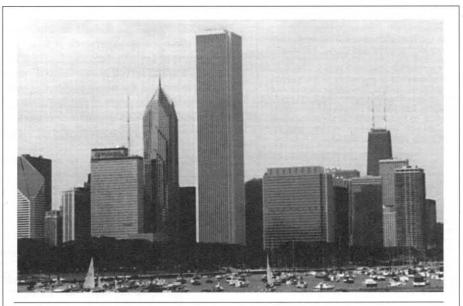


Association of Gay and Lesbian Psychiatrists

VOLUME XXVI(1): JANUARY 2000

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An AGLP New Year's Resolution:

Reserve Your Hotel Rooms Today for Chicago 2000

Bill Gilmer, M.D. Chairperson, Local Arrangements Committee

ith the APA and AGLP annual meetings just a few months a way, this is definitely the time to book your hotel room. Our AGLP convention hotel, the Allerton Crowne Plaza, is holding a limited number of rooms at a special discounted rate for our members. The convenience and special qualities of this lovely hotel cannot be beat - especially at our discounted rate.

The Allerton Crowne Plaza, on North Michigan Avenue, is situated in one of the most beautiful and vibrant areas of the city, with great restaurants, nightlife, architecture, museums, shopping, transportation, and lakefront biking and running paths. The Allerton Crowne Plaza is also where our members will enjoy the opening party in the historic Tip Top Tap. The private Metropolitan Club in the Sears Tower will provide the backdrop for the always enjoyable closing party.

The Local Arrangements Committee has compiled a list of special activities occurring in the Chicago area during the week of May 12 through May 18. These and other details about the 2000 Chicago Annual Meeting will appear in the next issue of the *Newsletter*.

You may reserve your room by calling the Allerton Crowne Plaza reservations department at (312)440-1500, and ask for the AGLP or Association of Gay and Lesbian Psychiatrists' rate. The hotel has requested that we do not call their central "800" reservation number as our group will not be credited with the reservation. The discounted AGLP block of rooms will be available from Friday, May 12 through Thursday, May 18.

BEFORE TO CAMUNO THE APPRESSOR JANUARY 2000

VOLUME XXVI(1)

The Newsletter of the Association of Gay and Lesbian Psychiatrists

Editor, Guy Glass, M.D.

Published quarterly from 145 East 15th Street, Suite 1F, New York, NY 10003.

The views expressed in the *Newsletter* are those of the writer and do not necessarily represent the opinions of the Association of Gay and Lesbian Psychiatrists. 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 the Association of Gay and Lesbian Psychiatrists, and do not imply sexual orientation.

INFORMATION FOR AUTHORS

Persons wishing to submit articles for publication should send them to: Guy Glass, M.D., Editor, Newsletter of AGLP; is 145 East 15th Street, Suite 1F, New York, NY 10003. (Phone: (212)982-0328, FAX (212)982-1879, E-mail: gglass@aglp.org) Submissions should be clearly readable. Submissions on electronic media (5.25 or 3.5 inch floppy disks) in IBM compatible formats are appreciated. A hard copy should be included along with a notation indicating which word processing program was used. 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 March 1, 2000.

ADVERTISING RATES

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

Full Page Ad \$200 Half-Page Ad \$125 Business Card \$50

Community service announcements are printed without charge, but are accepted only on a limited basis depending upon space limitations and applicability.

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President's Column

Phil Bialer, M.D.

was able to attend the APA Assembly meeting in November, just a few weeks ago and what an eye-opening experience it was. Margie Sved has been the representative from the Caucus of Lesbian, Gay, and Bisexual Psychiatrists to the assembly for several years and in this way has served as our "official" representative to the APA governance. She has worked hard to understand the whole governing process of the APA and she has attempted to explain this process to us in the pages of the *Newsletter*. She has also done an excellent job of getting herself involved on various committees within the assembly and as always has kept our best interests at heart. We should all applaud Margie for her efforts.

