Greetings, AGLP Members, from the Local Arrangements Committee for the upcoming Annual Meeting in Toronto! We hope to have an action-packed week of events in and around Canada’s largest city to complement what will be an excellent AGLP and APA conference!

We hope you’ll come away from the conference loving this city as much as we do. Toronto has always been the immigration hub of Canada and is therefore one of the most multicultural cities in North America, with a bounty of music, art and cuisine from the world over. We’ve also been experiencing a fine arts and architecture renaissance of late, with the construction of a new opera house, and major additions underway to several prominent museums. The Royal Ontario Museum’s fabulous new crystal-shaped wing by architect Daniel Libeskind (also the architect for the new World Trade Center in New York) is sched-
Editor’s Column: To Thine Own Self Be True

George Harrison

Just in case you haven’t had your fill of Brokeback Mountain, the movie based on the short story by Annie Proulx which is filling the gay (and straight) press, I wanted to weigh in with my own thoughts. Much of the discussion has framed the story as a tragic tale of unexpected love between two men thwarted by society and the values that surround them. The pathos stems from the couple’s desire for a connection which is just out of reach. The consequence of this failure leaves them and the people around them marked by this pain.

Maybe the heart of this story is not an ill fated love affair but a more personal story of identity. Ennis struggles unsuccessfully to walk away from his true nature. He can neither love Jack or abandon his passion and give himself over to the life he thinks he should inhabit. Ennis ends caught between two worlds unable to make his way in either.

And what a queer story this is. The task of discovering the true self and finding a way to accommodate it in one’s life is a basic tenant of the queer experience. All of us have had the surprising discovery that we are different than we expected, different than we were told we would be. We are then challenged to deal with it as best one can.

But this experience is not limited to sexual preference or even the queer community. It is a common human experience to find something about oneself which feels broken or shameful and be forced to deal with it. As mental health professionals we facilitate this process for our patients every day, allowing space for what has been called “the authentic self.” We have all seen our patients (as well as ourselves) unearth the unwanted parts of the self and by incorporating these parts into a definition of self move forward in life. Brokeback Mountain gives us the cautionary story of the consequences of believing that we can turn away from this task.

Annie Proulx so deftly observed this in the closing lines of her short story: “There was some open space between what he knew and what he tried to believe, but nothing could be done about it, and if you can’t fix it you’ve got to stand it.”

On other topics, I wanted to highlight a few items in the Newsletter. Chris McIntosh of the local arrangement’s committee supplies us with a teaser for the convention. It’s a good reminder for us all that May is not far away and now is the time to make plans. This is the Candidate Issue of the Newsletter and we were lucky to have many respondents to our questions again this year. If you haven’t voted yet, this may help inform your process. Given the events of the last year with the Civil Marriage Statement it should be obvious that having people in office that are committed to our interests is more important than ever. And speaking of commitment, Mark Townsend sends us his Caucus report. Thanks go to Mark for this and his work in the Caucus. Our thoughts have been with him this year as he has met such unexpected challenges in his home town of New Orleans. Glad that you and your family are safe, Mark.
President’s Column

Dan Karasic

January 20, 2006

Today Tim and I mark our tenth anniversary as a couple. Relationships often develop in unexpected ways, but this is especially true for same-sex couples. We know well what many heterosexual marriages of 10 years look like, from the visible examples around us. But ten years ago, I could not have predicted that I would be celebrating this anniversary, or writing this column.

Of course, in many ways, our relationships are not that different from those of our heterosexual friends, colleagues, and neighbors. Our relationship is affected by our community of friends and family, as well as by my identity as a psychiatrist (and as a DJ’s spouse), and my partner’s identity as a DJ (and as a psychiatrist’s spouse). Sometimes in our San Francisco community, sexual orientation seems like one of the less notable distinguishing traits of our relationship.

One way in which same sex couples are very different is in our treatment by the larger society and by the law. In the first year of my relationship with Tim, I chaired a subcommittee of UCSF’s LGB committee that worked on securing equal health benefits for domestic partners. This was an intensely political fight, due to the fierce opposition of then Governor Pete Wilson, but the benefits were won by a single-vote margin of the UC Board of Regents. The vote came down to a conservative Republican trustee abstaining, rather than voting “no.” The power of the individual testimony of dozens of UC employees, at Regents meeting after Regents meeting, made the difference. The meetings were filled with heartbreaking stories of uninsured same sex partners of UC employees. In the years that followed, the University of California changed policy after policy, until today, UC’s LGBT policies are perhaps the most progressive of any U.S. university. Each policy change didn’t happen spontaneously, but rather through the hard work of many UC faculty, staff, and students, to convince the Regents that equal treatment is in everyone’s interest.

