Once again we find ourselves returning to the “Big Easy,” New Orleans, for our Annual Conference. As many of you may already know, the APA Annual Meeting has been shortened by a day, mainly for budgetary reasons. Likewise, AGLP is obliged to make some schedule changes to accommodate the larger APA. The dates are May 21 through May 26—Friday through Wednesday. A welcoming reception is being planned for those arriving on Friday evening, May 21, at the home of Stefan Carlson in the French Quarter (623 Barracks Street) from 7:00-9:00pm.

One of the more notable changes in our format during this Annual Meeting will be the Welcoming Reception and the Annual Awards Banquet. This year we will combine the two events into what we are calling the AGLP Awards Reception. This event will take place on Monday evening, May 24, 2010, from 7:00pm to 9:00pm. The actual presentation of awards will take place at 8:00pm, with the rest of the evening dedicated to networking and socializing. Passed hors d’oeuvres and a cash bar will be available. The event is taking place in the new Art Gallery of the Renaissance Arts Hotel (http://www.marriott.com/hotels/travel/msydt-renaissance-arts-hotel/) and will include entertainment by Mary Flynn and her New Orleans Jazz Band. The Arthur Roger Gallery Project space at 730 Tchoupitoulas Street is a 2100 square feet space.
Editor’s Column
George Harrison, MD
Gharrison@aglp.org

The other day I found myself arguing with one of my long-term patients. I was trying to convince him that he was more than the sum of the injuries that he experienced as a child. While he is in his 40’s, his identity, formed in his difficult childhood, doesn’t fit him. He isn’t the man he thought he was going to be; in particular, he’s not straight and married with children of his own. After decades of therapy, his feeling of being cheated out of a normal childhood by his neglectful parents and the stigma of being a queer boy are the main determinants of his behavior. He desperately wants this to be different but can’t seem to turn the corner to a fuller and more current view of himself. The challenge for me is to tolerate his immobility while continuing to hope that there can be movement towards a more graceful integration. Some days I’m more successful than others.

I would like to think that things are different for the children growing up today. I hope that when these children awaken to their taboo romantic and erotic feelings they will not be so traumatized. I know that the society that they grow up in is kinder to LGBT youth than that it was in the 60’s. I also know that our organization has played as significant role in the process.

We have the ability to be impactful on the constituents to the root causes of these problems in our work though AGLP. We have had a significant impact on the positions and mission of the APA and in turn, they have helped form the reference standard for larger societal issues. As an organization and in our individual work AGLP has helped form the opinions concerning LGBT rights, for example, marriage rights, adoption, reparative therapies, and more recently acceptance into the armed services. These contributions have not always ensured a good outcome at a cultural level but we have helped the APA to guide the discussion in ways that will improve the lives of LGBT people going forward.

The discussions about DSM-5 are in full swing and members of our organization have been able to add their opinions to the debate. They have held important roles in the APA because they are highly respected in their specialized fields. These members are more effective by their association to AGLP, recognized as representing the interests and issues of the LGBT community. Together we have more impact than the most persuasive and charismatic of us alone.

One only needs to reflect on the time before AGLP to see what can happen if we depend on others to do the right thing on our behalf. There was not an effective voice against pathologizing diagnoses or treatments. Many factors caused the shift in the APA and society but AGLP and its forerunners lead the way.

Our strength comes from our members. Without the contributions of all of us, we will again have to depend on the good will of others. Our work will continue by people choosing to support the organization and determining what the agenda should be. We must have a diverse membership to represent the diversity of LGBT people and provide a voice for the people that do not have representation now.

If you are thinking of what your membership means, consider these things. Better yet, use your voice. Write an article for the Newsletter or the Journal; run for office; propose a workshop; email, Facebook or Twitter your position so that we can continue to help shape the discussion. That is a fundamental mission of our organization. People like my patient depend on you, we all depend on you to speak up and act.

...
Dear Dr. Leli:

Complete but for identifying details.

Over at least the past ten years, AGLP has experienced a continuing decrease in membership. The implications of this trend are serious for the viability and long-term survival of our group. AGLP is funded primarily by members’ dues, with additional funding from individual donations, projects such as the movie Abomination, and Journal subscriptions. When I became President, the organization was running in the red. Three years later, after much hard work, we operate in the black, but our cash flow is erratic and we are still not meeting our budgetary goals.

Decreasing membership can be understood in light of various trends: changes in the level of political involvement in the LGBT community; the bad economy; parallel tendencies in other professional associations; etc. AGLP has attempted to expand membership by increasing outreach toward residents and students, by creating a membership committee, and also by reminding each board member to keep member recruitment a continuing urgent priority. These strategies, however, have yielded insufficient results. A basic analysis of the situation has led to the not unexpected conclusion that the decrease in membership—especially the lack of renewal on the part of old members—must be due to a growing discrepancy between AGLP’s mission, and what members actually expect from the organization.

Decreasing membership can be understood in light of various trends: changes in the level of political involvement in the LGBT community; the bad economy; parallel tendencies in other professional associations; etc. A basic analysis of the situation has led to the not unexpected conclusion that the decrease in membership—especially the lack of renewal on the part of old members—must be due to a growing discrepancy between AGLP’s mission, and what members actually expect from the organization.

A couple weeks ago, I received the following letter from a member who, at the point of deciding not to renew his membership, had the presence of mind to write to me and articulate his feelings about AGLP. The letter, below, is complete but for identifying details.

A couple weeks ago, I received the following letter from a member who, at the point of deciding not to renew his membership, had the presence of mind to write to me and articulate his feelings about AGLP. The letter, below, is complete but for identifying details.

Hope you are doing well. Maybe you or somebody else there will have an answer or a different point of view for me. Through the years I had been a member of the AGLP, and through the years my disenchantment grew bigger too. I started my membership when I lived in _____ and the world offered hope and unlimited potential (I know, I sound like Nathan Lane in the Birdcage). Year after year I would go to APA Conventions and made sure that I would go to meetings for the AGLP and stay in the recommended hotel. Year after year I noticed more and more the cliques, and every reception felt like just going to a bar anywhere in Anycity USA. I guess my expectations were of a place where you could network with other professionals and address our challenges (professional/social) and make friends, like I had done when I had gone traveling. Besides the Newsletter, which has always this shadow of pessimism floating over it, I have not found much comfort.

Every meeting we are nameless individuals to each other (unless you are part of those groups I watch). Each meeting I have has doubts about even going to a meeting that used to have a combined Minority/Foreign

Continued on page 8
The Fight Must Continue, Change Does Happen
Kenn Ashley, MD, AGLP Vice President
KAshley@aglp.org

It seems to be that some issues which are particularly relevant to our members (psychiatry, LGBT civil rights and health care) are constantly in the media. Although it is at times: infuriating, frustrating, demoralizing, exciting to hear the talking heads or read the headlines/blogs/articles, it appears that things are gradually moving in the right direction.

The APA has released the proposed draft criteria for DSM-5 (www.dsm5.org) and there is already a bit of buzz on some of the LGBT blogs and sites over GID. The website includes the proposed criteria with the supporting research and DSM-IV content as comparison. I wonder if they also discuss why they have moved away from using roman numerals. Please note that viewers will be able to submit comments until April 20th, 2010. After that time, this site will be available for viewing only.

Both the APA and the AMA are supporting the repeal of “Don’t Ask, Don’t Tell” (DADT), based on studies showing the psychological harm done by the policy. President Obama and the military leadership are also in favor of eliminating the policy, but the political posturing has intensified so it will be interesting to see how long this process takes.