But Margie basically has only one vote in the assembly. It is up to us as an organization and as individuals to participate in the APA elections and vote for those who will work with us not against us. Why is this important? The most obvious example of how the APA governing bodies can help us was the removal of homosexuality from the DSM as a disorder. While there is scientific evidence to support this decision, don't minimize the politics behind this action and the political maneuvering it took to accomplish it. Also, do not underestimate the societal impact such action from the major psychiatric organization can have.

We have become better at figuring out the political process as evidenced by the recent approval of the position paper on Reparative Therapy. Work is proceeding on position papers regarding gay marriage and gay parenting. Not to sound paranoid, but as you all know there are many people in the APA who want to see these efforts fail.

So I am asking our members to take the time to read the responses from the current candidates in our *Newsletter* and also in *Psychiatric News*. Make an informed decision about the candidates who will be most supportive of us, and vote. Of the candidates for president-elect of the APA, I can tell you that Roger Peele has long been a staunch supporter of AGLP and has indicated his support by joining the organization. However, Richard Harding is also very much on our side and spoke well for himself at our fall meeting. This particular decision is yours. I also want to draw attention to the race for Early Career Psychiatrist spot on the Board of Trustees. Finally, be aware of what is going on in your own district branches. Your representatives to the board and the assembly have the real voting power.

As always, I'm available to discuss these issues as well as issues directly related to AGLP. Happy New Year!

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Caucus of Lesbian, Gay and Bisexual Psychiatrists Column Margie Sved, M.D. CLGBP Representative

nce again, I enjoyed participating in the November meeting of the APA Assembly and was glad that Phil Bialer could join me for part of the time. Assembly business was primarily related to APA governance and various legislative issues, with no specific issues relevant to our Caucus. If anyone wants an actual summary of all the actions taken by the Assembly let me know. There is available a 7 page summary which makes the actions comparatively easy to understand. If there is enough interest, I can start sending these out to all Caucus and/or all AGLP members, though most of you should also have access to this information through your District Branch representatives, who are more likely to have a budget for such things.

The Committee on Gay, Lesbian, and Bisexual Issues have drafted a Position Statement on Same Sex Marriage, which is currently in process on the component/Council side, and hopefully will work its way to the Assembly soon.

Restructuring of the APA governance continues in bits and pieces, though finally some of the changes are starting to have results. Significant budget cuts are planned for both the Board of Trustees and the Assembly, though there is contro-

One vote
out of many thousands,
you may want to
convey any
preferences to
your District Branch
representatives.

versy around who determines who cuts how much and from where. Dues for Early Career Psychiatrists will be decreased, the Assembly recommended that free membership for medical students be reinstated, and further dues cuts are still being discussed. Budgeting is now driven by the APA priority areas, with much more emphasis on public affairs (influencing how the general population thinks of psychiatry and mental illness) and legislative issues (such as non-physician prescribing, confidentiality, privacy, access to care, insurance/managed care issues, HCFA's seclusion/restraint rule changes). Since many of these areas need to be addressed at the state or local levels, current focus is on encouraging the APA membership to vote in the upcoming January APA elections, especially the constitutional amendments I mentioned in my last column. Changing the APA to a 501c(6) organization will make it easier for the APA to spend money on lobbying and advocacy, and will make it possible for the APA to return money to the District Branches and State Associations when needed. Please vote when your ballot arrives in early January.

I participated in the Assembly Nominating Committee, which was a first time experience for me. The slate of candidates for Assembly Officers is: for Speaker-Elect, Katharyn Ouzts and Nada Stotland; for Recorder, Nady El-Guebaly and Albert Gaw. These are elected by the Assembly Representatives during the May Assembly meeting. Since I will only have one vote out of many thousands, you may want to convey any preferences to your District Branch representatives.

Campaigning for the APA national offices is underway, and, as always, information from the candidates is presented elsewhere in this *Newsletter*. If you want some of the flavor of the debates, sign on to the APA member listserve "Member2Member" (via the APA Website at www.psych.org) for a while. I will again distribute information primarily by email, so make sure that the AGLP office has your email address if you want to receive this.

