



Group for the Advancement of Psychiatry

P.O. Box 570218 • Dallas, Texas 75357-0218
972-613-3044 • Fax: 972-613-5532 • www.ourgap.org

CIRCULAR LETTER #609
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PRE-MEETING SPRING

What's Next?

This is my last presidential column for the Circular Letter. At the spring meeting, we will welcome our new president, David Baron, and other officers, as well as our new GAP fellows. I have thoroughly enjoyed being president—a fairly easy task thanks to GAP's organizational structure, Frances Bell's outstanding executive skills, and the creativity and productiveness of our membership. It has been particularly rewarding to get to know so many of the members better.



Like our other past-presidents, I have been past-president of other organizations (just as one does not usually become a member of GAP without first being involved in other organizations, one does not get elected to leadership positions in GAP without having similar experience in other organizations). I have often thought that being a past-president of anything is the ideal position. One gets to enjoy the prestige of having been president without any of the responsibilities. It is a life-time position. Nonetheless, there is inevitably a sense of loss and some degree of anxiety over whether one will continue to matter to the organization. Some of the prior Past-President's name badges, reflect these feelings, for example, "Used to be Important;" (Jack Bonner) "Has Been" (John Schowalter). I haven't decided whether to have a special name badge -- how does "Past-President for Life" sound?

Past-presidents are free to do what they want, and if they wish, to carve out a role for themselves within the organization. Many of the GAP past-presidents have continued to serve the organization as members of the Planning, Marketing and Communications Committee, a reflection of their wish to share the knowledge they have gained as a result of their presidencies. Throughout much of my time in office – as a member of the Board of Directors, then President Elect and President, one of the major preoccupations has been how to increase GAP's visibility in the outside world. We continue to struggle with this. It seems to me that one thing that might help with this is having a better sense of what happens to our fellows after they complete their fellowship. Granted, they are a select group to begin with, chosen for their likelihood to make major contributions to the field, but it would be nice to know their thoughts on how their fellowship has influenced their subsequent careers. In the fall, I began the task of tracking them down, using the information Frances gave me, which is based on the information current at the time of their fellowship—in some cases many decades old. However, thanks to the Internet, I have been able to update the information on nearly all (using the APA or AACAP member directories or in some cases just "Googling" them). The next step will be to contact them and ask for their feedback on their GAP experience. I am not sure where this effort will lead but I'm sure it will prove fascinating. I am hopeful that it will help give us a sense of what has worked and what hasn't and where GAP needs to go in the future.

For most, if not all, GAP members GAP is not the only professional organization to

which they belong. Perhaps there is something about GAP members that make them value “connectedness” very highly. We know that connectedness to school is a protective factor for adolescents. It seems likely that connectedness to professional organizations also has a salutary value for us. Approaching the end of my residency, I was filled with anxiety over the future. I felt as though I would be venturing out into uncharted territory—expected to provide supervision to other mental health professionals in my forthcoming job in a community mental health clinic, and expertise to patients and families—all without the benefit of weekly supervision and the presence of colleagues and teachers all around me. I joined every professional organization I could think of and quickly became active in most of them at the local level (I discovered that all I needed to do was show up at meetings and volunteer to help). That and volunteer faculty activities at Johns Hopkins, where I had trained, helped me feel connected. For me, this involvement in professional organizations has been an important part of my professional identity. Peers in these organizations provide a mirroring function; the organizations also allow one to contribute to the field and one’s profession in a way that is intensely gratifying, and extends one’s influence beyond that that one can have on individuals. GAP is unique in that in addition to performing the above functions, it creates products that have an enduring value, and allows us to reach an invisible audience in ways that we cannot really appreciate. The nice thing is that one never has to leave GAP during one’s lifetime. Judging from the number of long-time members who are still actively contributing, I am not the only person who feels this way. So, many thanks to all of you for allowing me to serve as your President. It has indeed been a pleasure and a privilege.



Lois T. Flaherty, M.D.
President

Announcements:

NOTE: The Plenary Program on Friday, will begin promptly at 5 p.m. with Paul Appelbaum, M.D. as our Plenary Speaker on “Psychiatrists with Conflicts: How Should We Relate to Pharma”.