Health care reform seems to be back at square one; given the number and power of the interest groups involved it the required compromises will result in a less than ideal package, but at least it will be a first step. This is one of the more glaring examples where many of our politicians are doing what is in the interest of their immediate political goals, rather than the long-term benefits of the nation.

The situation in Uganda and the Anti-Homosexuality Bill was gradually brought to the attention of the international community, and finally, with almost universal condemnation it appears that bill might be withdrawn. If we have learned anything, it is that those in opposition to the human rights of LGBT individuals will continue in their attempts to deny rights. This instance illuminated the international role of American evangelical Christians in their fight against human rights.

Marriage equality has been turned back in several states, while internationally it continues to move forward. It will be interesting to see how the legal case in California gets resolved. However it gets resolved, I believe that the demographics of our nation will ensure marriage equality—as most younger people are in support of it. It is also interesting to see that more openly LGBT individuals are taking political office.

In October 2009 HHS Secretary Kathleen Sebelius announced the establishment of the nation’s first national resource center to assist communities across the country in their efforts to provide services and supports for older lesbian, gay, bisexual and transgender (LGBT) individuals. Experts estimate that as many as 1.5 to 4 million LGBT individuals are age 60 and older.

Coincidentally, the AGLP Annual Symposium this May in New Orleans will focus on mental health issues in the elderly LGBT population. In addition to the symposium, we are planning a range of other AGLP events to take place during the APA Annual Meeting in New Orleans, but like the shortening of the Annual Meeting by one day, there will be some changes in the AGLP scheduling. Please check the website for details. Also, please contact me if you have any comments or suggestions about events during the APA or about any aspect of AGLP.

It is snowing again…

Request for Proposals for Presentations in the Hospitality Suite
Kenn Ashley is putting together the schedule for the hospitality suite in New Orleans and anyone interested in using it should contact him directly as soon as possible. There are a limited number of slots available again this year and your prompt response will insure a place on the schedule. In particular this year, Kenn would like to focus on mental health issues in the elderly LGBT community.
KAshley@aglp.org

It is snowing again…

The courtyard of the Hotel Drayton Dupuy in the French District of New Orleans, AGLP’s host hotel.

Photo courtesy of the New Orleans Visitor’s and Convention Bureau

The courtyard of the Hotel Mason Dupuy in the French District of New Orleans, AGLP’s host hotel.

Photo courtesy of the New Orleans Visitor’s and Convention Bureau

Kenn Ashley, MD

VOLUME XXXVI(1) • MARCH 2010
November 15, 2009
Carol A. Bernstein, M.D.
President-Elect, Chair, Joint Reference Committee
American Psychiatric Association
1000 Wilson Boulevard, Suite 1825
Arlington, Va. 22209-3901

RE: Reinstatement of the sunsetted Committee on Gay, Lesbian & Bisexual Issues of the APA

Dear Dr. Bernstein:

As you are undoubtedly aware, in May of 2009 the Committee on Gay, Lesbian and Bisexual Issues (CGLBI) of the American Psychiatric Association (APA) was disbanded as part of cost cutting measures due to a critical financial shortfall in the APA budget. Prior to that time, the CGLBI was a component committee of the Council on Minority Mental Health and Health Disparities. That Council is now a committee composed of single representatives for each of the eight minority groups that the Council looks after (gay & lesbian psychiatrists, black psychiatrists, women psychiatrists, etc.). It has become very apparent to the Association of Gay & Lesbian Psychiatrists (AGLP), that the loss of the APA’s resource committee for gay, bisexual, and transgendered (LGBT) matters has had a significant and noticeable adverse impact on matters of LGBT mental health. A single person on a committee with multiple disparate groups demanding attention cannot realistically provide the APA with anything more than cursory alerts to the current plethora of legislation and programs that bear the stamp of LGBT stigma that the APA has so valiantly fought against in the past.

The APA has been a leader in liberating LGBT people from intolerance and stigma beginning with its historic decision in 1973 to depathologize homosexuality. It is impossible to overstate the importance of the APA’s impact on reversing long held societal prejudices towards LGBT peoples. A list of just some of the APA position statements developed by the CGLBI over the years is appended below.

Unfortunately, there has been a resurgence of LGBT prejudice in the last five to ten years, driven in particular by conservative religious groups. The APA, however, has held fast to scientific principles when addressing LGBT matters irrespective of the impact of those principles on theology or politics. That stance has been important in countering the distortions which conservative, anti-gay groups have been publicizing under the rubric of “Science.” Those distortions have been instrumental in reawakening long held prejudices and stereotypes of LGBT people in the general public. Two weeks ago, the people of Maine overturned their legislature which had passed legislation allowing gay marriage (which the APA supports). Unfortunately, a secret ballot allowed voters to convey prejudicial beliefs that might not otherwise be expressed in public. Nonetheless, the vote was very close suggesting that, if the APA had been more proactive in its educational work, the vote might have gone the other way. A single committee member on a council of many minority groups cannot be practically be proactive to address such issues as they pop up, driven by still simmering cultural wars.

AGLP is aware that the APA has tried to counter the loss of LGBT presence in the executive division of the APA by bolstering the Caucus of Gay, Lesbian, and Bisexual Psychiatrists. Unfortunately, the Caucus does not have the position or structure that is conducive to writing position papers within the executive division of the APA and shepherding those papers through the various reference committees and evaluators who provide oversight. Members of the CGLBI, through staggered membership terms, traditionally underwent in-house training in the protocols for APA position paper writing, and, in the process, developed interpersonal relationships with the executive division leadership that allowed them to sagely and reasonably guide the APA in LGBT matters. The Caucus cannot realistically provide that kind of apprenticeship; nor does the Caucus have the political connectedness that would allow discourse inside the structure of the APA leadership about the complex political issues that are involved.

AGLP therefore respectfully requests that the Committee on Gay, Lesbian, and Bisexual Issues of the APA be reinstated.

AGLP recognizes that the APA is under enormous financial pressures and would like to work with the APA to ensure that the reinstated committee is as close to revenue neutral as possible. While some expenses cannot be avoided (e.g., a meeting room twice a year, staff time for scheduling and handling paperwork), committee members can cover their own lodging, transportation, and food expenses to minimize the impact on the APA. AGLP believes that the overall expense to the APA will be minor but will allow this previously very active and dedicated committee to continue its important work.

The APA’s views on LGBT mental health are critically important and have had a substantive and tangibly beneficial impact on the lives of LGBT people in this country. The APA’s functional withdrawal from this arena is heart wrenching and does not have to be. There are passionately committed APA members who are willing to continue to bear the torch for the good of all LGBT people and the lives those people whom they touch. AGLP cannot be more adamant about the need for the APA’s leadership in these matters. We therefore plead with the APA to find a way to reinstate the Committee on Gay, Lesbian, and Bisexual Issues of the APA.

Respectfully yours,

Ubaldo Leli, M.D., FAPA
President, AGLP

David L. Scasta, M.D., DFAPA
APA Assembly Liaison for AGLP

Position Statements Coming Primarily Out of the Committee on Gay, Lesbian, and Bisexual Issues of the APA

- Adoption and Co-parenting of Children by Same Sex Couples (2002)
- Same Sex Unions (2000)
- Therapies focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies) 2000
- Psychiatric Treatment and Sexual Orientation (1998)
- Homosexuality (1992)
- The Right to Privacy (1991)
- Discrimination Base on Gender or Sexual Orientation (1988)
Report from the Allied Association Organization Liaison to the APA
David Scasta, MD, DFAPA
DScasta@aglp.org

The APA Board of Trustees had mandated a 20% reduction in the Assembly's budget for 2010 and it was the Assembly's task to define where the $200,000 was to be cut. The Finance Committee also let it be known that it was recommending another 20% cut on top of that (which would have effectively brought the Assembly to a halt). The cacophony of plans and suggestions were so varied and so disparate that the Assembly was in danger of bogging down with no way of coming to any consensus on what to do. Much of the maneuvering and posturing could be boiled down to efforts by various groups to make certain that the cuts came at the expense of someone other than the group proposing where the cuts should be made. In short, the issue was about which representatives should be disenfranchised.