Tim and I celebrated our fifth anniversary, on January 20, 2001, holding picket signs and marching through the streets of San Francisco to protest the installation of a new President, one who appeared not to have won the election. In the ensuing years, our relationship became politicized in ways I could never have imagined. On February 16, 2004, Tim and I got married at San Francisco City Hall, along with thousands of our neighbors, and these marriages became fodder for our President’s re-election campaign. There were both victories and losses at the state level across the country in the continuing battle for equal marriage rights.

We are gratified that the efforts of LGBT psychiatrists and our colleagues in the APA have been so successful. The APA endorsed same sex civil marriage, and in Toronto, the APA is awarding AGLP its Distinguished Service Award. Thanks to the generous response by AGLP members, we have met our Gill Foundation matching grant for the John Fryer Award, and beginning this year, the APA will present an annual award and lecture for achievement in LGBT mental health.

In Toronto, we are encouraging any LGBT psychiatrist interesting in getting married to his/her partner to let us know. Non-residents can marry in Canada, and other AGLP members who have married in Canada can offer you advice. We already have one psychiatrist interested in getting married during APA week, and we plan to incorporate a wedding reception into the week of AGLP events. Please contact me if you and your partner are interested in tying the knot this May.

Don’t miss AGLP/APA week in Toronto. And as for marriage: I highly recommend it.

...
Vice-President's Column
Kenn Ashley

Brokeback Mountain seems the darling of the cinema, garnering all types of award nominations. The world has not ended while those conservative talking heads could not get a lot of traction on this issue. On the flip side, it seems like Alto will be next. Just think, if it becomes so intolerable here in the states one can cross the border to Canada. I hope to see many of our members in Toronto in May. Locals are making lists (where to eat/where to dance/what exhibits to see/etc. While you are checking out the city (and maybe thinking of moving), you could just as easily be thinking about getting married. For more information call the Toronto City Hall Marriage License Office at 416-392-7036.

As VP of AGLP I am the facilitator, helping people find their way to the AGLP Hospitality Suite where there will be screenings/presentations of movies/videos followed by discussions as time allows, sitting in a discussion group, convene a committee meeting, etc. Please contact me soon if you are interested in being involved.

We are in the midst of planning the AGLP Symposium--note that this year it will be on Sunday. This year’s symposium will be about Reparative Therapy from a few perspectives, combined with a media training session so the participants will feel more comfortable out on the topic. It would be great to have more comfortable, trained people to speak out against Reparative Therapy.

Happy MLK, Jr Day!

Please call: Office - 212-844-1864
Cell - 646-573-1929
email: kashley@chpnet.org

Nominations
Mary Barber, MD
Immediate Past President

In accordance with our new bylaws, the slate of nominees for elected office in AGLP is being presented ahead of the Annual Meeting. Elections will be held at the Annual Meeting in Toronto in May. Self-nominations for any position can be accepted until March 23, 2006, 60 days before the meeting. Please contact me if you want to be added to the ballot.

Thanks go to Dan Hicks, who served on the nominating committee with me.

2006 Candidates (all terms will be two years):

- President-Elect: Dan Karasic (running for a second term)
- Vice President: Kenn Ashley
- Secretary: Mason Turner-Tree
- Treasurer: Petros Levounis

ANNOUNCEMENT

Unit Chief position available on LGBT/HIV focus unit at San Francisco General

The Unit Chief Psychiatrist position is available on the LGBT and HIV/AIDS focus inpatient unit at San Francisco General Hospital, a major teaching hospital of UCSF, and AGLP psychiatrists are encouraged to apply. The Unit Chief will have a UCSF faculty appointment in the Clinical series commensurate with the person’s background. Overseeing the care of 22 patients, the Unit Chief will supervise two full-time attending psychiatrist team leaders, who have on each team a PGY-1 resident and a MSW. Psychiatric residents and medical students rotate regularly through the unit. There are opportunities to develop programs, teaching materials and clinical research on the LGBT and HIV/AIDS focus. We have recently increased our salary scale and offer an excellent benefits package. California licensure is essential at time of appointment. Please contact Francis Lu, MD, alfrancislu.md@oal.com or Dan Karasic, MD at karasic@itsa.ucsf.edu for further information.
Day trips are possible to the world-famous wineries in the nearby Niagara region. You might also elect to take in the picturesque town of Niagara-on-the Lake, home to the Shaw Festival, celebrating the witty theatrical works of Irish playwright George Bernard Shaw and his contemporaries. Also nearby, of course, are the majestic and romantic Niagara Falls.