There will be poster sessions set in the Commons Area outside the Cooper-Greeley Room at 4 p.m. Posters will be presented by Committees on Adolescence, Disaster & Terrorism, and Medical Education.

We will have the new group of Fellows joining us for their first meeting, please welcome them to GAP for a great experience! If you are interested in mentoring one of these Fellows, please contact Frances in the Central Office.

The revised bylaws are available in the GAP Office at the meeting or you can request a copy by mail.

Board of Directors Nominees

LEAH J. DICKSTEIN

How fortunate I was to be invited as a guest to GAP's Committee on Medical Education in 1991. I had read past reports and recognized GAP members' names when reading our field's national refereed journals and attending national meetings. I enthusiastically attempted to contribute to the committee's then current project, listen intently and carefully learn to participate constructively.

As the Committee Chair, later, once more I was honored to be given that responsibility to raise questions and all together, bring new ideas to light and to print.

Invited to join the Fellowship Committee and then to chair it for 2 groups was a challenging, wonderful experience, particularly when fellow Tonya Foreman proposed a Resident's Survival Guide and my task was to contribute as ordered and ensure its timely completion. As we know, it's in its second edition via APA's Deborah Hales' Office of Education.

Equally as interesting as committee work have been the informal opportunities to meet and converse with other members I never would have encountered.

My career highlights at the University of Louisville encompassed founding its first student mental health section of the University Student Health Service, then assuming the Associate Dean for Student Affairs responsibilities at the medical school and then creating the Office for Faculty & Student Advocacy as Associate Dean at the medical school. Programs I created included the Health Awareness Workshop, a 4 day voluntary pre-orientation program for entering medical students and their significant others, including a children's day, I directed for twenty years. It was an invigorating creative opportunity to teach students to first care well for themselves in order to then care for patients in all fields. Dozens of students and selected faculty made it possible. Dr. Joel Elkes had originally requested I do it modeled on a program I had created 3 years before.

Other programs included those related to building a constructive, caring healthy supportive student community, thus helping any and all who sought my "one minute". A monthly Health Awareness newsletter, Student Hour, Advocacy & S.O.U.L. programs, serving as advisor to student organizations: SNMA, GLBT, AMWA, AMA student representatives, AAMC and APA local, regional, national leadership roles, and of course, time for academic research and publications.

However, the balance of continuing to treat medical and other HSC students, residents and clinic patients throughout my career along with lecturing and supervising students, residents, and faculty, enabled me to maintain a positive balance and not reach burnout. I also involved sons and husband in projects.

I retired as Professor Emerita in 6-02 and in 2008 after lecturing in the U.S. and Europe, I began supervising psychiatry residents at Tufts as part time voluntary faculty.

This opportunity to serve on GAP's Board would be an honor and privilege.

JOHN G. LOONEY

John Looney is a long standing member of GAP; he first attended in 1974. He served on the Committee on Research and now is on the Long Range Planning Committee.

John is a Professor of Psychiatry at Duke University Medical Center. He has served Duke in a variety of roles, particularly in developing new programs. He was recruited as Director of the Division of Child and Adolescent Psychiatry and was charged with reorganizing the division with an emphasis of developing a full continuum of psychiatric services, including the treatment of alcohol and drug problems. He was charged with increasing the amount of research in child and adolescent psychiatry, and research increased from zero external funding in 1986 to the current extensive research portfolio. Dr. Looney now directs a substance abuse treatment and research program at Duke. He has developed an innovative approach to dealing with the problem of excessive drinking by

college students. He takes teams of consultants to university campuses to design methods of institutional cultural shift to help college administrators reduce the mortality and morbidity of student alcohol use. His work with universities is supported by a permanent endowment from the Cotswold Foundation of Philadelphia.

John has been active in many organizations. He most recently finished serving Chair of the Investment Oversight Committee of the APA. He now serves as a consultant to them to help manage through these most difficult financial times.

NYAPATI R. RAO, M.D.