The task of leading the Assembly fell to the Speaker, Dr. Gary Weinstein. Shortly after I came to the Assembly, I was informed with whispered glances that Dr. Weinstein was one of the movers and shakers in the APA. I couldn’t see it then but I now realize why. Dr. Weinstein led the Assembly through its tortuous machinations with calm and deliberation. He was always encouraging and sympathetic to the angst that the representatives were experiencing and never lost his mild-mannered composure.

The proposals were all over the board. One proposed cutting the Assembly back from two meetings a year to one. One proposed cutting the number of representatives and basing representation strictly on geography (effectively eliminating my AAOL position as well as the positions of our Minority Under

Represented (MUR) representative and deputy representative). Another proposal kept the AAOL's and MUR's but got rid of all of the deputy representatives.

All Assembly members except the allied organization representatives (AAOL's) get their way paid to the APA Assembly meetings. When an AAOL representative proposed that all members of the Assembly pay their own way, as the AAOL's do — well, to be polite, his proposal did not receive a lot of support. The cost of attending all of the Assembly meetings and the requisite area meetings can be fairly hefty. And, for someone like myself, it costs me at least twice that amount due to being away from my practice for the meetings. Tax deductions help soften the strain but it is still a substantial cost, often breaking five figures. For those who live far from Washington, the cost is even more substantial. The APA's coverage of the cost of transportation and lodging, therefore, is a significant benefit for funded Assembly members. Many of those members are in leadership positions in institutions which continue to pay their salaries, thus making their attendance at the Assembly cost free. Few of the funded members seemed willing to sacrifice either power or perks.

Given the unusual circumstances of the Assembly, Dr. Weinstein elected to change the usual protocols of the Assembly.

Typically, various proposals in the form of Action Papers are posted each session of the Assembly. The Action Papers are then discussed in each of the area meetings. (The APA is divided into seven geographic areas, each with a number of district branches. For instance, I am in the New Jersey District Branch which is part of Area III). More importantly, the Action Papers are referred to reference committees to review the proposals in a hearing format to make recommendations for acceptance, rejection, or changes. Most of what goes on in the Assembly is procedural and boring, but I have always found participating on the reference committees to be the most enjoyable part of the Assembly. The reference committee gets to interview the paper's authors, gather background data, and hear detailed views from interested Assembly members before convening to make its final recommendations to the Assembly body. Reference committees are composed of a representative from each area and from each of the matrix representatives (AAOL, MUR, members-in-training, and early career psychiatrists). This session I did not get to serve as the AAOL representative on Reference Committee 5 which deals with action papers having to do with the scientific basis of psychiatry and APA governance. The governance issues were too important.

Instead, Dr. Weinstein appointed each of the seven area representative heads themselves to form Reference Committee 5. Instead of meeting in a conference room for its hearings, the committee held its hearing in the plenary hall with all members of the Assembly scheduled to be in attendance. The proposals had been narrowed down and were presented to the Assembly delegations where they were discussed and put through various modifications.

On a personal note, in our AAOL meetings we naturally decided not to support any proposal which eliminated our voice in the Assembly. The chair of the

Continued on page 15
AGLP in New Orleans

Continued from Page 1

foot project space which was designed by architects Chrestia, Staub and Pierce, and presents monthly exhibitions and installations. The Renaissance Arts Hotel has the contemporary visual arts as its theme. The hotel’s collection featured in the impressive lobby includes a trio of brilliantly colored glass chandeliers by Dale Chihuly, Mitchell Gaudet’s translucent grid of Caribbean blue tiles which separates the lobby from the Hotel restaurant, a bronze kinetic water wall by Lin Emery and two large scale photomontages by Luis Cruz Azaceta.

Our VIP Reception will be at the home of Charles Kuhns and Jacques Weaver on Carrollton Street in Uptown New Orleans on Tuesday, May 25, from 6:00-8:00pm. Harp music will be offered by the host, Jacques!

Our host hotel for this visit should be familiar to many; the Mason Dupuy, inside the city’s historic Vieux Carre district of the French Quarter. (1001 Rue Toulouse New Orleans, Louisiana 70112, Telephone: (504) 586-8000 • Fax: (504) 525-5334 • www.MaisonDupuy.com). Don’t delay making reservations as this fabulous hotel will fill quickly. For reservations call 212-532-1660 or go to www.aglp.org. Room rates for AGLP members is $169.00/night if you stay for a minimum of four nights. For a stay of less than four nights the rate goes to $209.00/night. As of this writing there are still rooms available.

The Saturday Symposium will hosted by Tulane University in their new J. Bennett Johnston Building, just 10 blocks from the Convention Center. More information and registration information will follow shortly. Our Board and Membership Meetings will all be held in the Sheraton New Orleans, centrally located near the convention center and the French Quarter, on Sunday, May 23.

AGLP will, once again, have a presence at the New Orleans Morial Convention Center. I hope that many of you will sign up for stuffing the booth during exhibit hours. The hours the booth will be open has been shortened by an entire day, so fewer slots need to be filled. Hours for the convention center are different this year as well: 10:00am to 4:00pm all three days. Please consider devoting some time to this important outreach initiative. AGLP dedicates substantial resources to the leasing and furnishing of the booth, but your presence is what ultimately makes the difference.

I’ll look forward to seeing many of you in New Orleans!

***

Trans Bodies, Trans Selves Project

Laura Erickson-Schroth, MD

LErickson-Schroth@aglp.org

(Editors Note: Laura Erickson-Schroth, MD, who served as AGLP Medical Student Representative, is working on a resource guide for trans people. Questions and submissions may be submitted to transbodies@gmail.com. More information on this project is available at the Trans Bodies, Trans Selves website: http://www.transbodies.com)

Trans Bodies, Trans Selves is a resource guide for transgender and other gender-variant people, covering health, legal issues, cultural and social questions, history, theory, and more. It is a place for transgender people, their partners and families, students, professors, guidance counselors, and others to look for up-to-date information on transgender life. Each chapter will be written by a transgender or genderqueer author. The book will be aimed at a general transgender and gender-questioning audience, and when using complicated language, will provide definitions and explanations. The tone will be friendly and fun, and will promote trans-positive, feminist and genderqueer advocacy. Short opinion pieces and testimonials will be included in each section. Anonymous quotes, gathered from the website’s survey, will also be included, giving voice to hundreds of transgender and genderqueer people.

***

AGLP Nominations 2010

Andy Tompkins, MD

AGLP Secretary-Treasurer
Chair Nominations Committee
ATompkins@aglp.org

I write to the membership as the Mid-Atlantic prepares for another Nor’easter, one of those snowstorms when one should only leave your house for an emergency (or to take some photographs for Facebook status updates). This snow will pass; soon it will be spring and another AGLP convention in New Orleans. This meeting is extremely important, as it is an election year! As the chair of the nominations committee, I would like to announce the following candidates for AGLP officers:

Kenn Ashley, M.D. for President-elect
Andy Tompkins, M.D. for Vice-president
Serena Volpp, M.D. for Treasurer
Eric Yarbrough, M.D. for Secretary

Nominations will also be taken from the floor of the annual business meeting during the convention. To be nominated, you must be a member in good standing with AGLP and be a member of the APA. Additionally, you must be nominated and seconded by persons other than yourself at the business meeting. New leaders are important in every organization, especially ours. I cringe to think that I had my first AGLP meeting in 2001, as a medical student with more hair but without any idea that this organization would inspire and invigorate me as much as it has.

