23

GOAL: \$100,000



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| | |
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AGLP Annual Fall Business Meeting Minutes

October 5, 2019, 1:00pm
New York, New York

Sarah Noble, M.D., Secretary

SNoble@aglp.org

I. Fryer Award

A. Naming the awardee comes up rather quickly

- Goal is to come up with awardee before APA so it can be presented to APA board by the deadline which keeps changing
- Want to create a small working group who will come up with a list of potential awardees
- This will be chaired by the immediate past president (although for this year it will be Pratik and Howard because Erik is on the counsel)
- Amir Ahuja will serve as liaison with APA

B. Funds

- AGLP has raised around 85k and APA has raised around 10k
- Part of the agreement was that APA would help to raise more money but that has been nonexistent
- Do we need to be more aggressive with them?
- APA still wants us to have 150k in the fund in order to be totally solvent
- APA takes 24% to "administer" the fund

II. Executive dashboard

A. Overview of the ages, ethnicity, gender,

- Had a huge growth in students over the last few years
- Growth has come with pluses and minuses
- More women and trans folk
- But most of the new folk are white so diversity is slipping in terms of race
- Mean age is skewing younger
- But that also means more cost so we're funding med students and residents

B. Allied members

- Do we see a benefit in reaching out to more allied members as GLMA has?
- For example would we want to have institutional memberships for residencies?

C. Lapsed and New Member Summary

- Board members reach out to lapsed members to gently remind them or find out why they don't want to
- We also reach out to new members

III. Approval of Minutes

A. September minutes reviewed and approved by the board

IV. Treasurer's Report

A. Budget is pretty similar to last year

- We have become somewhat dependent on a large contribution from one of our members
- No new initiatives planned for now
- Royalties about the same
- Student travel fund is quite large and we have talked about expanding the definition to utilize it more
- Expenses for APA down due to it being in APA so we don't need to ship, we might print the guide this year
- But expenses for printing are increasing for journal

B. Member clicks

- The credit card/ member renewal company platform is becoming quite dated
- They offer an upgrade but that would be a 25% upgrade
- Roy will get more details

C. Budget reviewed and approved by the board

V. Longevity of AGLP

A. Legacy Project

- Groups that are queer specific and manage philanthropy
- Or can we help people manage the language of their will to direct money to AGLP
- Is it worth hiring a financial planner to help us determine what makes the most sense for our organization?

B. Delaware Valley Legacy Fund

- Base donation of \$10k
- After that can donate any amount
- There is a small management fee
- DVLF is based in Philadelphia, so they can come to APA in April to do a full presentation

VI. Capital Campaign

A. Kenn Ashley, Mary Barber, and David Scasta and Howard will be working on organizing a campaign to honor Roy

VII. Board Insurance

A. Roy investigating insurance for the board

- Two proposals
- Close in price but not in coverage

AGLP Annual Fall Business Meeting Minutes

Continued from page 16

- Covers board and director in the event that they do something illegal or that affects someone and are taken to court.
- B. Call for proposal to add line item to 2020 budget for Board insurance was accepted by the board
- Will accept Gannon Insurance proposal

VIII. Social Media Management

- A. Social Media Policy
- Roy created this policy
 - Reviewed and approved by the board
- B. Approved formation of a committee of savvy social media users
- Pratik Bahekar and Mark Messih will chair committee
 - Include young people
 - Approved three accounts- AGLP FB, Instagram, and Twitter, and LinkedIn, and John Fryer Twitter
 - Access feeds from Jack Drescher and Kenn Ashley and articles from journal and newsletter

IX. HIV fellowship

- A. HIV fellowship- Marshal Forstein
- 50% of the HIV psychiatrists doing that work because of this program
 - Funding from SAMSA but that's dried up so now from diversity fellowships
 - Gets under-represented medical students into HIV work
 - Still a confounding epidemic in women of color and trans folks
- B. Asking
- Would like AGLP to weigh in via a formal letter to APA about the important of this fellowship to patients managing HIV
 - Because this fellowship/ steering committee and program belongs to no larger committee it can get lost
 - Tristan Gorindo is the staff person at APA and is working very hard to obtain funding from fellowship program
 - The fellowship only requires 12k

X. Newsletter

- A. Working on next edition which should be out by Dec.
- B. Please get your columns in ASAP!!!!