I have recently learned that mailing labels for members of CLGBP (not members of AGLP) have been obtained by some APA candidates. Although I have been clear that membership in the Caucus is not confidential, I had not been aware that this use was a possibility. I have been encouraging AGLP members to join the Caucus, and will get further clarification as to who has access to this list and for what purposes.

ELECTION 2000



Richard Harding, M.D.

Richard Harding, M.D.

CANDIDATE FOR APA PRESIDENT-ELECT

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

If the APA is to be effective in decreasing discrimination against lesbians and gay men in society we must first make sure that our own house is in order. During the 90's, AGLP and the Caucus have been a positive force helping to educate and inform APA membership about special needs in minorities, improving psychiatric education, and focusing us on the persistent and vicious discrimination that haunts our society. Gay and lesbian members have been elected to national office, appointed to key positions at the highest levels, and have begun duplicating these same patterns in the DBs and state associations. I would be remiss if I didn't mention the help that gay and lesbian staff have been to me personally and to the association as a whole.

The APA has reallocated resources to bring forward advocacy issues that are of a high priority. Public Affairs have put out a series of pamphlets concerning "Let's talk about mental illness." It has been suggested to me that we should bring out a pamphlet on "Let's talk about what isn't mental illness." Recent articles in the October addition of Archives of General Psychiatry point out the need for preventive services for adolescent lesbians and gays. Here is a perfect opportunity to showcase APA's concern for members and citizens who suffer from societal prejudices and pressures. I would ask for your help in developing policies and programs to help this vulnerable population and aid their development.

2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?

If elected, I will continue a close working relationship that goes back over a decade. Henry Ford said, "You can't build a reputation on what you are going to do." During the last few years I have:

- * Been on the search committee for the Psychiatric News editor
- * Chaired the Nominating Committee of the Assembly that urged gay and lesbian candidates to pursue Assembly office.
- * In 1995, as Speaker of the Assembly, approved by executive decision, the APA signing on an Amicus brief with the Colorado case, Romer v. Evans. In this informational brief the APA gave the Supreme Court scientific information about homosexuality. The court used that information in their decision in Romer v. Evans and has used it in subsequent cases as background scientific information.
- *Altered my priorities and advocacy interests because of the influence of lesbian, gay and bisexual leaders of the APA.

This is a critical election. I am a seasoned government relations expert who has and will continue to push for national and DB coordination to resist regulations and legislation that adversely affects your patients and you. As your president-elect, I will work with you to appoint the best qualified individual for each open position. If qualifications are approximately equal, I will appoint individuals from groups who have, in the past, not had an equal opportunity to serve our organization. I am asking you to look carefully at the candidates. Ask the leaders of AGLP and the Caucus about me, call members in my hometown of Columbia, South Carolina and see if I have been fair and supportive on both a professional and personal level.

I have and will continue to look to you for advice and counsel as our association pulls together and deals with external challenges that are awaiting us.



Roger Peele, M.D.

Roger Peele, M.D.

CANDIDATE FOR APA PRESIDENT-ELECT

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

While it is said that Mel Sabshin and I were the first "straights" [a term I don't like] to join AGLP, I have never assumed that I determine the pressing need of gays and lesbians. Whether it was obtaining recognition in the Assembly for gays and lesbians representation, eliminating "egodystonic homosexuality" from the DSM, or having the APA adopt a policy on "reparative therapy," I was a soldier doing his duty, sometimes effectively, but never assuming I knew what was needed. If approving marriage of homosexuals is next, I would love to be among the soldiers championing that, as I believe strongly in the logic of such.

In the history of mankind, discriminations against gays and lesbians has been so persistent and pervasive that we must never assume, unfortunately, that the war is won. We only win battles. My favorite metaphor over the decades in teaching medical students and residents is that homosexuality is like left-handedness. Both occur in about 10% of the population, the "cause" is unknown, they don't fit some of society's "norms," and societies have sometimes been extremely cruel to either or both. As psychiatrists, they must be sure that they don't contribute to the problems of either by being insensitive-which isn't easy because of ignorance. To keep the APA from being insensitive through ignorance, it is essential that AGLP have a strong voice in the APA [see infra].

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2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?