New ideas spring forth from new leadership. One area in which we perpetually need assistance is how to attract/retain new members. AGLP is a wonderful organization that has done so much in its relatively brief existence. Just today, I learned that the APA has issued a press release urging Congress to repeal the “Don’t Ask, Don’t Tell (DADT)” policy in the US Armed Forces. AGLP members were a strong force behind that action.

We also offer social and networking opportunities, travel scholarships for medical students, and our quarterly journal to name other benefits. We could do so much more!! One idea that I would like to pursue has to do with the effect of repealing the military’s DADT. Very easily, we could do a study on the mental health benefits to GLBT soldiers and their loved ones — by surveying a cohort of individuals before and after the repeal (if and when it does occur). This would be a great partnership between AGLP and the US military, further enhancing our goal to “Research and advocate for the best mental health care for the LGBT community.” This would also open up opportunities to partner with organizations like the Palm Center at UC-Santa Barbara or the Servicemembers Legal Defense Network (SLDN) who have a lengthy track record with this subject matter. If this is an idea that inspires members, please let me know. As well, I would desperately need interested researchers, students, and other...
AGLP Nominations 2010
Continued from Page 7

members to assist me in this project. Send me an email if you would like to help out. ATompkins@aglp.org

I will end my column with a push to renew your membership. Only by participating can you truly make your voice heard and mold the organization into one that serves its members and those in the larger LGBT community. An idea sparks and it can come to fruition much faster in AGLP than in the larger APA or sub-specialty organizations. Join now online at www.aglp.org and be a part of an organization that strives to be the recognized expert on LGBT mental health issues. I look forward to seeing you in New Orleans!!

President’s Column
Continued from Page 3

social. It has always bothered me to think that, although well intentioned, it enhances our differences within a minority group of LGBT people.

The bottom line. The organization does not have thousands and thousands of members. Besides sending a bill for renewal, nobody ever asked why I did not renew my membership. Professional organizations have become outrageously expensive, so I have to make sure that I am supporting an organization that I feel is working for me, and that, when this small, I feel welcomed and appreciated too. We are all psychiatrists and LGBT, but I am not feeling that I am part of a group that I want to [be] a member of. Many of you may not notice what I am talking about, because you already know each other, and you may not notice that you are socializing in your small circles. In my city [be], I am 50% of the LGBT psychiatrists here. My expectations are not high when I go to a convention, but certainly, year after year, the feeling that you are the new kid in school gets old.

I have mixed feelings about my past decision (otherwise, why bother with this letter).

Thank you for your time. And again, any feedback that will help clear my inner demons is greatly appreciated.

On reading this discouraging letter, I realized that there are a number of issues that need to be addressed, not only for this individual member, but for all those who feel similarly. I suspect this is a large number.

I forwarded the letter to all Board members and received varying reactions. Here are some:

Ubaldo, I sympathize with [be]. His comments are poignant, telling, and not new. In the early 90s several of us in AGLP made it a point to try to structure group activities that would be inclusive. Invariably, the cliques would prevail as people went off with old friends, leaving the group activity impoverished with disconnected people. I remember my own first days in AGLP in the mid 80s when I garnered a lot of attention from other AGLP members who insisted that I join them in their activities. I went away with a heady feeling of being liked and connected to a movement larger than myself. We need connected people to reach out to our disconnected members to bond them to AGLP as an organization. I am at a loss, however, about how to successfully appeal to our long time members’ altruism and commit them to bringing all our members into the fold.

Another Board member responded:
There is no right or wrong thing to reply. The important thing is to reach out to this person so he doesn’t feel alienated and out of the club, as he clearly has with AGLP up to now.

Another:
The problem of inclusiveness is not a new problem for AGLP. It is always one which must be addressed with concrete steps and actions, and one which I had to overcome during my early years. For [be], he has a point that we do have many social events, with each one being sponsored/geared towards a specific subgroup. He may not realize that all are welcome at each outing and these events are meant to enhance a feeling of cohesion. These events are also a way of showing that all persons (no matter gender/ethnicity/national origin, etc) are welcome and celebrated.

This first complaint can be addressed with better advertising of “everyone is welcome” to these events, and identifying core members of each group that could make sure that everyone at the events has a talking buddy. This is basic party etiquette, but it can never hurt to re-emphasize. The second complaint of cliques is a little bit harder to address. Persons who do come to APA year after year, invariably form close friendships. It is natural, then, to talk within this group, as the APA may be the only time one gets to see each other. As an organization, we should not try to break down these friendships which encourage continued support of the organization - but we should not model and encourage exclusive groups. It should be the board’s responsibility to talk to everyone at all events attended - to make them feel welcome. I will often try to approach new people/faces and seek out old friends at the APA. That is a part of my personality, but everyone is not necessarily comfortable with talking to complete strangers. That is why the board members and other active members should be encouraged to do likewise at each meeting. We may want to have an event or meeting in the hospitality suite which goes over the goals of the organization (like AGLP 101) which makes it easy for new members or potential members to ask questions in an informal setting. I would be willing to organize this meeting.

And:
I remember the genuine thrill of discovering three of my oldest friends in the back of a mock-Spanish restaurant in Balboa Park. For those four or five minutes, I was part of an intense but unreal clique, which would have quite naturally shut out [be], my life partner; Mom; and [beloved pet]. We’ve had greeters in the past, and I always liked the idea. We are not too cool to forgo [having] middle-aged psychiatrists with “Hi My Name is [be]” stickers, looming at the newbies from the dark. Here’s a tip from the major independent churches: [be] got big by making sure everybody who entered his church was personally greeted. People came from all around simply to be warmly greeted by name. We can do this.

And finally:
Ouch! I am certain that this is not a unique experience for our current and past members. I think that it’s a helpful viewpoint which we don’t have represented on the Board. I experience AGLP as being run and maintained by a relatively small number of people. As such this group may appear very insular even if that wasn’t the intention. For me it actu-
In Memoriam

The AGLP Newsletter marks the passing of one of the people that was there from the beginning: Bertram Schaffner, MD. His range of contributions to the LGBT community and psychiatry went well beyond the events detailed in the following obituary that appeared in the New York Times on January 30, 2010. Readers interested in a candid reminder of Bert may be interested in Joseph Merlino’s interview with him found in the July, 2001, edition of the Journal of Gay & Lesbian Psychotherapy.

“Dr. Bertram H. Schaffner, 97, renowned as a psychiatrist and widely known as a collector of Indian art, died in his sleep on January 29, 2010. The son of Milton and Gerta Herzon and raised in Erie, PA, Bert began his university studies at Harvard at the very young age of 15, transferred to the Honors Program at Swarthmore College, graduating in 1932 and completed his medical education at Johns Hopkins in 1937. Following a residency at New York’s Mount Sinai Hospital and further training at Bellevue Hospital and the New York State Psychiatric Hospital, Bert served with the U.S. Army, first evaluating the mental fitness of draftees and then with the 10th Armored Division as a neuropsychiatrist (seeing active combat during the Battle of the Bulge); at war’s end, he was called to serve at the Nuremberg trials and then served on the denazification process for the American Military Government, service which lead to the publication of his seminal work Father Land (1948) widely used in University courses and by those setting up anti-nazi democratic systems in Germany. After the war, Bert took further training with the William Alanson White Institute in New York City, with which he was associated for most of his career as a psychiatrist, teaching, advising and leading. During these years he was active in promoting mental health initiatives in the Caribbean, serving on the Expert Committee for Mental Health of the United Nations, advising the British, French and Dutch island governments in the West Indies on their mental health programs, and assisting numerous other international organizations.