Nyapati R. Rao, known to his friends as Raghu Rao, completed his undergraduate medical education in India and migrated to the US for postgraduate training in Psychiatry. He completed his residency at Brookdale Hospital Medical Center in Brooklyn, where he was later appointed the director of residency training in psychiatry. Subsequently, he directed the psychiatry training program at SUNY-Downstate Medical Center and is now the Chair of the Department of Psychiatry at Nassau University Medical Center, a large public sector teaching hospital Nassau County, N.Y. Dr.Rao is fully aware of the challenges faced by an IMG in the US and he has assiduously striven to place their issues on the front burner of psychiatric profession. A professor of clinical psychiatry, he has written and made numerous presentations about various aspects of the IMG experience.

Dr. Rao chaired the APA's Council on Medical Education and Life-Long Learning from 2000-2004 and he recently completed his term as the President of the Brooklyn Psychiatric Society. He is the founding Chair of the Committee on IMGs at the Group for Advancement of Psychiatry, a member of the American College of Psychiatry as well as a consultant to the IMG Governing Council of the American Medical Association. At the American Association of Directors of Psychiatric Residency Training, he was responsible for the creation of a mentorship program for IMGs. In association with the APA's Office of Education, he recently organized a daylong course at the APA titled "The IMG Institute" that oriented new IMG residents to American Psychiatry. A Distinguished Fellow of the APA, Dr.Rao was recently honored as the Educator of the Year by the Association of Academic Psychiatry. He lives with his family consisting of his wife Meera and two children Uttam and Meghana, in Nassau County.

CALVIN R. SUMNER

This is my 27th year in GAP and I appreciate being selected by the Nominating Committee this year as a candidate for your Board of Directors. Like many members, GAP has been and continues to be one of the more important activities of my professional life bringing friendship, intellectual stimulation and key networking with valued colleagues in Psychiatry. In return, I have worked throughout my tenure to leverage my personal and professional relationships to bring financial resources and professional expertise to the organization. I am currently a member of the Psychopharmacology Committee, past Chair of the Public Education Committee and have served for many years on the Finance and Contributions Committees. It would be a privilege to represent the members of GAP on the Board of Directors as we honor our legacy and chart our course into the future.

APRIL 2009 MEETING
125TH MEETING OF
GROUP FOR THE ADVANCEMENT OF PSYCHIATRY

THURSDAY, APRIL 16, 2009

10:00 a.m.	GAP Office Opens Masefield A Room
10:00 a.m.	Finance Committee Meeting Masefield B Room
12:30 p.m.	Publications Board Hutchinson A Room
2:00 p.m.	Board of Directors Cooper B Room
4:00 p.m.	Fellows Meeting Cooper A Room
4:00 p.m.	Fellows Selection Committee Masefield B Room
5:30 p.m.	Reception of the Board of Directors Room 688
6:30 p.m.	Fellows Dinner Cooper A Room
8:30 p.m.	Career Development for Women Cooper B Room
9:00 p.m. - 11:00 p.m.	Hospitality Room Irving A and B Rooms Hosted by: Gender Issues and Mental Health

Thursday Committee Meetings

Psychopathology	3:30 p.m.	Gallery Room
Child Committee	8:00 p.m.	Library Room
College Student	7:00 p.m.	Studio Room
Disaster & Terrorism	7:30 p.m.	80 West Restaurant (4)
Family	8:00 p.m.	Hutchinson B Room
Psychiatry and Neuroscience	2:00 p.m.	Room 219

FRIDAY, APRIL 17, 2009

7:30 a.m. Breakfast
Cooper-Greeley Rooms

8:30 a.m. General Membership Meeting
Cooper-Greeley Rooms

9:30 a.m. Committee Meetings

10:30 a.m. Coffee Break

12:00 noon Luncheon
Cooper-Greeley Rooms

Steering Committee Meeting
Irving A Room

1:00 p.m. Fellows Meeting
Irving B Room

2:00 p.m. Committee Meetings

3:00 p.m. Coffee Break

5:00 p.m. Plenary Session: "Psychiatrists with Conflicts:
How Should We Relate to Pharma"
Paul Applebaum, M.D.