XI. Journal

- A. Good year- 30th anniversary!
- Transition year because went from Chris and Phil being co-editors to Chris being editor in chief to with associate editors

- Super abundance of content so couldn't fit all the articles into our page budget

B. Will get med line application back in Jan

- That will increase submissions and thus rejections
- Will increase volunteerism- U of Toronto pays people academic experience to volunteer on the board
- Measure of respectability

C. Taylor & Frances

- Ongoing struggles with communication
- But would like to increase press releases of important articles
- Brian Vanderbelt is the contact person at APA according to Amir

XII. New Website

- A. Roy and Eric have been working on the new website
- B. Let's plan on a final version for approval by the board in Dec
- C. Please send ideas for content
- Photos of Fryer awardees
 - Videos of members talking about why they love AGLP
 - Encourage folks to enhance their member profiles for the referral page

XIII. New business

- A. Lawsuit that we're listed on with Lamda legal comes to trial on the 10th of Oct
- B. Next year there is no IPS but there is an American Association of Community Psychiatrists Oct 9-11th in Philadelphia
- C. ACAP is meeting in SF next year Oct 19-24th
- D. If anyone is interesting in being on committees or councils in the APA contact the caucus and they will communicate with the APA president- contact Ubaldo Leli or Andy Tompkins

■ ■ ■

JGLMH Resident Paper Award 2020

The Journal of Gay and Lesbian Mental Health (JGLMH) is a quarterly, peer-reviewed journal indexed by PsychInfo. JGLMH is the official journal of AGLP (www.aglp.org). We are seeking outstanding resident papers on LGBTQ mental health; these can be original research papers, case series and detailed case reports, or review articles. The award includes \$500, publication in JGLMH, and assistance with travel to the AGLP annual meeting to present the resident's work. The AGLP Annual Meeting is held concurrently with the APA Annual Meeting, this year in Philadelphia, April 25-29, 2020.

The deadline to be considered for a 2020 award is March 1, 2020. Co-authored papers are eligible as well, but the resident must be the first author. Entries can be submitted to editors@aglp.org.