Speaking of romance, marriage-minded visitors can contact Toronto City Hall to take advantage of our newly liberalized marriage laws, finally cemented in federal legislation in July of last year.

So whether you come for the culture, the food, to get married, or (oh, yeah) for the conference, we hope you’ll have a gay old time in Toronto in 2006! Look for more details soon when AGLP materials arrive in your mailbox!

AGLP Toronto 2006

Roy Harker

BEGIN your planning for AGLP 2006 Toronto now! AGLP’s host hotel will be the Chelsea Hotel Toronto, located just one block from Church Street. The Gay village is on Church St. between Gerrard and Charles Streets. The Village is centered around Cawthra Park, behind the 519 Church Street Community Centre. The AIDS Memorial is situated in the park and is well worth a visit. Church Street is lined by the bars, restaurants and small shops. The address of the hotel is 33 Gerrard Street West, Toronto, ON M5G 1Z4 Canada.

This year you will be able to make your hotel reservations through the AGLP website (www.aglp.org). The cutoff date for these reservations is February 1, 2006. After February 1, room reservations will be taken according to availability. For questions regarding your reservation, call Travel Planners, Inc., the official housing agents for APA and AGLP, at 800-221-3531.

The hotel, 15 km from Pearson International Airport, boasts six restaurants and an adult-only recreation and health club, featuring state-of-the-art facilities.
Annual Report
Dan Karasic, MD, AGLP President

The Association of Gay and Lesbian Psychiatrists is an affiliated organization of the American Psychiatric Association, and a community of psychiatrists that educates and advocates on Lesbian, Gay, Bisexual, and Transgender mental health issues. AGLP traces its origins to informal gatherings of gay and lesbian members at APA meetings in the 1960’s, which became the Caucus of Gay, Lesbian, and Bisexual Members of the APA in the 1970’s. It has been called the Association of Gay and Lesbian Psychiatrists since 1985. AGLP strives to promote the personal and professional growth of all LGBT psychiatrists, and to be the recognized expert on LGBT mental health issues.

AGLP’s goals are to:
- Foster a fuller understanding of LGBT mental health issues;
- Research and advocate for the best mental health care for the LGBT Community;
- Develop resources to promote LGBT mental health;
- Create a welcoming, safe, nurturing, and accepting environment for members;
- Provide valuable and accessible services to our members.

Programs and Services Provided by the Association in 2005:

1. Liaison with the American Psychiatric Association (APA). AGLP members regularly give presentations at APA meetings, educating a broad range of psychiatrists and mental health professionals about LGBT mental health issues, actively participating in the workshops and symposia at the APA Annual Meeting. AGLP members, individually and through the APA Caucus of LGB Members and Committee on LGB Issues, are working to ensure that LGBT issues are addressed in a well-informed way in the writing of the next Diagnostic and Statistical Manual (DSM-V). In 2005, the APA Assembly and Board of Trustees passed an endorsement of same sex civil marriage. Members of AGLP had worked closely with the members of the APA Assembly and Board of Trustees to educate on the value of this endorsement. In 2005, AGLP received Allied organization status, which will give AGLP an Assembly representative, in addition to the representative and deputy representative of the Lesbian, Gay, and Bisexual Caucus of the APA.

In 2005, the APA selected AGLP to receive its Distinguished Service Award. The award will be given in May 2006 at the APA Annual Meeting in Toronto.

AGLP members, along with the Gill Foundation and a bequest from Frank Rundle, raised the $50,000 to endow the John Fryer Award, a new APA award and lectureship for outstanding contributions to LGBT mental health. Members of AGLP and the APA Committee on LGB Issues met to nominate the first awardees. The award will be given for the first time at the 2006 Institute on Psychiatric Services in New York.

2. AGLP Annual Meeting. AGLP presented a CME course in Atlanta in May, 2005. The all-day Saturday Symposium, focused on transgender care. The interdisciplinary faculty of the Symposium presented psychiatric, psychological, psychosocial, and surgical issues in the care of transgendered patients.

3. Mentoring of students and psychiatrists in training. In 2005, we continued to provide medical students with travel scholarships to attend AGLP meetings. Through these scholarships, which are funded through member donations, AGLP hopes to interest gay and gay-friendly medical students in careers in psychiatry. We also strive to mentor students and psychiatry residents in their careers, through special sessions for trainees at our annual meetings, through discounted membership dues which include AGLP’s journal and newsletter, and through a new mentoring program. Through these efforts AGLP hopes to insure future generations of psychiatrists who will be sensitive to the needs of LGBT people.

