



Association of Gay and Lesbian Psychiatrists

OPENING MINDS

VOLUME XXIX(1) · FEBRUARY 2003

In this issue . . .

AGLP San Francisco 2003 **1**
Dan Karasic, M.D., Vice-President

Editor's Column **2**
Cheryl Chessick, M.D.

President's Column **3**
Mary Barber, M.D.

AGLP Contributors List **4**

Caucus of LGB Psychiatrists **5**
Margery Sved, M.D.

Update from the Executive Director **6**
Roy Harker

Welcoming Residents to San Francisco **7**
Kristin Riley-Lazo, AGLP Resident Representative

2002 Preliminary Financial Statement **7**
Cheryl Chessick, M.D.

Book Review **8**
The Man Who Fell in Love with the Moon,
reviewed by Todd M. Kline

International Issues Committee **9**
Gene Nakajima, M.D.

The Whole Enchilada **10**
Andy Tompkins

LAGCAPA **11**
Stewart Adelson, M.D.

Announcements **12**

LAGCAPA Membership Application **15**
Cheryl Chessick, M.D.

Membership Forms **16**



Photo courtesy of the San Francisco Visitors and Convention Bureau

Convention news: Now is the time to make your May travel plans for San Francisco!

Dan Karasic, MD, AGLP vice president

The San Francisco Downtown Courtyard Marriott is reducing the room rates for the AGLP block from \$199 to \$185. The hotel is already offering this reduced rate on the APA website, but it is critical to AGLP that you reserve your room under the AGLP block, instead of the APA block. If you already have reserved under the AGLP rate, your room rate will be reduced; you need to take no action. If you reserved your Courtyard Marriott room under the APA block (e.g., from www.psych.org or the registration booklet), please let us know, by emailing or phoning Roy. The Courtyard Marriott will credit AGLP for these rooms. AGLP is on the hook for 80 rooms, and it is critical that our members reserve their rooms through the AGLP block, as we are financially responsible for these rooms if they are not filled. Please also let Roy know if you have any trouble getting a room. Rooms are still available, but reserve ASAP. The telephone number for the Courtyard Marriott is: 1-800-321-2211. Ask for the Association of Gay and Lesbian Psychiatrists (AGLP) block.

Plan to arrive Friday night, May 16, when we plan the first of nightly receptions and parties, stay through the awards banquet Wednesday night, May 21. Friday night we plan a welcoming gathering to reacquaint you with familiar faces and make plans for the week.

Continued on page 15

The Newsletter of the
*Association of Gay and
 Lesbian Psychiatrists*

Editor, Cheryl Chessick, M.D.

Published quarterly from 4455 East 12th Avenue,
 Box A-00-11-21, Denver, Colorado 80220.

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: Cheryl Chessick, M.D., Editor, *Newsletter* of AGLP; is 4455 East 12th Avenue, Box A-00-11-21, Denver, Colorado 80220. (Phone: 303-315-9884, FAX 303-315-9570, E-mail:cheryl9753@aol.com). 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 15, 2003.

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 or 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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Editor's Column

Cheryl Chessick, M.D.

Well, it is 2003, believe it or not.

First, I want to give a hardy thank you to Ellen Harker MD for her great book review that she did for us in the last newsletter on "Queer Blues".

I am reminding you all (thanks to Dr. Sved) of the Women in Medicine Conference coming up July 9th-13th in Pacific Grove, California. This is specifically geared for lesbian physicians/residents/medical students. It should be a great conference this year. I do not know if others will be presenting but Dr. Harker and I will be talking about mood disorders. For those who are interested, please check out their web site for more details and registration information at: cme.uvm.edu/sell.asp?s=sell&eventId=2714

I would like to take a moment of digression to thank one of our members for helping my family out. My partner's aunt who is elderly and living outside of Phoenix was being taken advantage by two people who had "befriended" her. My partner who watches out for her from a distance discovered this and had to get a lawyer involved to get her disentangled. In the process, her aunt needed a competency evaluation. I, not knowing a psychiatrist in that area, took out my referral directory. Charles Thomas MD saw my partner's aunt timely and was quite helpful. This greatly relieved our family but really was a time that for me personally that this organization really works. I just want to again give a thank you to everyone who works hard to make our organization work.

Moving on, it is the beginning of a new year I wish goodness for all in the coming year. There are several columns and announcements in this episode of our newsletter. Please take your time and read them. As always, anyone in the membership is welcome to submit a column to the newsletter.