Never abandoning his private psychiatric practice, he was a leader in the study of the problems of homosexual practitioners in the medical world; he was proud of being one of the very first doctors to treat AIDS patients, writing articles seeking more humane attitudes and treatment for them, and from the 1980’s forward, he dedicated much of his professional efforts to helping HIV/AIDS patients and the health care providers who ministered to them, continuing to receive patients at his home office until shortly before his death.

Also well known as a collector of Indian art, an interest spurred by his participation in a Brooklyn Museum trip to India in 1966. Dr. Schaffner traveled often to the subcontinent and became a beloved member of the arts community in New York, serving on the Collections Committee of the Brooklyn Museum, to which he was both devoted and one of its major donors. Author, prizewinner, compassionate psychiatrist and a model of what it means to be a friend, Bert is survived by his sister-in-law, Mrs. Robert Edward Schaffner, two nieces, and many cousins in all parts of the country, as well as a host of professional colleagues and close friends from all walks of life. A memorial service will be held at a time subsequently to be announced.”

* * *

President’s Column

Continued from Page 8

ally feels like it works this way because the general membership doesn’t step up to take their turn at the wheel. If it weren’t for the people that are receiving this email and a handful of others there wouldn’t be an organization. How’s that for feelings?

What’s happened to AGLP? We’ve talked about this in a variety of ways previously. There isn’t one simple answer but the one that rings the truest for me is that the mission of the organization, as perceived by the membership, is just not that compelling. It’s slipped down the list of competing priorities. As a result the people who do come to convention aren’t arriving hungry to make new connections with other members about the mission and structures of the organization.

If you subtract the names of the people on this email from the attendance of the Symposium, General Meeting and Closing Banquet, you will get a very short list of member’s names. On the other hand if you look at attendance of the social gatherings such as the Welcoming Reception, the Opening Reception and the specialty dinner/events, there is a significant shift in the proportion of attendees to Board members (present and past). These events seem to be much more enlivened. You don’t have to be a psychiatrist to notice what the membership is saying by its behavior. They want the fun stuff. Who doesn’t? As an organization we pursue altruistic goals, but what people want is something else. What actually will get them to come out is something other than a good portion of what makes us a professional organization.

I HOPE THIS COLUMN DEMONSTRATES TO A DEGREE HOW THE BOARD OPERATES, AND HOW IMPORTANT IT IS TO RECEIVE FEED-BACK FROM THE MEMBERSHIP. IF ANY OF YOU READING THIS HAS A THOUGHT TO SHARE REGARDING THE ISSUES AT HAND, PLEASE WRITE TO ME. WE CAN GROW TOGETHER ONLY AS MUCH AS WE COMMUNICATE.

We are blessed with a group of younger members that are participating in significant ways in the organization. The problem is that there is a preponderance of the same and increasingly older faces who tend to be white men from the coasts.

And here’s the gap. The people who run the operations of the organization who are trying to do the right thing for AGLP vs. the members (or people that want to be members) who have other priorities. This is not a sustainable model for an organization as the gap widens.

By this point you’re probably wondering what this has to do with ____‘s observations. I can easily imagine members attending the more formal meetings of the organization seeing the relatively small number of people there. Again most of those people are recipients of this email who have significant histories together and as such probably would be chatting it up. It would be easy to feel like an outsider in those circumstances. Our work together as an organization has produced significant accomplishments and because of lack of continuous influx from the general membership, has made us insular. I can also imagine members coming to
The wall dividing gay activists from religious conservatives is beginning to show cracks, and even signs of crumbling. Although there remain generals on both sides of the wall demanding nothing less than total surrender, their authority is becoming increasingly tempered by more diplomatic, calmer leaders open to dialogue with the opposing side. That dialogue is critical.

On October 3, 2009 The New York Times published an article entitled, “The High Cost of Being a Gay Couple.” Using hypothetical scenarios, the authors, Tara Siegel Bernard and Ron Lieber, calculated that the lifetime expenses of one hypothetical gay couple will be nearly $500,000 more than for a straight couple in similar circumstances. This discrepancy is due to the legal rights denied to gay couples. Inheritance laws, for instance, generally do not allow gay partners to inherit each other’s property in the same way that heterosexual spouses do. In my state of Pennsylvania, if one partner dies and the couple’s home was held in both names, the surviving partner is immediately hit with a 15% inheritance tax on half the value of their house (i.e., her or his partner’s half). And, the value of the house is based on actual value, not the equity. Thus, the surviving partner must immediately pay 7.5% of the entire value of the house to continue living there, even if there is little equity and a large mortgage on the property. All property must be inventoried and a 15% tax is placed on household possessions, the partner’s IRA accounts, and any other assets that cannot be proven to be the sole possession of the surviving spouse. Under such circumstances surviving gay partners can suddenly find themselves homeless, unable to afford to remain in the home that they purchased together with their partner. A heterosexual spouse in my state, however, inherits her or his partner’s half of their assets without any tax. This is only one example of the legal inequity imposed on gay couples that makes gay unions so much more expensive than straight ones. And, this sizeable financial factor is the elephant in the room when people discuss gay marriage. Heterosexual couples will take an indirect financial hit if fairness prevails and gay marriages one day become universally accepted.

IN SHORT, THERE HAS BEEN A WEAKENING OF THE BULWARKS OF THE CULTURAL WARS. IT IS MY BELIEF THAT DIPLOMACY AND DIALOGUE ULTIMATELY WILL PROVE MORE VALUABLE THAN ADVERSARIAL ACTIVISM IN CHANGING ATTITUDES ABOUT SUCH ISSUES AS GAY MARRIAGE. WE SHOULD BE ENCOURAGING AND DIALOGUING THOSE WHO ARE MODERATING THEIR ANTIGAY VIEWS RATHER THAN REFLEXIVELY ATTACKING THEM BECAUSE THEIR CHANGE IN VIEW IS NOT COMPLETE BY OUR STANDARDS.

The strongest opposition to gay marriages, however, has been led by religious conservatives who feel that homosexual behavior is morally wrong and that gay coupling should not be supported — particularly by public policy. Their numbers have been sufficient to turn back gay marriage laws in Maine, California, and Hawaii and to invoke defense of marriage statutes in most states. Often, however, the legislative margins have been very small. It would require only a relatively small number of religious conservatives to modify their position on gay marriages to reverse the disheartening losses that gay activists have sustained in seeking equality. Open and rational dialogue between those fighting for gay rights and their opponents may sway enough opinion to make the difference.

Some change has indeed been achieved. The Rev. Dr. Albert Mohler, President of Southern Baptist Theological Seminary in Louisville, KY confronted 16 million Southern Baptists with the notion that perhaps being gay is not a choice. When Dr. James Dobson stepped down from the day-to-day management of Focus on the Family, Dr. Mohler, from his position on the Board of Directors, was instrumental in persuading Focus on the Family to drop its long held contention that gays are made, not born. The organization subsequently jettisoned its program to attempt “conversion” of gays to heterosexuality, citing budgetary reasons -- a welcome change of course, whatever the explanation. Focus on the Family, with a budget in the eight-figure range, had maintained an entire department devoted to producing paper after paper on the “science of homosexuality.” The content of these far from scientific papers was given an air of credibility by pages of dubious references appended to impress the ignorant faithful as proof of the papers’ shaky arguments. These papers were distributed to thousands of churches and were part of the routine educational materials available for use in Sunday Schools and Bible studies throughout this country. The department is now thankfully defunct, deferring such “education” to the much smaller group, Exodus International.