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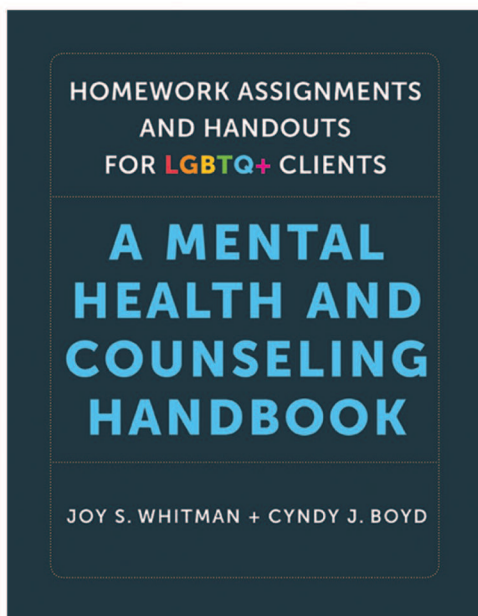
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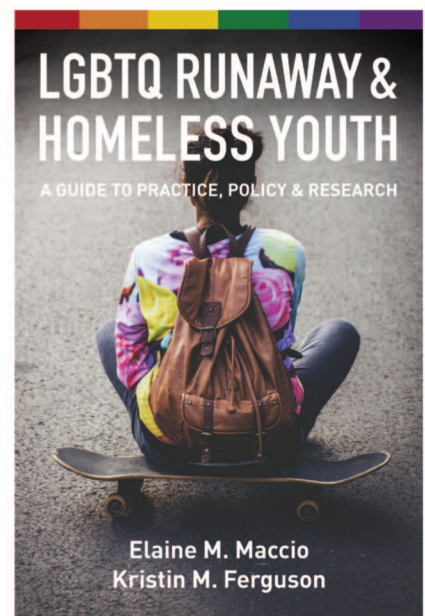
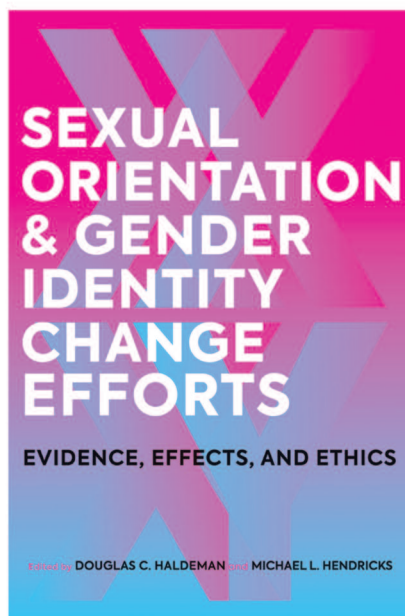
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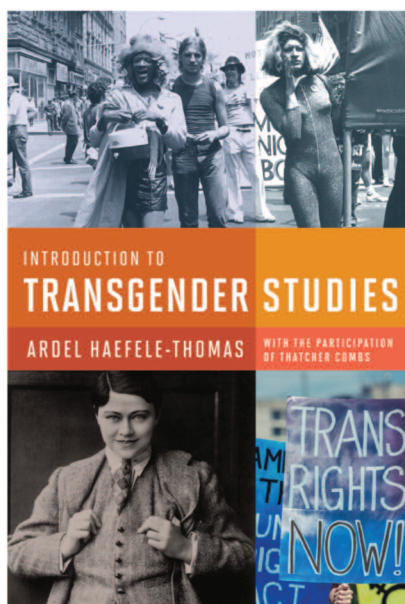
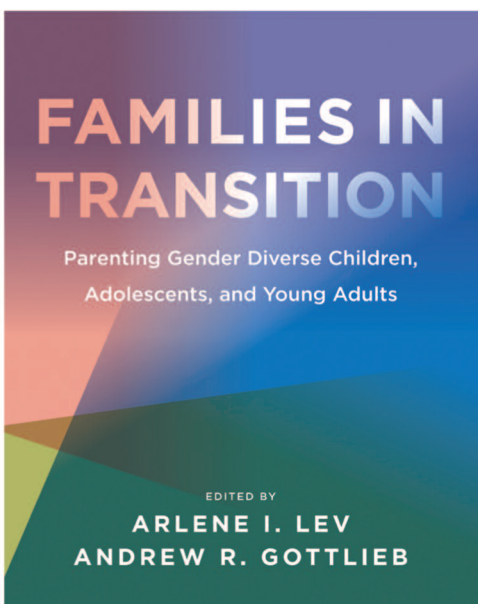
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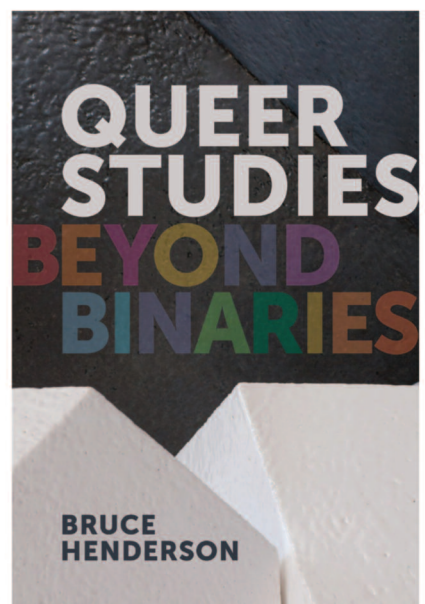
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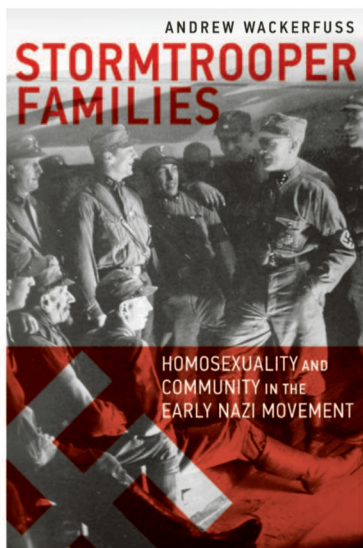
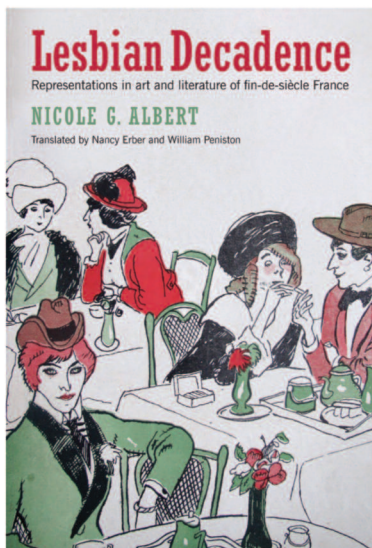