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LAGCAPA
Continued from page 11

In addition, many of LAGCAPA's members serve on AACAP's Homosexual Issues Committee where important policy matters are addressed. Recent issues have included the drafting of a sexual orientation nondiscrimination policy adopted by AACAP, AACAP position statements on the fitness of gays and lesbians as parents, drafting an Academy position on "reparative" therapy for teens, and recommending AACAP positions on amicus curiae briefs submitted by civil rights organizations in several precedent-setting legal cases.

Our Future

In addition to these educational and advocacy roles within AACAP, LAGCAPA continues to plan new and innovative projects to fulfill its mission. LAGCAPA plans to work closely with its adult psychiatry counterpart, the Association of Gay and Lesbian Psychiatrists (AGLP), to broadcast its efforts by serving as consultants to the broader community of General psychiatrists. Planned activities include clinical consultation breakfasts for AGLP members with LAGCAPA members during the annual meeting of the American Psychiatric Association, jointly sponsored scientific presentations relating to youth affected by LGBT issues at both AACAP and APA meetings, and making available a roster of LAGCAPA members available for consultation and referral nationwide. LAGCAPA also has established a women's committee to better serve its members.

A new LAGCAPA website has been created to allow its members to communicate and find information more easily. Planned services of the website include access for members to LAGCAPA's mission statement, newsletters, bulletin boards and listserves where members can communicate with one another and exchange information.

The Benefits of Membership

In addition to supporting all of the worthwhile activities described above, LAGCAPA members receive several benefits.

First are the camaraderie, support, and opportunities for networking which are a part of belonging to LAGCAPA. Members have a chance to gather twice a year at receptions held during the AACAP and APA annual meetings. In addition, members who choose to can have their names published in a LAGCAPA directory distributed to members.

LAGCAPA members also have the opportunity to participate in meetings at which future scientific presentations are planned and where organizational strategy and other LAGCAPA business is discussed.

Finally, LAGCAPA members have the satisfaction of knowing that they are playing a role in supporting the mental health needs of LGBT youth and others affected by sexual minority issues.

Membership Application

LAGCAPA

LESBIAN AND GAY

CHILD AND ADOLESCENT
PSYCHIATRIC ASSOCIATION

2002 & 2003 Membership Dues Application

Please complete the following and submit with your payment (US dollars) to:

LAGCAPA
P.O. Box 2031
Newport, OR 97365

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____ Fax: _____

Email: _____

Full Members: *member of or eligible for membership in the AACAP*
Annual Dues: \$50.00 \$ _____ .00

Member: *other physicians or mental health professionals*
Annual Dues: \$50.00 \$ _____ .00

Member in Training: *Psychiatric Intern, Resident or Fellow*
Annual Dues: \$5.00 \$ _____ .00

Check One: Child Research Fellow General Psychiatry Resident

Medical Student 1st Year Child Psychiatry Fellow

2nd Year Child Psychiatry Fellow.

*Dennis Anderson, M.D. Memorial Fund Donation \$ _____ .00

TOTAL ENCLOSED: \$ _____ .00

Please make check payable to: LAGCAPA

Mailing List Status: Your initials below indicate the above information WILL be included in a directory sent to all LAGCAPA members. If the space is empty, you have elected NOT to have your name included in a directory sent to all LAGCAPA members.

*In memory of the founding president of LAGCAPA, this fund has been established to provide support for trainees to become active in LAGCAPA by supporting travel to meetings.

The information provided above is used for the LAGCAPA mailings and for the Membership Directory, if you choose to have your name included.

Continued on following page

An Update from the E.D.

Continued from page 6



The Sheraton Midtown Colony Square, site of the AGLP 2005 Annual Meeting

AGLP 2005 is in Atlanta, Georgia. There we have blocked 100 rooms at the Sheraton Midtown at Colony Square. This location is ideal for our membership in the heart of midtown-Atlanta's arts and business district. Besides residing in Atlanta's gay district, the hotel is just one block from the Woodruff Arts Center, the Atlanta Symphony, the Alliance Theater and the Atlanta School of Art. Other area attractions include the Margaret Mitchell House & Museum, Atlanta Botanical Garden, Rhodes

Hall and the fabulous Fox Theatre. MARTA, Atlanta's rapid mass transit system, is just two blocks from the hotel, putting you within minutes of Hartsfield International Airport, downtown, Buckhead and all of Atlanta's best venues, shopping and attractions. Other on-site amenities include a seasonal outdoor swimming pool and sundeck, massage therapy services and a fitness center. Guests may also take advantage of the six-mile jogging trail and tennis courts at Piedmont Park, just two blocks from the hotel.