4. Journal of Gay and Lesbian Psychotherapy. AGLP’s quarterly, peer-reviewed journal continues to provide high quality scholarly discourse on LGBT mental health issues. The Journal is provided to AGLP’s members as a membership benefit, and additionally is carried by over 100 libraries across the US. A search committee was formed to help find the next editor-in-chief. In the interim, Jack Drescher, MD continues his fine work with the Journal.

5. Referral Directory. AGLP publishes an annual directory of gay-affirmative therapists across the country, which is freely available on the AGLP web site.

6. Membership Directory. In 2005, AGLP moved its membership directory online. It is hoped that this will facilitate communication between members, while also reducing expenses for paper and postage.

7. Web Site. We educate professionals and the public through our web site (www.aglp.org), which includes APA position statements of importance to LGBT people, as well as our own educational content. The site gets over 1,000 hits a month.

8. Development. AGLP has received a $10,000 award from the William A. Kerr Foundation for the AGLP Film, and a $15,000
challenge grant from the Gill Foundation for the Fryer award, but development remains a major challenge for the organization to continue to expand the scope of its operations.

9. Awards: 2005 AGLP award recipients include Mr. E. Lynn Harris for the Distinguished Service Award; Roy Harker, AGLP Executive Director, for the James Paulson Award; and Youth Pride of Atlanta for the Stuart Nichols Award.

10. Bylaws revisions enacted at the 2005 Spring business meetings:
- Reduction to one general membership meeting per Annual Meeting
- Implementation of a cabinet structure to the Executive Board with a mix of elected and appointed officers and establishment of the Development Director and Newsletter and Journal Editors as appointed positions to the Board
- Limitation of the President’s ability to approve expenditures without Board approval to amounts under $1000
- Addition of the Caucus and Deputy Caucus Representatives to the Council
- Lengthening of all elected offices on the Board to two years with no term limits, except for the President, which will remain limited to two terms of office
- Council members would not have the ability to vote on Board actions and would serve in an advisory capacity only
- Residents and medical students could now become general members and would have the ability to serve on the Executive Council
- Specific categories of membership would not be delineated in the Bylaws to allow maximum flexibility in defining and changing these categories without Bylaws revision. The only membership divisions to be present in the Bylaws revision would be APA and non-APA
- Provision of email meetings for the Board and Council

11. Reparative therapy video. Work continues on AGLP’s documentary video on reparative therapy. Through this educational video, we hope to inform the public about mainstream’s current views on homosexuality and sexual orientation change treatments, and the potential harms done by reparative therapy practitioners. Our aim is to have a final product which is of high enough quality to be shown on cable television, and to distribute the video free through groups such as P-FLAG. Excerpts from the film were screened in Atlanta.

2005 2004
Total Receipts $135,120.73 $130,018.80
Total Disbursements $131,700.39 $135,800.59
Receipts/Disbursements $3,420.34 $(5,781.79)

TOTAL ASSETS
Beginning of Year $36,825.37
End of Year $37,696.61

*Includes salaries, credit card processing fees, postage, supplies, book inventory and mailing expenses, and telephone and internet services.
APA Candidate Interviews for 2006

George Harrison

As is customary for the Newsletter we have again this year canvassed the current field of candidates for offices of the APA. This year we solicited response from all candidates and had responses from 8 of the 14 who are running. All candidates were asked the following two questions:

1) A central argument against the APA’s statement on same-sex civil marriage was that “divisive social issues” are outside the realm of psychiatry. How should the APA approach social issues when setting policy?

2) If elected, how would you envision your relationship with AGLP and our issues?

Here are the replies for each position with candidates listed in alphabetical order:

Candidate for President-Elect:

Jack Drescher, M.D.

1) Some of our members believe that APA dilutes its professional authority to speak on “pure” psychiatric issues when it weights in on social issues that do not seem directly related to psychiatry. I have two reactions to this argument. First, the political forces that oppose APA positions on social issues usually oppose us on our “purely” psychiatric issues as well (for example, opposition to taxation which funds government programs for the severely mentally ill). Second, in my years of activism against anti-homosexual prejudice in the mental health professions, I have often encountered what I call the “procedural defense.” Those who resort to procedural defenses typically hide behind high-sounding organizational goals and traditions or bureaucratic rules to rationalize their unwillingness to recognize gay and lesbian civil rights.