It is no secret that for a dozen years I have been pushing the APA to move from a patronage system to a representative system. The APA has more than a thousand presidential appointees on 160 committees. Over the past decade, some progress has been made, and when I become president we will lead forward toward a representative system.

What does this mean for you? Next May, at the Annual APA meeting while assuming the position of President-elect, I want to meet with the leadership of AGLP and the Caucus to negotiate how gays and lesbians can determine who sits on the Committee of Gay, Lesbian and Bisexual Issues as well as other Committees of particular interest to AGLP and the Caucus. I want those psychiatrists to be appointed by you.

The second agenda item is representation on the Board. Of the APA office candidates this decade, I have been the strongest voice against the proposition that 27 of the 50 Board members should remain on the Board for the rest of their lives. If we defeat lifetime membership this winter, it becomes easier to press forward for a seats on the Board for more underrepresented groups, as the Board will be much smaller. Early Career Psychiatrists [ECP] are about to have a seat. African-Americans have a non-voting seat, and that is soon likely to change to a voting one. The case for you to have a seat is just as valid as ECPs and African-Americans, and if we remove lifetime membership, we can begin pressing that request next year.



Marcia Kraft Goin, M.D.

Marcia Kraft Goin, M.D.

CANDIDATE FOR APA VICE-PRESIDENT

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

Teen Suicide Surgeon General Satcher has declared suicide a national public health crisis! In response to his battle cry, the APA must launch a well-funded, broad-based public information campaign telling the facts about teen suicide. The profession recognizes the high incidence among teenagers, but does the public know the extraordinary statistics about the associated incidence of suicidality and homosexuality? Launching a public education program, combining the government's focus on suicide with information about the heartbreak of our teenagers as they struggle against stigma and discrimination in the turmoil of adolescence may help open the minds and hearts of fellow Americans who might otherwise remain blind to reality.

I live in Los Angeles a city where many gays and lesbians, including psychiatric residents, come to live because of the diminshed discrimination; but is is still only diminished. I know from my experience in clinical practice the challenges facing those who live in a prejudiced world, some of whom choose to remain silent and others who decide to be open. Gay parenting, health care financing resistances, and legal restraints are all issues that must be faced. The APA should take an active part in finding solutions to these major societal and personal problems.

Taunting and Discrimination. As racial epithets have become politically incorrect in many strata of our society there is a rising tide of attacks based on sexual preference. These attitudes may begin at home, where children are taught who to love and hate, but they are sustained in school. The APA should partner with the American Academy of Child and Adolescent Psychiatry to produce major action programs directed at both children and parents.

2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?

I want strong and sustained relationships between these organizations and our components. We should expect major input into Public Affairs, active lobbying in Government Affairs, vital interaction with the Commission on the Practice of Psychotherapy and educational exchanges with Economic Affairs. Without the active contributions of gay/lesbian colleagues on all relevant components the APA is deprived of balanced and reflective approaches. My job as vice-president would be to see how, together, we can catalyze these relationships.

The new APA Psychiatric Research Institute must take the lead in developing statistical analyses to counter many of the prevailing myths. Studies such as Martha Kirkpatrick's work concerning the children of lesbian mothers produced a seminal paper, invaluable in countering misconceptions about parenting and sexuality. The common bond that brings us all together is our commitment to the best in patient care which includes advocating for research, education and reimbursement. Our work in these areas must include a search for preventive methods and therapeutic measures to counter the social pressures and stigma that beset our patients.

My work history, marked by inclusiveness and respect for diversity, has been gratifying. Uniquely, I am a psychoanalyst invested in public sector psychiatry; an educator of multicultural and diverse psychiatric residents. Over the years, these residents have become my teachers, enlarging my view of the human condition while enhancing my awareness of cultural differences and styles of living. My office door is always open. My life has been enriched by those who walk through it. As your vice-president I would anticipate nothing less than an extension of this type of intense, high energy, dynamic collaboration and information exchange with you, my colleagues.

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R. Dale Walker, M.D.