Our group rate for this venue is \$239/night. The local arrangements chair in Atlanta is Dr. Edward Nix, M.D. The meeting runs from May 20 to May 26, 2005.

We are still looking for local arrangement chairs for Toronto (2006) and San Diego (2007). If you would like to be host for these events, the membership of AGLP would greatly appreciate your service. Please contact me as soon as possible - planning is already underway - including hotel selection.

In late February, I will be attending a conference, sponsored by the Gill Foundation, in Las Vegas. This Regional Training Institute for fundraising and development is formulated for gay and lesbian non-profit groups. The mission of the Gill Foundation is to secure equal opportunity for all people, regardless of sexual orientation or gender identity by providing grants, strengthening the leadership and managerial skills of nonprofit leaders and building awareness of the contributions people of diverse sexual orientations and gender identities make to American society. I hope this event will mark the beginning of a sustained relationship for both AGLP and the Gill Foundation.

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The Whole Encilada

Continued from page 10

all the programs you are applying to. You need to weight the benefits of listing your unique activities against the risk that a program might view your being LGBT negatively. Listing potentially LGBT-related activities, e.g. the AIDS Ride, as a substitute for coming out is probably too subtle and vague of an approach.

The Dean's letter is a written account of your grades, evaluations, and activities, prepared by your Dean's Office and sent to all programs. As with the common application form, if you don't want to come out to some programs, then you should not be out on your Dean's letter. Review your Dean's letter carefully to make sure you are comfortable with all aspects of the letter.

Since you can send different personal statements to different programs, coming out in your personal statement is essentially the only way to reveal your LGBT identity to some but not all programs on your written application. You can also choose which letters of recommendation are sent to which program. All aspects of your application are potential topics of discussion in your interviews, so if you aren't comfortable discussing anything, don't include it on your application." Also, do not rely on "gaydar" to gauge the tolerance of a specific program on interview day. This could inadvertently backfire and ruin your chances.

Finally, "it's in a program's best interest to represent itself accurately. Misinformation and faulty expectations produce unhappy residents and, in turn, a bad reputation for the program. The best way to find out about the climate for LGBT people at a particular program is to ask an LGBT person in that program, or at least at that institution if you can't find someone in the program. Asking a non-LGBT person in the program is a potentially easier but less satisfactory alternative, simply because non-LGBT people are less likely to have an accurate assessment of the LGBT climate."

What am I going to do?? I decided upon entering medical school that I was not going to hide again behind some old smoke and mirrors after my departure. I will be out on my application, but I do not plan to be overly fundamentalist about it. My sexuality is only one part of what makes me (hopefully) a good fit to the program of my choice.

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President's Column

Mary Barber, MD

"How did you get there from here, Mr. Shepard?
 What did you have to go through?
 How did you get there from here, Mr. Shepard?
 How did you get to be you?"
 (Sondheim, *Merrily We Roll Along*)

In the above quote from a Stephen Sondheim musical, a high school graduate is questioning Franklin Shepard, who graduated from the same high school 25 years before. The musical explores themes of changes in one person and in our culture, of friendships sustained and lost, and of a desire to look back at one's history in order to recapture one's youthful ideals. Now, as we enter the 25th anniversary year of the creation of AGLP, we might do well to think about how we got to where we are as an organization today.

Of course, gay and lesbian psychiatrists existed before AGLP. Even before 1973, the year that APA removed homosexuality as a diagnosis from the Diagnostic and Statistical Manual, homosexual psychiatrists met at the APA annual meeting. These meetings were informal and low-profile, as the psychiatrists attending risked careers and often marriages by affiliating with each other. In 1978, a few years after the deletion of homosexuality from the DSM, the Caucus of Homosexual-Identified Psychiatrists of APA was created. This organization was the forerunner of AGLP.

1978 was a time of bellbottoms, disco, Jimmy Carter, and pre-HIV sexual freedom, as well as gas lines and stagflation. It was with this backdrop that several brave gay and lesbian psychiatrists began working with the APA leadership, doing educational programs at the annual meeting and advising the board and assembly on issues important to us.

Now, as we enter the 25th anniversary year of the creation of AGLP, we might do well to think about how we got to where we are as an organization today.

Members of the Caucus helped get the APA Committee on Psychiatric Aspects of AIDS started, and eventually saw it elevated to Commission status. The Caucus successfully petitioned the APA to have gay, lesbian, and bisexual psychiatrists recognized as an underrepresented group. Thus in 1982 we thus gained an assembly representative to voice our issues within APA.