Psychiatry and medicine are among the most humanistic of professions. Many of our traditional, core ethical principles would never pass muster with ideologues on either side of the culture wars. To avoid staying out of today’s “divisive social issues” would mean radically changing what APA is and ignoring what APA has done for decades. After all, it was APA that first removed homosexuality from the DSM, an act that galvanized the nascent GLBT civil rights movement. APA supports a woman’s right to choose. APA opposes the death penalty. APA believes government should fund needed mental health care for those unable to afford it. APA opposes psychiatrists participating in torture. APA

believes in a biopsychosocial model, which to my way of thinking requires actively engaging with the social issues of our day. If elected President of APA, I cannot see any way our organization can or should remain aloof from social issues that affect our patients and our members.

2) I have been an AGLP member since 1987, have received numerous certificates of appreciation for service from AGLP and I was the 2004 recipient of AGLP’s James Paulsen Award. I have been Editor-in-Chief of AGLP’s Journal of Gay and Lesbian Psychotherapy since 1997 and have served on our Executive Council for many years. I was our caucus Deputy Representative to the APA Assembly for two years and since 2000 have served as Chair of APA’s Committee on GLB Issues.

In my role as AGLP caucus rep and then as Chair of APA’s GLB Committee, I helped the APA draft and then adopt important position statements: raising concerns about the harm done by sexual conversion therapies (2000), supporting same-sex civil unions (2000), favoring second parent adoptions by same-sex couples (2002), and supporting same-sex civil marriage (2005). I have made substantial contributions, in both leadership and support roles, in helping APA take official positions on complex social issues in a pragmatic and non-ideological manner. Even my candidacy for President-Elect reflects some of the changes I have helped bring about in APA. If elected, I can assure AGLP that APA will continue to thoughtfully give due consideration to your issues.

Candidate for President-Elect:

Carolyn B. Robinowitz, M.D.

1) Psychiatry is a biopsychosocial discipline, which studies (and treats) the mind as well as the brain. As such, APA’s approach to social issues must address their psychological and biological effects on our patients. Science should inform our professional activities. I personally support same-sex marriage; my professional action and positive vote for the APA position statement supporting same-sex civil marriage is based on scientific evidence. There is considerable strong data demonstrating the highly negative and destructive impact of stigma, inequality, discrimination and prejudice—whatever the base, focus, or rationale—on mental health.

In approaching social issues or any other issues affecting our profession, we should research the matter in detail. By that, I mean we should thoroughly review the existing knowledge base, and request input from and engage in dialogue with stakeholders representing all aspects of the topic, including those who are concerned with and affected by the

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APA Candidate Interviews
Continued from page 8

matter. Full and open discussion allows us to address the quality of the scientific information, consider implications of proposed policies, and whenever possible, avoid unintended consequences. We should not be silent on issues that affect mental health, and we should engage in coalitions to address such issues, develop appropriate policy, and enrich our advocacy efforts on behalf of those affected.

2). I envision an active partnership and continuing warm and positive relationship with AGLP as an organization, its members and its issues. We share common goals, and have addressed ways to advocate effectively for patients as well as our members. I have worked closely with most of the AGLP presidents, at the APA, as well as the AMA, and was honored to have received the AGLP Distinguished Service Award in 1995, “In appreciation of her unwavering support and nurturance of Gay and Lesbian psychiatrists and her leadership in the struggle for equality of gay men and lesbians.”

In addition to the current formal relationships, generally mediated through official channels (Assembly, Council-JRC-Board), I would establish an on-going working relationship with AGLP and the Caucus, with more frequent direct communication and meetings. I would (if permitted by AGLP) attend AGLP meetings, as well as hold additional small meetings (virtual as well as face-to-face) of my own with representatives of the organization. I would work to include AGLP members not only on components specific to GLBT issues, but also to involve AGLP in the broad range of topics about which APA is concerned.

This proposed action reflects the importance of your issues to me, but it also is an approach I envision in working with subspecialty, minority and under-represented groups to enhance advocacy and increase the value membership. This is a method I have used successfully over the years to build effective national coalitions, as well as assist in leadership development of those previously under-represented.

I plan to limit my clinical work and other professional obligations to have sufficient time to devote to this kind of interaction. Attendance at and participation in leadership and other meetings provides greater mutual understanding of issues, strengthens collaborations, and enhances effectiveness. Such a relationship would be a win-win for psychiatry and our patients, as well as APA and AGLP.

Candidate for Secretary-Treasurer:
Prakash Desai, M.D.