On the other side of the wall, American Psychological Association set up a task-force in 2007 to propose an “appropriate response to sexual orientation.” The committee, led by Judith Glassgold, Ph.D., (a lesbian and my former colleague) produced a 138-page document in 2009 that is the most thoroughly researched and evenhanded review of the literature I have ever seen. The psychologists’ group acknowledged that is appropriate for some patients, for whom congruence with their religious faith is paramount to their mental health, to undergo sexual identity treatments that do not inflexibly channel them into accepting their homosexuality.

A look back on the other side of the wall reveals that several prominent leaders of the religious conservatives, including Dr. Throckmorton and Rev. Warren, have been vigorously attempting to prevent their Christian colleagues in Uganda from enacting laws which impose draconian prison sentences, and even death, for homosexual behavior.

In short, there has been a weakening of the bulwarks of the cultural wars. It is my belief that diplomacy and dialogue ultimately will prove more valuable than adversarial activism in changing attitudes about such issues as gay marriage.

We should be encouraging and dialogueing those who are moderating their antigay views rather than reflexively attacking them because their change in view is not complete by our standards.

Last November, five AGLP members met briefly during AGLP’s 2009 fall meeting in New York to inaugurate the Committee on Religion and Spirituality. The committee decided to sponsor a retreat at the time of the APA Institute of Psychiatric Services’ Fall Meeting in 2010 in Boston, inviting leaders among people of religious faith and gay mental health professionals to participate in dialogue about our various perspectives on LGBT matters and religious precepts.

Continued on page 12
# Thanks to the Following Who Have Generously Supported AGLP for 2009-2010

<table>
<thead>
<tr>
<th>Exceptional Contribution</th>
<th>Sponsoring Members</th>
<th>Donations to Student Travel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank Rundle, MD</td>
<td>James Batterson, MD</td>
<td>Ronald Albucher, MD</td>
</tr>
<tr>
<td>David Rudolph Kessler, MD</td>
<td>Lonny Behar, MD</td>
<td>Lonny Behar, MD</td>
</tr>
<tr>
<td></td>
<td>Philip Bialer, MD</td>
<td>Curley Bonds, MD</td>
</tr>
<tr>
<td></td>
<td>Steven Bluestine, MD</td>
<td>Juan Buono-Alcaraz, MD</td>
</tr>
<tr>
<td>Founding Members</td>
<td>Curley Bonds, MD</td>
<td>Lisa Capell, MD</td>
</tr>
<tr>
<td>Kenn Ashley, MD</td>
<td>Robert Cabaj, MD</td>
<td>Robert Daroff, MD</td>
</tr>
<tr>
<td>Jack Drescher, MD</td>
<td>Kevin Carrigan, MD</td>
<td>Robert Delgado, MD</td>
</tr>
<tr>
<td>Michael Golder, MD</td>
<td>Tony Carroll, MSW</td>
<td>Marshall Forstein, MD</td>
</tr>
<tr>
<td>George Harrison, MD</td>
<td>Debbie Carter, MD</td>
<td>Douglas Hanlin, MD</td>
</tr>
<tr>
<td>Ubaldo Leli, MD</td>
<td>Cheryl Chessick, MD</td>
<td>William Hanlin, MD</td>
</tr>
<tr>
<td>Edward Nix, MD</td>
<td>Robert Delgado, MD</td>
<td>Daniel Hicks, MD</td>
</tr>
<tr>
<td>Howard Rubin, MD</td>
<td>Donald Fennell, MD</td>
<td>Richard Isay, MD</td>
</tr>
<tr>
<td>Leonard Rubin, MD</td>
<td>Ellen Haller, MD</td>
<td>Karl Jeffries, MD</td>
</tr>
<tr>
<td></td>
<td>Edward Hanin, MD</td>
<td>Kewchang Lee, MD</td>
</tr>
<tr>
<td>Patrons</td>
<td>William Herz, MD</td>
<td>James Lindsey, MD</td>
</tr>
<tr>
<td>Norman Hartstein, MD</td>
<td>Dan Karasic, MD</td>
<td>Paul Lynch, MD</td>
</tr>
<tr>
<td>Dan Hicks, MD</td>
<td>David Krefetz, DO</td>
<td>Benjamin McCommon, MD</td>
</tr>
<tr>
<td>James P. Krajeski, MD</td>
<td>Jon Marhenke, MD</td>
<td>Stephen Melcher, MD</td>
</tr>
<tr>
<td>Petros Levounis, MD</td>
<td>Marlin Mattson, MD</td>
<td>Laurence Miller, MD</td>
</tr>
<tr>
<td>Anthony Marino, MD</td>
<td>Laurence Miller, MD</td>
<td>Edward Nix, MD</td>
</tr>
<tr>
<td>Michael Rockwell, MD</td>
<td>Robert J. Mitchell, MD</td>
<td>Brian Palmer, MD</td>
</tr>
<tr>
<td>David Scasta, MD</td>
<td>J. Brett Offenberger, MD</td>
<td>Roger Peele, MD</td>
</tr>
<tr>
<td>Alan Schwartz, MD</td>
<td>Richard Pillard, MD</td>
<td>Charles Popper, MD</td>
</tr>
<tr>
<td>Kevin Smith, MD</td>
<td>Chester Robachinski, MD</td>
<td>Jamie Snyder, MD</td>
</tr>
<tr>
<td>Margery Sved, MD</td>
<td>Stuart Sotsky, MD</td>
<td>Margery Sved, MD</td>
</tr>
<tr>
<td>Mason Turner, MD</td>
<td>Lowell Tong, MD</td>
<td>John Sweet, MD</td>
</tr>
<tr>
<td>Tim Valko, MD</td>
<td>Mark Townsend, MD</td>
<td>Joshua Thornhill, MD</td>
</tr>
<tr>
<td></td>
<td>Douglas Vanderburg, MD</td>
<td>Andy Tompkins, MD</td>
</tr>
<tr>
<td></td>
<td>Penelope Ziegler, MD</td>
<td>Lowell Tong, MD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mark Townsend, MD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Douglas Vanderburg, MD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Frank Young, MD</td>
</tr>
</tbody>
</table>
President's Column
Continued from page 9

the informal gatherings and wondering, as ___ did, what's the point of belonging to AGLP when they could go any number of places and have the same experience.

Ubaldo, I don’t know how to respond to ___ other than to appreciate his effort to bring this issue to the board’s attention. There is no easy answer to the conundrum of an organization whose mission doesn’t induce membership participation while any less lofty goals cause the membership to drop out.

Taking in the comments of the Board members, I was impressed by the range of response and concern they expressed regarding the specific experience of this member, and also by their understanding and sensitivity to the more general implications of the letter. Some members focused more on this member’s quandary, while others took a broader view, searching for a way to address the root cause of the correspondent’s alienation and dissatisfaction. Although no decisive solution was reached, I am grateful that this member spoke up and gave the Board—and the whole membership—an opportunity to confront directly the issue of organizational mission versus membership needs.

I hope this column demonstrates to a degree how the Board operates, and how important it is to receive feedback from the membership. If any of you reading this has a thought to share regarding the issues at hand, please write to me. We can grow together only as much as we communicate.

In closing, I will confess that what hurt me most in this member’s letter was the comment that the Newsletter has a pessimistic tone. I feel responsible for that personally. It is difficult to lead an organization dedicated to addressing the often overwhelming problems that the LGBT community faces all around the world, without sometimes feeling daunted by the challenges we face. I will not lie about the challenges but will remind myself, along with the whole of AGLP that the reason we are together is because we believe these challenges, like many before them, are ones that can be conquered.