6:30 p.m. Cocktail Reception
Red Oak Terrace

7:30 p.m. Dinner
Cooper-Greeley Rooms

9:00 p.m. Hospitality
Foyer - Cooper-Greeley Rooms
Hosted by: Human Sexuality

SATURDAY, APRIL 18, 2009

8:00 a.m. Breakfast
Cooper-Greeley Rooms

Steering Committee Meeting
Irving B Room

Fellows Breakfast Meeting
Irving A Room

9:00 a.m. Committee Meetings

11:30 a.m. Lunch
Cooper Room

COMMITTEE MEETINGS

ADOLESCENCE	ROOM 688
AGING	MASEFIELD B ROOM
ADDICTIONS	VANDERBILT SUITE/ROOM 107
CHILD PSYCHIATRY	LIBRARY ROOM
COLLEGE STUDENT	STUDIO ROOM
CULTURAL PSYCHIATRY	PORTICO ROOM
DISABILITIES	LYNDHURST SUITE/ROOM 104
DISASTERS AND TERRORISM	ROOM 217
FAMILY	HUTCHINSON B ROOM
GENDER ISSUES AND MENTAL HEALTH	HUTCHINSON A ROOM
HUMAN SEXUALITY	ROOM 207
IMG	ROOM 223
INTERNATIONAL RELATIONS	VERANDA ROOM
LGBT	ROOM 201
MEDICAL EDUCATION	PARLOR ROOM
MENTAL HEALTH SERVICES	ZENGER ROOM
PLANNING, MARKETING AND COMMUNICATIONS	ROOM 305
PREVENTIVE PSYCHIATRY	ROOM 215
PSYCHIATRY AND THE COMMUNITY	KYKUIT SUITE/ROOM 103
PSYCHIATRY AND THE LAW	SLEEPY HOLLOW/ROOM 105
PSYCHIATRY AND NEUROSCIENCE	ROOM 219
PSYCHIATRY AND RELIGION	ROOM 209
PSYCHOPATHOLOGY	GALLERY ROOM
PSYCHOPHARMACOLOGY	ROOM 634
PSYCHOTHERAPY	JOHN CARRERE/ROOM 101
RESEARCH	ROOM 203
SOCIAL ISSUES	ROOM 211
TERRORISM and POLITICAL VIOLENCE	ROOM 205
THERAPEUTIC CARE	JOHN JAY SUITE/ROOM 102
WORK AND ORGANIZATIONS	VAN CORTLANDT/ROOM 106

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President

Lois T. Flaherty, M.D.
336 South Smedley Street
Philadelphia, PA 19103-6718
O: 215-478-3568
FAX: 267-657-1341
Email: lflaher770@aol.com

Secretary

Marcia Goin, M.D.
2500 Park Oak Drive
Los Angeles, CA 90068
O: 213-977-1129
FAX: 323-469-4399
Email: mgoin@usc.edu

Immediate Past President

Paul J. Fink, M.D.
191 Presidential Blvd.
Suite C-132
Bala Cynwyd, PA 19004
O: 610-664-5007
FAX: 610-664-5279
Email: pjayfink@aol.com

President Elect

David A. Baron, D.O.
100 East Lehigh
Philadelphia, PA 19125
O: 215-707-8483
FAX: 215-707-0408
Email: dbaron@temple.edu

Treasurer

Steven S. Sharfstein, M.D.
Sheppard & Enoch Pratt Hospital
PO Box 6815
Baltimore, MD 21285-6815
O: 410-938-3401
FAX: 410-938-3450
Email: ssharfstein@sheppardpratt.org

Central Office - Reimbursement Office

Frances M. Bell
PO Box 570218
Dallas, TX 75357-0218
O: 972-613-0985
FAX: 972-613-5532
Email: frda1@airmail.net



DATES OF FUTURE GAP MEETINGS

2009
April 16-18
November 12-14

2010
April 15-17
November 11-13

2011
April 7-9
November 10-12

2012
March 29-31
November 15-17

2013
April 4-6
November 14-16

2014
April 10-12
November 13-15

2015
April 16-18
November 12-14