R. Dale Walker, M.D.

CANDIDATE FOR APA VICE-PRESIDENT

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

I have a pretty clear vision for the struggle to decrease discrimination against lesbians and gay men because I am, myself, a member of an under-represented group. Throughout my career, I have been an advocate for inclusion and fairness in APA in all areas, especially in leadership roles. Further, I believe a principal challenge to APA at this time is to engage members—especially those with less than optimal opportunity to-date—by identifying their needs, serving their needs, and opening the doors for their involvement in APA. APA needs us as much as we need APA.

It is my view that advancing the participation of gay and lesbian psychiatrists in APA is like that of advancing the participation of all under-represented groups. First, we need to systematically search out barriers to their participation—rules; accommodation; styles; and attitudes—and then we need to eliminate those barriers by the appropriate means. I would provide aggressive leadership in identifying and pursuing rule changes to remove barriers.

We need to rise to a higher level: we need to systematically identify improvements in our culture in APA to render ourselves more unbiased, appropriate to the uniqueness of all our member-groups, and supportive of their aspirations. I have had the opportunity, myself, to represent and advocate for under-represented groups in APA and, here, at my University. As a member of the Assembly, I consistently voted in support of lesbian and gay members' aspirations. I was elected to represent gay, lesbian and other under-represented groups as Chair of the Committee of Minority Representatives.

If elected Vice-President, I will vigorously push forward a campaign to achieve our goal of recognition, respect, and equity. I ask you now to join with me in this campaign.

2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?

Many members of the AGLP and the Caucus already know me as an enthusiastic reformer. We have worked together in the Assembly for recognition, respect, and equity in the governance of the APA. Together, we struggled to build the basis for a goal we can now achieve. I have a profound respect for the aspirations of the Association, Causus, and their members. If elected I expect our relationship to go into high gear as we, together, find opportunities to reform the structure and function of APA to achieve greater equity and fairness for gay and lesbian members. Further, I would see GLP and CLGBP members and I participating in a larger collaboration to achieve equity and fairness for other under-represented APA members. It will be a time of solidarity and high purpose and success.



Jacquelyn Chang, M.D.

Jacquelyn Chang, M.D.

CANDIDATE FOR APA EARLY CAREER PSYCHIATRIST TRUSTEE

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

Within our society, the APA can reduce discrimination through active education and communication. The APA must continue to take strong stances against reparative therapy and homophobia. We should collaborate with other mental health and medical organizations and civil rights groups to both educate and advocate against discrimination. Homophobia and its impact on mental illness are evident in the increased rates of depression and suicide in lesbian, gay, and bisexual adolescent youth. Its widespread impact on society is also evident in the increasing prevalence of hate crimes reported in the media. We must advocate for equality in parenting laws, partnership laws, and privacy laws. Given psychiatry's history of initially labeling homosexuality as a mental disorder, our organization should take active steps to counteract misconceptions through public education.

Within our own organization, the APA can foster programs to outreach to lesbian, gay, and bisexual psychiatrists. As a resident representative to the University of California, San Francisco, Department of Psychiatry's Ethnic, Cultural, and Gender Diversity Committee, I sought and received funding targeted towards ensuring that lesbian, gay, and bisexual applicants and residents felt welcome, supported, and accepted in the training program. In a similar way, the APA must gather information on how to best welcome and value our lesbian, gay, and bisexual community. We must solicit concrete suggestions from existing committees and organizations to discover ways to reduce internal discrimination against psychiatrists based on sexual orientation.

Within our residency training, we must ensure that our training of current and future residents includes cultural competence regarding lesbian, gay, and bisexual issues. During my years living in San Francisco, I have advocated for increased understanding of cultural competence through the development of a documentary library collection, with several videotapes devoted to dilemmas faced by lesbians and gay men. Promoting discussion through Media Programs at the APA Annual Meetings and regionally is the first step. Our organization has the responsibility to develop programs to continue to educate future and existing psychiatrists about lesbian, gay, and bisexual issues.

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2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?