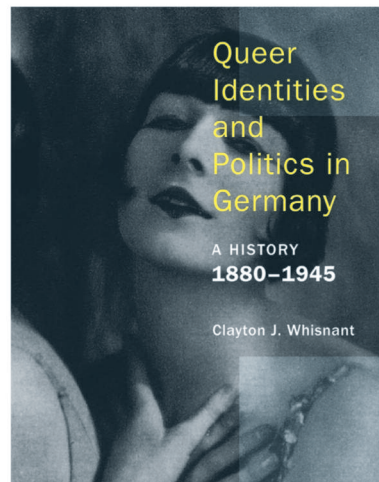
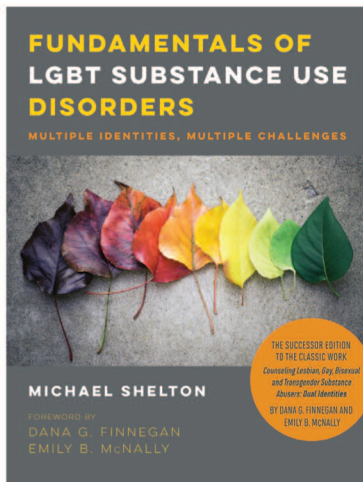
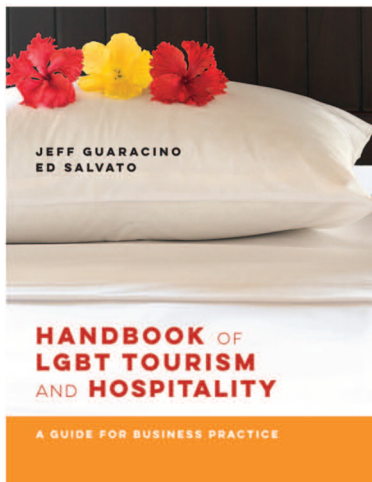
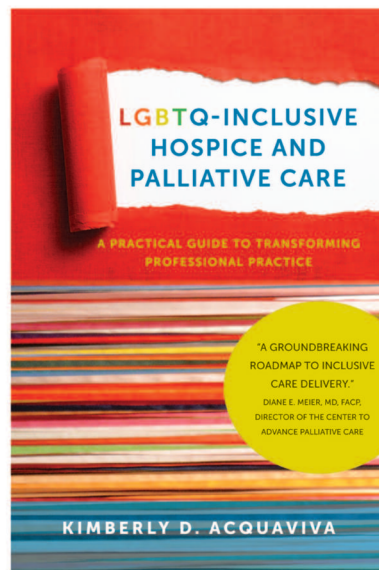
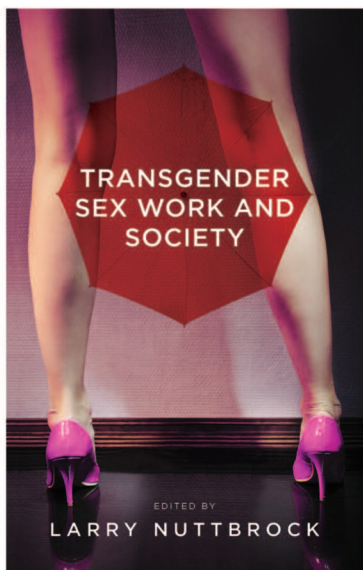
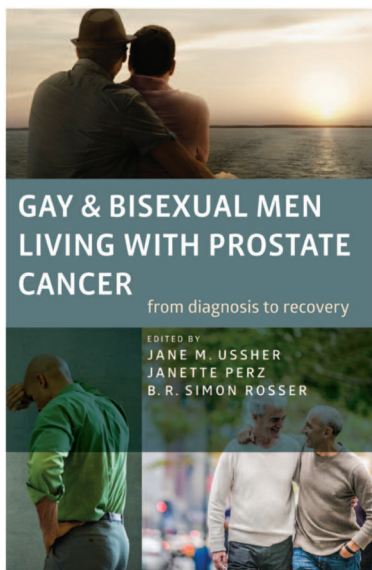
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- RESIDENT - \$60
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(CLGBT is the official APA minority caucus for lesbian, gay and bisexual psychiatrists. Membership lists are maintained by the APA; confidentiality is not assured. Membership is free.)

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