1). I, personally, have little difficulty in taking progressive positions ahead of the rest. I believe that we, as a professional organization, have an obligation that goes beyond the strict confines of “professional” concerns. Would we not have taken a position against the holocaust or apartheid? And would we not have supported women’s right to vote and civil rights for minorities? As members of the larger society, I feel, we must participate in broader dialogues, and especially as psychiatrists we should let our voice be heard when issues impact human dignity or freedom. Some issues are difficult not because they are “socially divisive” but because they have the potential of dividing our own house. In these situation I would spend my energies on cultivating a continuing dialogue among us and strive to educate, advise and ultimately convince those who hesitate in moving forward. As psychiatrists we should embrace the adage that matters such as these are matters for “sitting rather than hitting”. Our power stems from our ability to persuade.

2) I consider myself to be a member of a minority group, and my natural affinities are with minority groups. If elected as Secretary/Treasurer I’ll of course have the special obligations of that office and they must come first, but I’ll also be a member of the board of Trustees. In that capacity, as I have said in my candidacy statement, I will pursue those goals that affect our patients and our profession, for example access to care. Equally important is the access to information and resources for members, DBs/SAs, and I might add the APA caucuses. I will listen carefully to the Assembly, councils and components and to fellow members as individuals or as groups. As a long time administrator of a complex system I learned that the best way to be in touch with the life of an organization is not only to operate with an open door but to periodically, regularly and informally reach out to the field. If elected as an officer of the APA, I will behave in the same manner. I am sure that the leaders Of AGLP are aware that the Chair of the Council on Minority Mental Health and Health Disparities had approached me before the last Assembly meeting where the issue of gay civil marriage was to be brought up and voted on, and I worked with him before and during the debate on the floor. As you know the Assembly supported the action overwhelmingly and I am sorry that the importance of that vote became somewhat clouded by procedural issues in the ending moments of the Assembly’s last session. Gay and lesbian issues will always be important to me and I will always be available for conversation and consultation to the AGLP. Please visit my web site at www.dailysub.com/prakash.htm Please share your thought with me at pdesai@psych.uic.edu.

Candidate for Secretary-Treasurer:
Donna Norris, M.D.

1). Social issues are often also psychiatric issues. The American Psychiatric Association, with more than 36,000 members, encompasses diverse viewpoints regarding which important concerns facing the profession merit policy positions. Some members believe that the APA should address only professional concerns. Social issues are important elements
of my professional identity and are professional concern. Social issues affect the mental health of all and as such are important to psychiatrists. Our professional identity is based on biopsychosocial roots. Historically, APA’s identity as an organization has evolved along key directions. It is the foremost scientifically based professional organization of psychiatrists in the world. The APA has political interests and uses its influence with Congress and other regulatory agencies to improve our patients’ access to health care and the management and practice of medicine. The APA provides and supports education for psychiatrists on the scientific basis and practice of the profession. And, the APA is a strong advocate for patients and for its members.

The APA must be proactive and alert to the changing psycho-social dimensions of our country and their impact on the lives of our many patient groups including women, children, African Americans and other minorities, and those in poverty. APA leadership has rightly established policy positions on a variety of social issues: homosexuality and civil rights (1973); against the use of the death penalty and juveniles (2001) and persons with diminished capacity (2004); in favor of adoption and co-parenting of children by same-sex couples (2002), and same sex civil marriage (2005)- all of which I strongly support. When formulating any policy decisions, the APA must remain committed to sound scientific and medical evidence and to implications for mental health, mental illness and mental illness care. I support using the Annual meeting and other venues to enhance the knowledge base of our members about social issues and their psychosocial importance for patients. As the APA considers social concerns and policy, it is important to seek consultation from members with special expertise in these areas certainly including AGLP to assist in planning a strategy to inform and to educate our membership.

2). If elected, I envision my relationship with members of the Association of Gay and Lesbian Psychiatrists as an opportunity to build on long-standing friendships and help the APA be educated, vigorous, and courageous on social-psychiatric issues.

Candidates for ECP Trustee-at-Large:
No responses

Candidate for MIT Trustee-Elect:
Abigail L. Donovan, M.D.

1). As psychiatrists, our primary focus is the mental health of our patients. We focus on the genetics, neuropathology and physiology - the biology - associated with disease. But no person exists in a vacuum. A superb clinician treats not simply the disease, but the entire person. Thus, as doctors who focus on the entire being, we must be thoughtful and cognizant of the social situations in which each of our patients live. In this way, “social issues” are not only within the realm of psychiatry, but central to our mission: to improve the mental health of our patients. As psychiatrists, it is our duty to support those social factors which are health promoting and to oppose those factors which are a detriment to stability. The APA, as a governing body for psychiatrists, has a right and an obligation to set policy that serves to address complex social issues in our patient’s lives, no matter how controversial.