I would establish a collaborative relationship so that we could work together to achieve goals important to the lesbian, gay, and bisexual communities. Locally, I have worked intensively with lesbian and gay colleagues to plan workshops and to treat patients. In my role as your Early Career Psychiatrist Trustee, I would facilitate communication between early career psychiatrists and the highest levels of our organization. This includes lesbian, gay, and bisexual psychiatrists and encouraging your participation in the APA. I would listen to your concerns and work to represent them to the Board. To effectively advocate for our profession and our patients, our organization must grow stronger and more cohesive. This means valuing the diversity that exists among us all.

Keith Young, M.D.

Keith Young, M.D.

CANDIDATE FOR APA EARLY CAREER PSYCHIATRIST TRUSTEE

1. What should the APA be doing to help decrease discrimination against lesbians and gay men?

In recent years, our country has witnessed several horrific examples of homophobic hate crimes and discriminatory legislation, reminding us yet again of how we and our patients may face both subtle and overt discrimination. The APA has often responded too slowly to even the most egregious examples of discrimination motivated by homophobia, in spite of the persistent and diligent efforts of AGLP leaders and G/I/B Caucus members. Last year's adoption by the APA Board of the statement on "reparative" therapies was an important initial step toward addressing institutionalized homophobia. (My partner and I, for instance, have often been able to use the statement as we have made presentations to church groups in Southern California that are struggling with how to be more welcoming of and less discriminating toward gay men and lesbians in their congregations and communities. The APA statement has been an important tool in countering the propaganda of reparative therapy advocates and the religious right.)

The APA's efforts, however, must not end with one statement. As Trustee, I will advocate for commitment of additional resources to the APA web site, urging inclusion of additional information and references on a broad range of mental health topics, including information that firmly denounces stigmatization and discrimination toward gay and lesbian people and educates the public (and indeed even some psychiatrists) about the mental health of lesbians and gay men.

I have also endorsed an expanded public affairs campaign, one component of which must be improving responsiveness in the media when there are issues or events that reflect discrimination based on sexual orientation. Our APA leadership must first have these issues in their consciousness (the achievement of which I will consider integral to my service as a board member), but then must have the commitment to respond unequivocally when statements and action are warranted. I will join with Julie Schulman (another AGLP member currently serving on the Board) in facilitating timely and appropriate responses by APA leaders in public forums, at public hearing and in the media. In this process, I will welcome (and encourage) input from our AGLP leadership and the G/L/B caucus about ways to best accomplish this.

- 2. If you are elected, what kind of relationship would you expect to establish with the Association of Gay and Lesbian Psychiatrists and with the Caucus of Lesbian, Gay and Bisexual Psychiatrists?
- 2. Having been an AGLP member for several years, I am pleased that I won't be having to establish a relationship with AGLP and the Caucus, but will instead be able to enhance the relationship that already exists. If elected, I will seek the opportunity to regularly meet with our leadership so that I might be certain to most fully represent the concerns of our members in matters before the Board. I will also consider it my responsibility to confer with AGLP and Caucus leadership when I become aware of relevant issues likely to be addressed by the Board, drawing upon the expertise of our leadership to assure the best possible advocacy for our collective concerns. Finally, I commit to being available to individual members as a liaison to the Board on matters of individual concern.

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ANNOUNCEMENTS.

he Elihu Burritt Library at the Central Connecticut State University provides a wealth of historic information concerning homosexuality. They are seeking donations of books, periodicals, newsletter, flyers, posters, buttons, records, tapes and pamphlets. The collection is open and available to the public and includes the library of the Hartford Women's center. The collection can be accessed through the library's web page, whose address is

http://wilson.ctstateu.edu/lib/archives/equity/. Please contact Francis J. Gagliardi, Associate Director of Library Services for further information, at (860) 832-2098, or e-mail at Gagliardi@ccsu.edu

Charles Silverstein, Ph.D. 233 West 83rd Street (7A) NY, NY 10024 Phone 212 799-8574 Fax 212 799-6213 e mail psychs@mindspring.com

Memo to potential contributors

Dear Colleagues,

I regret that it's taken me so long to respond to your offers to contribute to a book about the initial interview of a gay man. I haven't forgotten you. I've been finishing corrections for a book that had to be done before I embarked on a new project. Those corrections are now completed and in the hands of the publisher. I'm now free to get back to the book I've proposed.