To accomplish a part of that goal the Board has also been working on finalizing plans for our organization’s most important event of the year, the Annual Meetings, running in concurrent with the APA Convention. This year New Orleans will be our host city from May 21 through May 26. Arrangements are being made for the many activities including programs in the hospitality suite, the Annual Symposium, and a variety of meetings and dinners focused on bringing our members together as well as other professionals from the APA. I look forward to seeing everybody on New Orleans!

Committee on Religion and Spirituality
Continued from Page 10

The retreat will be led by an impartial facilitator. The committee also will submit a workshop to the APA for the Annual Meeting in May of 2011 in Hawaii on psychotherapy with gay people who have strong religious proscriptions, with Dr. Ubaldo Leli presenting a case history. The committee is particularly interested in having other members of AGLP on the committee. If you are interested in joining the committee, send me an e-mail at dscasta@aglp.org.

• • •

WELCOME TO OUR NEW MEMBERS!
DECEMBER 2009 - FEBRUARY 2010

Justin Foster, M.D.
Brunswick, Victoria, Australia

Abby Hartzler
Seattle, WA

Eric Lee
Chicago, IL

Saul Levin, M.D.
Chicago, IL

Ian Nassau
Fort Lauderdale, FL

David Partin
Louisville, KY

Samir Sabbag, M.D.
Miami, FL

David Safani
Irvine, CA

Cynthia Undesser, M.D.
Brandon, MS

Jessica Zonana, M.D.
New York, NY
AGLP Executive Committee Phone Conference Minutes

(Editor’s Note: Minor revisions for brevity made by the Newsletter Editor.)

12/4/2009

In attendance: Mark Townsend, Ubaldo Leli, Roy Harker, Eric Yarbrough, David Scasta, Andy Tompkins, Stephan Carlson, Chris McIntosh, Kenn Ashley

1) Ubaldo opened the meeting.
2) Old Minutes: November, 2009 EC meeting minutes were approved.
3) Report on 2010 Annual Meeting New Orleans:
   a) Hotel: Roy planned to confirm Maison Dupuy for hotel. Still needed to confirm no minimum night stay.
   b) Booklet: Stephan planned to take care of booklet. Roy planned to send him an old booklet.
   c) ECP/Resident events: Awaiting hotel info to schedule days for hospitality suite. Andy will email Wes Fisher to increase his involvement.
   d) Funding: Gabriele will follow up for possible funding opportunities for the convention, especially the Symposium. Other possible funding sources include SAGE, HHS, and AARP.
   e) Meeting Schedule: A discussion was held on moving the symposium to Sunday and having the Exec Board meeting on Sunday afternoon, and the board decided to tentatively approve this change. Future EC meetings should confirm this vote, once symposium speakers are announced.
   f) Symposium: Topic area will probably be elderly and LGBT issues.
   g) Awards: AGLP awards have not been decided.
   h) Minority Outreach: Gene Nakajima will arrange for Minority outreach.
   i) Opening Reception: Roy has signed a contract for Opening Awards reception.
   j) VIP Reception: Stephan has identified a host for VIP reception. The night for this was discussed and Tuesday was determined to be the best fit.
   k) Nominations Committee: Andy Tompkins reviewed the nominations committee business. There have been names generated for the positions but no official nominations as of yet.
4) Honolulu, 2011. No discussion but committee chairperson has been identified.
6) Executive Director Report: Roy reviewed the November reports and showed that membership has stabilized in the 300s, but cash flow remains tight. Audit for fiscal year 2008 is completed.
7) Development Report: Gabriele was not in attendance secondary to an illness in family.
8) Newsletter Report: The next newsletter was not yet finished, so there was still time to submit a column.
9) GAP Report: Eric Yarbrough updated the board on online modules of the GAP curriculum. There was a discussion of copyright issues surrounding image usage. Roy volunteered to help with generating images for this project.
10) GLB Committee Report: David Scasta reported on letter to Carol Bernstein, MD to reinstate GLB committee. There has been support for this idea but the need was to make it revenue neutral. We may need to fund indirect costs and have members fund travel expenses. David agrees to come up with an estimate for yearly indirect costs. Allied organizations still were allowed to attend November meeting. David appreciated AGLP member support on this last issue.
11) Psychotherapy Report: Chris McIntosh continued to work on the case conference.
12) The meeting was adjourned.

Next Meeting scheduled for Friday, January 15th, 3PM EST / 12PM PST.

AGLP Executive Committee Phone Conference Minutes

1/15/2010

In attendance: Ubaldo Leli, Kenn Ashley, Andy Tompkins, Eric Yarbrough, and Roy Harker.

1) Old Minutes: December, 2009, EC meeting minutes approved.
2) Report on 2010 Annual Meeting New Orleans:
   a) Hotel: Roy sent an email to the membership that reservations were being accepted. Cost was $169/night for 4+ nights and $209 if less.
   b) Booth: Payment has been made for booth.
   c) ECP/Residents: Marshall wanted Suite from 3-4PM.
   d) Educational Programming: Kenn relayed that Pride Institute was unable to pay for the conference due to the economic problems. There was conversation about possibly changing the location of the conference, i.e. GLMA instead of APA. No consensus was reached on this topic.
   e) Opening Awards reception: Place is booked and the menus are set.
   f) Nominations Committee- None to report. A slate will be announced at next meeting.
   g) VIP Reception, Booklet, Women’s Events: No details available.
3) Membership: There was a discussion of reducing medical student membership dues to $0. Kenn moved that the first year of AGLP be free for new members. Andy seconded that motion. It passed without dissent.
5) Executive Director Report: Roy reported that our cash balance was positive now. Our membership now below 300 for the first time.
6) Development Director: No Report
7) Meeting was adjourned

Next Meeting scheduled for 2/12/2010

Continued on page 14
AGLP Executive Committee Phone Conference Minutes

2/12/2010

In attendance: Andy Tompkins, Ubaldo Leli, Kenn Ashley, David Scasta, Roy Harker, Mark Townsend, Wes Fisher.

1) Report on 2010 Annual Meeting New Orleans: Mark Townsend reporting
   a) Booklet: Stephan has been assigned this task.
   b) VIP reception: Stephan has been assigned this task.
   c) Women’s Events: Jamie Hanna has been assigned these events and has accepted this responsibility.
   d) ECP/Residents: Andy and Eric planned to discuss this over the following weekend. Plans were still to have a brunch and another social outing after the closing banquet.
   e) International Psychiatrists: Gene will be organizing a social outing.
   f) Hospitality Suite: There was a motion to have two days of the hospitality suite. A discussion occurred and the motion was tabled.
   g) Symposium: There was a discussion on the topic, location, and speakers. Several speakers have been identified. Kenn Ashley to report back details at next EC meeting.
   h) Awards: Dan Karasic has resigned this position. Phil Bialer will take over as chair as appointed by Ubaldo Leli with co-chair Jack Drescher. Roy will email to confirm their agreement to these appointments.
   i) Kessler Award: A discussion occurred about the focus of the award. The board felt like more clarification was needed in this area. Instead of a new award, there was consensus to recognize Dr. Kessler for his considerable contributions to AGLP.
   j) Booth: There was an executive decision to keep the leather squares instead of the couches given our current financial concerns. Other board members voiced their approval.
   k) Nominations: Andy announced the slate of nominations. He also motioned for these to be accepted. The Board voted on these nominations without any dissent.
   l) PsychSign (the Medical Student Group of the APA): Wes detailed that this group had been asked to organize a meeting on Friday, 5/21/2010, with AGLP members in attendance. Wes will be representing AGLP and requested members to email him topics in advance of the meeting for discussion.