2). I have identified several major goals that I will strive to accomplish if elected as the MIT Trustee. I want to improve resident education in a number of areas, including competent care for all underserved populations, including the homeless, people of color, and LGBT individuals. I also want to facilitate open communication between the APA, residents and psychiatric associations, in order to identify important issues. I am dedicated to making widespread concerns a part of the APA agenda. If elected, I will strive to communicate AGLP matters to the Board and to encourage resident knowledge of and participation in the AGLP.

Candidate for Area 1 Trustee:
Jeffrey L. Geller, M.D., M.P.H.

1). The APA should not exclude any “social issue” from consideration because there is no reliable way to distinguish between a social issue outside the purview of psychiatric concerns and one within its purview. Further, the idea that social issues should be excluded from APA debate because they can become “divisive” would imply we should exclude from debate any issue that might be divisive. And who will determine what the score on the “Divisiveness Scale” needs to be to warrant exclusion.
However, the debate on social issues should be as scientifically grounded as possible. This is why I favored the Massachusetts Psychiatric Society Position Paper on Same Sex Marriage at the Assembly and still do.

2). The AGLP’s issues are central to anyone in the APA who believes in true parity. Quite simply, true parity means true nondiscrimination. The AGLP has and does champion nondiscrimination. As someone who has spent his professional life fighting for nondiscrimination in the area of the treatment of persons in the public sector, and particularly those with chronic mental illnesses, I would expect to support, and expect to be supported by, the AGLP in the fight for equality in employment, health insurance, family benefits, etc. for all.

Candidate for Area 4 Trustee:

Tanya R. Anderson, M.D.

1). There are many social issues that impact the health and wellbeing of our colleagues and their patients. We need to be an active voice advocating for what is best for patients, families and professionals. Having the literature is a luxury that we do not always have or can not always wait for. Sometimes a stand needs to be taken in a timely manner for the health, safety and well being of our patients and their families. The APA has to have the courage to take this stand.

2). AGLP is an important and growing constituency of members. Many are active in our organization and should have an active voice. As with all members, I have offered open access via phone, email or in person when possible to discuss issues of importance to members and their patients.

Candidate for Area 7 Trustee:

Louis Moench, M.D.

1). APA has and should set official policy through its Vision, Mission, Values, and Goals statement, and through formal position statements. Position statements of the APA have two purposes. First, they guide the direction of the Association. Therefore they should reflect the will of the large majority of the Association and should address our professional issues. Second, they inform the public. Therefore they should be based on our special knowledge and expertise—the understanding, diagnosis, treatment and prevention of mental illness. Those are the subjects on which we should take positions. In the recent past the viability of the APA was precarious as we tried to be too many things to too many people, diffusing our energy and our resources. (We have had 253 position statements, 64 rescinded or revised, 189 still on the books.) We are more sound today because we are becoming more lean and focused. We should learn from our experience.

Position statements should relate directly to the Mission of the APA, which is to promote the highest quality care for individuals with mental illness and substance abuse disorders and their families;

- Promote psychiatric education and research;
- Advance and represent the profession of psychiatry;
- Serve the professional needs of its membership.

2). If elected I would vigorously support all groups we identify as minorities, including GL psychiatrists, in their professional endeavors e.g. nondiscrimination in acceptance for training, teaching, and administrative positions, and in representation in APA governance. All appearances are that we have successfully integrated minorities into our structure as ten of 14 candidates for national APA office in 2006 are from minority groups. Bravo for us! But then I would expect such groups to devote vigorous energy to the APA mission as well.
Fryer Award Update
Mary Barber
Fryer Award Committee Chair

We made the $15,000 match for the Gill Foundation before our December 31, 2005 deadline. We now have $34,000 toward endowing the John Fryer Award. This APA award will be given for the first time at the 2006 Fall APA meeting in NYC, and thereafter it will alternate between the fall and annual APA meetings.

The remaining $16,000 needed to fully endow the Fryer Award will most likely be made up by a bequest from the late Frank Rundle. We’re waiting for the estate to release that bequest and will hopefully have news about that soon.

I am so grateful to the many members who have contributed to the endowment of this award. Together we have created a lasting legacy for AGLP and for LGBT psychiatrists, as we will be helping to educate the mental health community through this award for years to come. What a wonderful holiday gift for us, for AGLP, and what a great tribute to the memory of John Fryer!