I want to do an edited book about the initial interview of a gay man – but from a different perspective.

I plan to record an initial interview of a gay man who I am meeting for the first time. (Consenting to the recording is probably already a sign of personality.) I will write up a summary of the interview and discuss therapeutic formulations. I will then make a transcript of the complete interview – no editing, corrections or removing my own errors. I then plan to send the copies of the tape, the transcript, and my summary to chapter writers.

Each chapter writer will be asked to comment on the interview from a particular perspective, e.g. development history of a gay man, transference and counter-transference, relationship with parents, early sexual experience, homophobia, drug history, experience with lovers, etc. The format of the chapters will be (at least as I conceive it now) to discuss the importance of that particular topic in the initial interview and how it may impact upon the therapeutic relationship – not merely about his life.

I'll repeat this – the objective is to use only the initial interview as projecting the future of psychotherapy. It also includes an evaluation of the interview by me. Presumably some of you would have handled some things differently. That's okay. Such critiques raise important questions that will be informative to other clinicians who want to learn more about treating gay men.

At the end of the book I will present further information of the gay man as his therapy proceeds, assuming he remains.

I already recorded one interview, but it may not be right for the book because the man is European. I will make further recordings until I get one that might be right for the book. That will take a bit of time, so please be patient.

It would be helpful for each of you to send me – fax, e mail, letter – some idea of what topic you might like to write about and how you would handle it. I suggest this because my own ideas are not written in stone, and I'm open to suggestions. A phone call or meeting is okay, but please let me have it on paper first. If you have published in journals, please send me a copy. It would be helpful to me.

Thanks for your offers to help. When the project gets into gear, you'll find me more responsive than the past two months. I'm willing to help anyone who needs it.

Charles

JANUARY 2000

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THANKS TO THE FOLLOWING MEMBERS WHO HAVE JOINED AT THE SPONSOR AND PATRON LEVEL, AND TO THOSE MEMBERS AND FRIENDS OF AGLP WHO HAVE CONTRIBUTED TO THE STUDENT TRAVEL FUND FOR 1999.

FOUNDING MEMBERS

DAVID L. SCASTA, M.D.

PATRONS

DANIEL HICKS, M.D. ANTHONY MARINO, JR., M.D.

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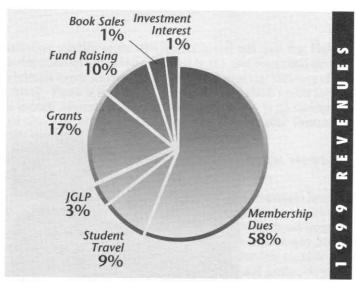
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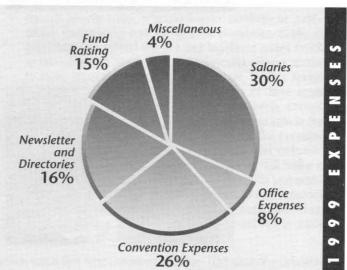
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Association of Gay and Lesbian Psychiatrists 1999 Financial Statement

Howard Rubin, M.D., Treasurer





LEDGER SUMMARY

	1999	1998
Total Receipts	\$84,656.88	\$116,094.83
Total Disbursements	\$83,673.85	\$86,036.71
Receipts/Disbursements	\$983.03	\$30,058.12

TOTAL ASSETS

Beginning of Year	End of Yea
\$59,163.94	\$60,146.97

*Includes crecit card processing fees, postage, supplies, book inventory and mailing expenses, and telephone and internet services.

WPA: Hamburg, 1999











TEXTBOOKS AVAILABLE FROM AGLP

Textbook of Homosexuality and Mental Health

Edited by Robert P. Cabaj, M.D., and Terry S. Stein, M.D. American Psychiatric Press



Textbook of Homosexuality and Mental Health brings together in one volume the entire range of material and variety of perspectives concerning homosexuality and mental health. With more than 50 chapters written by leaders in the field, this book is the most complete review of the topics of homosexuality and mental health and treatment of gay men, lesbians, bisexuals, and transsexuals to date.