2) Honolulu, HI, 2011: A pediatrician, Dr. Bob Bidwell, has been identified to assist with the local organizing committee. Roy will send him the list of AGLP members in Hawaii.

3) Newsletter: The next deadline will be 2/15/2010

4) Journal: Roy said the editors met on Monday 2/8/2010. The journal continues to put out issues on time but has yet to be accepted for Medline.

5) Meeting was adjourned.

Next meeting scheduled for March 12, 2010, 4:15PM EST / 1:15PM PST.
AAOL sits on the dais. It was decided that, as the vice-chair of the AAOL’s (who remains on the Assembly floor), it would be my responsibility to voice opposition to such proposals from the floor. When the primary proposal came up, I was relieved to see that the matrix form of representation was kept. In addition to geographic representation cross representation from the MUR’s, MIT’s, ECP’s were retained. But wait a minute. What about the AAOL’s? Not a word in the proposal. I crawled over the backs of my colleagues to get out of the very long, very narrow, and very crowded rows of tables to get to a microphone. With another AAOL representative repeatedly shoving me out of the way to call points of order (which have precedence), I finally was recognized and proposed an amendment to include the AAOL’s. The reference committee seemed a bit dumbfounded, not having addressed anything about the AAOL’s. The chair, Dr. Gaston, finally concluded that, since the AAOL’s are revenue neutral, there was no need to mention them in the proposed revision of the Assembly and it was assumed that their representation would be unchanged. Placing that comment in the minutes, I withdrew my motion and crawled back to my seat.

So the time went. It could have been hours, but by and large, representatives kept their emotions in check and the reference committee completed its work and formulated a final proposal. Dr. Weinstein kept the momentum going in the debates in the plenary session which followed, very effectively managing the tension and potential for no proposal getting support, leaving it up to the Board to mandate cuts. (Given the tension between the Board and the Assembly, that outcome would not be good for the Assembly.) The reference committee’s recommendation was accepted.

In essence, the primary cut was the funding of all of the deputy representatives (including our MUR deputy representative, Dr. Phil Bialer). The deputy representatives can attend only the May meeting by paying their own way. They cannot attend the November meeting. In the end, it was the deputy representatives that were defunded. They technically were not disenfranchised because they do not have a vote unless they are serving in place of the full representative. I frankly was surprised that we could come to any final conclusion and attribute that outcome to Dr. Weinstein’s extraordinary skill as a parliamentarian and leader. I expect that it will not be very long before we will be voting on him for President-Elect.

There is still much to do. In another part of this issue of the Newsletter you will find a letter which Dr. Leli and I wrote to President-Elect seeking reinstatement of the Committee on Gay, Lesbian, and Bisexual Issues. The committee was a component in the executive branch of the APA which formulated many of the APA position statements on LGBT matters over the years. We have been left with a single representative on the Council on Minority Mental Health and Health Disparities — which is inadequate to keep LGBT issues, such as marriage equality, avoidance of misguided reparative therapies, and support of the psychiatric community, from losing ground.

On another personal note, a few action papers are referred to areas for review instead of to a reference committee. One of the action papers in this session put the APA on record as opposing the “Don’t Ask; Don’t Tell” policy of the US military. That action paper by Drs. Young and Shadoan of Northern California was sent to my area as a secondary reviewer. I was uncertain why it was needed since the LGB committee had proffered such a position before its demise. The authors spoke of the need for emphasis by having the Assembly endorse gays serving openly in the military. I spoke in favor of the paper. One of my AAOL colleagues raised questions about the effect on military readiness.

One of the district branch reps, who had served as a psychiatrist in the military, chimed in with other reservations. After some debate, my area voted, however, to endorse the proposal. But I was worried. I contacted some of our friends in the Assembly. Not only do we have our MUR reps (Drs. Mark Townsend and Phil Bialer), we have support from Drs. Kenn Ashley (NY rep), Eric Williams (ECP), and a representative from Area IV. I warned of possible opposition on the floor to the paper.

When the action paper came to the floor, I again crawled back over that long line of colleagues to get to the microphone to support the proposal. I began the deliberation with a four sentence history lesson on the Sacred Band of Thebes. If you do not know the story, the Sacred Band of Thebes was composed of 150 gay coupled men who formed the special forces of the Theban army. The thought was that each man would fight to the death to protect his partner. The band in fact was undefeated in any battle until 338 B.C.E., when the son of Philip of Macedon attacked the Thebans and routed them. The army fled but the Sacred Band of Thebes refused to flee and was completely annihilated. The man who defeated them was a young Greek whom we know as Alexander the Great. Undoubtedly, his future general and lover, Hephaestion, was with him at the time. I reminded the Assembly that the armies of Israel, Britain, and Canada all have openly gay servicemen and there is no reason why the US cannot as well. As I was crawling back to my seat, someone from my area immediately moved to close debate, which was unanimously approved, cutting off any opposing debate. The Assembly, in a salute to LGBT people, then unanimously approved the action paper without a word of opposition. In December, apparently fighting some time pressures, Dr. Weinstein was able to get the Board of Trustees to unanimously approve the position in the waning minutes of its meeting. Cool.

---

**THINKING OF MAKING A PLANNED GIFT TO AGLP?**

AGLP can offer the option of a tax-deferred annuity through the Philadelphia Foundation, giving you income for life and guaranteeing a lasting gift to AGLP.

For this and other options such as naming AGLP in your will, contact Development Officer Stephan Carlson at scarlson@aglp.org.
AGLP MEMBERSHIP APPLICATION FORM

NAME: ____________________________

DEGREE: ___________________ PREFERRED (nick) 1ST NAME: ________________

☐ Full Member - $225  ☐ member of the APA
☐ Resident - $45
☐ Medical Student - $15
☐ Early Career - $100 (1st 3 years out of training)
☐ Friend/Ally - $100
☐ International (Outside US and Canada) - $100 (US cur.)

IF A STUDENT OR RESIDENT, DATE OF COMPLETION: _________________

DO YOU WANT YOUR TO APPEAR IN AN ONLINE DIRECTORY OF AGLP MEMBERS? ☐ Yes ☐ No

EMAIL: _______________________________

MAILING ADDRESS: ____________________________

CITY: ______________________________

STATE: _______ ZIP CODE: ________ COUNTRY: ________

NEW ISSUES OF THE NEWSLETTER ARE SENT AS A PDF TO ALL MEMBERS BY EMAIL TO KEEP COSTS DOWN. IF A PHYSICAL COPY IS REQUIRED PLEASE PROVIDE A PREFERRED ADDRESS: ☐ Home ☐ Office

DO YOU WANT TO BE A NON-CONFIDENTIALLY LISTED ONLINE REFERRAL SOURCE? ☐ Yes ☐ No

IF YES, FILL IN INFORMATION BELOW.

AGE: _______ GENDER: _______ DATE OF BIRTH: _________________

OFFICE PHONE: __________________

OFFICE ADDRESS: ____________________________

CITY: ________________________________

STATE: _______ ZIP CODE: ________ COUNTRY: ________

SPECIALTY: ________________________________

HOME ADDRESS (OPTIONAL): __________________________

CITY: ________________________________

STATE: _______ ZIP CODE: ________ EMAIL: __________________

HOME PHONE: ____________________________

I wish to pay by ☐ Check ☐ VISA ☐ MasterCard ☐ AMEX

CARD NO. ____________________________

EXP. DATE: __________

SIGNATURE: ________________________________

[MAKE CHECK OUT TO “AGLP”, AND MAIL TO: 4514 CHESTER AVENUE • PHILADELPHIA, PA 19143-3707

OR REGISTER ONLINE AT WWW.AGLP.ORG]