THANK YOU to:

Gill Foundation
Richard Hire
Michael Golder
John Sweet
Jack Drescher
George Harrison
Richard Limoges
Edward Nix
David Kessler
Danni Michaeli
Lowell Tong
Daniel Hicks
John Kruse
Linda Odom
Serena Volpp
Stuart Sotsky
Milton Wainberg
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Kamran Rahmani
Robert Mitchell
Kathleen Collins
Louise Sonnenberg
Bill Martin
Chester Robachinski
Dan Karasick
David Goldenberg
Marshall Forstein
Richard Pleak
Margery Sved
Susan Ehrlich
Jordan Karp

THANKS ALSO to the Fryer Award Selection Committee:
Phil Bialer
Roy Harker
Dan Karasick
Mason Turner-Tree
Serena Volpp
November 2005 Assembly Report
Mark Townsend, MD
Lesbian, Gay and Bisexual Caucus representative

The November Assembly was very positive in terms of its approach to LGB issues. We had a number of initiatives written in reaction to May’s successful affirmation of same-sex civil marriage. These were defeated. Importantly, the Assembly unanimously approved AGLP’s membership as an Assembly Allied Organization (AAO). APA now begins the process of implementing a formal, written agreement between the organizations.

In addition to any specific arrangements APA may make with AGLP, AGLP will have a dedicated vote in the Assembly. The AGLP representative is also a voting member of the APA Area Council in which he or she lives, and will attend biannual Area Council meetings. Unlike the LGB Caucus representatives, however, AGLP will bear the cost of sending its representative to the meetings.

AGLP leadership, especially Mary Barber, deserves great credit in pursuing this issue. This initiative needed to come up through Assembly committees that seemed to have, apparently benignly, overlooked our application. Prior to AAO approval, the current chair of the AAO committee told the Assembly, and Phil and me, that she expected AGLP to create a better impression of being distinct from the Caucus. For example, the AGLP Newsletter might host a Caucus column, such as this one, as a courtesy to the Caucus, but Caucus Assembly representatives would not be listed on AGLP letterhead.

Three of the 20 action papers were written in reaction to the same-sex civil marriage statement. One paper called for a “general referendum of the APA membership on the issue of same-sex marriage and any other in the future involving matters of public controversy.” Any “controversial” position would require a 75% vote of the membership to become APA policy. Although not endorsed by any Area Council, its author subsequently brought the paper to the floor himself and it was soundly defeated.

Another paper asked that “major position statements of the APA truly represent the will and intent of the membership.” In order to accomplish that, the authors wanted the APA Bylaws changed so that a third of the Assembly or Board might “initiate referenda or change an action of the Board.” In other words, a minority of the Board or Assembly could go straight to the membership and ask it to overrule its own opinions. This was also defeated.

Three of the 20 action papers were written in reaction to the same-sex civil marriage statement. One paper called for a “general referendum of the APA membership on the issue of same-sex marriage and any other in the future involving matters of public controversy.”

And finally, the Assembly was presented with a Trojan horse-like action paper, which generated (ironically) the most debate of all. In it, the authors sought to “enhance the Assembly process” by eliminating initial debate on any new policy statement brought by APA components for approval. Prior to the meeting, Assembly members could read whatever statements they were asked to endorse, but the statements themselves could not be brought to the floor for discussion unless by a “non-debatable” majority vote. In the end, the Assembly thought that the measure would actually make the process of endorsing position statements more cumbersome, and it was also voted down.

Also during the Assembly, the Committee of Minority/Underrepresented Groups voted Stephen McLeod-Bryant of the Caucus of Black Psychiatrists president-elect. The Committee also made plans to hold a separate meeting to coordinate the educational and advocacy objectives of the Caucuses. I was appointed to the Committee on Public and
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- William Gruber, M.D.
- Edward Nix, M.D.
- William Resnick, M.D.

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Community Psychiatry, which endorsed measures supporting the redevelop-ment of public psychiatry in the New Orleans area. About ninety percent of the acute-care psychiatric beds available in the New Orleans area prior to Katrina remain closed.

In summary, this meeting seemed to be the most LGB-positive of any I have attended in the five years it has been my privilege to represent you. While some members remain unsympathetic to broadening the legal rights of same-sex couples, the lopsided votes against these three action papers suggest that most seem comfortable with APA’s support of LGB issues. It is also a pleasure to work with Phil Bialer, who, as AGLP members would expect, is a strong and effective advocate.

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