Starting from the belief that homosexuality is a normal variation of human sexuality and not a mental illness, this revolutionary book presents current information on homosexuality from a mental health and medical perspective. Sections focus on demographic, cultural, genetic, biological, and psychological perspectives; development throughout the life cycle; relationships and families; psychotherapy; multi-cultural identifies and communities; professional education; and medical care. A variety of special issues, such as sexuality, substance abuse, violence, suicide, religion, and HIV/AIDS are discussed. Meei isolay ded as sexuality, substance abuse, violence, suicide, religion, and HIV/AIDS are discussed. Meei isolay ded as sexuality.

are discussed. Also included are several unique chapters that cover material not readily available elsewhere, among them transsexuality, minority gay, lesbian, or bisexual people, the impact of the sexual orientation of the therapist, latency development in prehomosexual boys, and clinical issues specific to psychotherapy with gay, lesbian, and bisexual patients

AGLPB001-1996/1016 pages/ISBN 0-88048-716-X/hardcover/\$89.95

Lesbian Lives; Psychoanalytic Narratives Old & New

Maggie Magee and Diana C. Miller Analytic Press



In this groundbreaking revisioning of lesbianism, Magee and Miller transcend a litthat, for decades, has focused on the timeworn and misconceived task of formulating a lesbian-specific psychology. Rather, they focus on a set of interre-lated issues of far greater salience in our time; the developmental and psychological consequences of identifying as homosexual and of having lesbian relations. Lesbian Lives is a heartening sign of the generous scholarship and humane impulse that are transforming psychoanalysis in our time.

AGLPB0018-1997/448 pages/ISBN 0-88163-269-4/hardcover/\$55.00

Lesbian & Gay Youth; Care & Counseling

Caitlin Ryan & Donna Futterman Columbia University Press



Here at last is the first handbook on the care, counseling, and support needs of lesbian and gay youth for providers, advocates, parents, and interested readers. This book includes guidelines for assessment, treatment, prevention, and referral along with the latest research, knowledge, and practice wisdom on lesbian and gay youth by leading experts.

AGLPB0019-1998/175 pages/ISBN 0-231-11191-6/paper-

Psychoanalytic Therapy and the Gay Man

Jack Drescher, M.D. Analytic Press

*Jack Drescher has comprehensively gathered and usefully interpreted a vast amount of material relating to psychoanalytic therapy and gay men. His book is a measure of the huge distance the therapeutic community has come over the past several decades in its compassionate understanding of same-gender relationships - and is itself a significant contribution to further progress.

Martin Duberman, Ph.D., Distinguished Professor of History, CUNY AGLPB0020-1998/373 pages/ISBN 0-88163-208-2/hardcover/\$55.00

Journal of Gay and Lesbian Psychotherapy

VOLUME 2, NUMBÉR 4 1998 Jack Drescher, M.D., Editor The Haworth Medical Press

AGLPB021-1998/134 pages//softcover/\$12.95

Journal of Gay and Lesbian Psychotherapy

VOLUME 2, NUMBER 3 1995 David Scasta, M.D., Editor The Haworth Medical Press

AGLPB003-1995/134 pages//softcover/\$12.95

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In My Father's Arms; A true story of incest

Walter A. DeMilly, III The University of Wisconsin Press



"A sensitive and compelling account of father-son incest. In spite of the suffering portrayed, the account also gives testimony to the strength of family bonds and to the courage and resilience of the human spirit.

Fred S. Berlin, M.D., director of the National Institute for the Study, Prevention and Treatment of Sexual Trauma

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Date membership status changes:
Are you a member of the American Psychiatric Association? O Yes O No
Special Instructions:(e.g. label "Personal")
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APPLICATION FORM

Caucus of Lesbian, Gay & Bisexual Psychiatrists

American Psychiatric Association

(CLGBP 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.)

Send this form to: Office of Membership American Psychiatric Association 1400 K Street, NW Washington, DC 20005

* Member-In-Training, General Member, Fellow, Life Member, Life Fellow



Chicago's Allerton, next year's official AGLP Hotel.