In 1985, the Caucus, by then called the Caucus of Gay, Lesbian and Bisexual Psychiatrists of APA, became independent from APA and changed its name to the Association of Gay and Lesbian Psychiatrists. Somewhere around this time (anyone who knows exactly when, let me know), the Committee on Gay and Lesbian Issues was formed in APA. The Committee has continued to work within APA to educate the leadership on current issues of importance to LGBT people, through position papers and presentations at the APA annual meeting. Meanwhile, AGLP began having independent meetings concurrent with APA, allowing for more informal gatherings as well as more cutting-edge talks on LGBT mental health issues during our Saturday pre-convention symposia. AGLP continued to work with APA, and was a force behind the removal of "Ego-Dystonic Homosexuality" from DSM in 1986.

AGLP members have published monographs through APA Press on psychiatric aspects of HIV and on LGBT men-

President's Column

Continued from page 3

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 2001.

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tal health. The most significant of these is the 1995 Textbook of Homosexuality and Mental Health, edited by Bob Cabaj and Terry Stein. Meanwhile, over the last few years, AGLP's own Journal of Gay and Lesbian Psychotherapy has become a premier source of scholarly information on LGBT mental health issues.

In 1995, AGLP opened a national office and hired our first and only office director, Roy Harker. In 2002, Roy was named AGLP's Executive Director. Many AGLP members have played a central role in the history of our organization and deserve to be recognized. Some of these people have served as presidents of AGLP (1), some have been honored with the James Paulsen award for service to AGLP (2), and some have been profiled in the Journal's interview series (3). However, there are many more who have made significant contributions to our work and mission. Their names are too numerous to mention, and I would certainly miss some important ones if I tried. But it's important to remember that the things we've accomplished have largely been done with the work of many many psychiatrists, volunteering their time and energy for a cause they believe in.

After this brief and rather sketchy history of AGLP, we come to today. We have written our mission and vision statements, and are in the beginning stages of trying to reach beyond our sister professional organizations to the greater community. Our web site has been the first vehicle for reaching a broader audience, and we hope to branch out to other projects.

At times, some among us have wondered whether we still need an organization like AGLP. After all, in 1978 the gay rights movement was still in its infancy, and gay psychiatrists were just beginning to be able to emerge from the closet. In 2003, several states have anti-discrimination laws that include gay men and lesbians, the gay community is in the midst of a baby boom, gay people are visible in the media, and Vermont recognizes civil unions for same-sex couples. Openly gay candidates have been accepted for psychoanalytic training, and many psychiatrists are able to be out at work without fear of negative consequences.

However, several states still have sodomy laws, hate crimes against GLBT people and those perceived to be GLBT still occur with some frequency, several states effectively bar gay people from adopting children by excluding "single" people, and Florida bans gay people from adopting explicitly. Advocates of treatments to change sexual orientation continue to be a vocal minority, and were recently allowed to run an ad in the mainstream magazine "Psychology Today," implying a kind of professional

Continued on page 13

President's Column

Continued from page 4

endorsement. And although Trent Lott's being ousted from his leadership position in the Senate after making racially insensitive remarks hardly means that racism is no longer a problem in our country, what about his failure to suffer any consequences after his comments a few years ago, equating homosexuality with kleptomania? In our own field, psychiatrists in training still encounter bias among some supervisors, GLBT patients still go through treatments which are insensitive to their identities, and psychiatrists in many areas of the country still do not feel safe being open about their lives with colleagues. Additionally, very little has been done in the areas of civil rights or scholarship on mental health needs for transgender people.

Well, not to end on a sad or discouraging note, but I believe there is still significant work to be done, within our field and outside of it.

From the past, to the present, to the future: Four of our members have renewed their memberships at the founder's level. They are Frank Rundle, Bill Resnick, David Kessler, and Dan Hicks. For Frank, this is a repeat pledge, and he has done work to get other longstanding AGLP members to contribute more towards the organization. All three of these folks are helping ensure that AGLP can exist for many years to come, and I hope you'll all join me in thanking them wholeheartedly. Many other members have renewed memberships or joined AGLP at levels above and beyond the standard membership category, and they are all much appreciated as well. Their names are listed at the end of this newsletter.

So, let's all celebrate our twenty-fifth year as an organization, and get rolling along to San Francisco!

(1) Past AGLP Presidents: Frank Rundle, Stuart Nichols, James Krajewski, David Kessler, Terry Stein, Robert Cabaj, Norman Hartstein, Peggy Hackenbruck, Marshall Forstein, Margery Sved, David Scasta, Daniel Hicks, Philip Bialer

(2) Recipients of James Paulsen Award: 1996, Frank Rundle; 1997, Bert Schaffner; 1998, Jim Krajewski; 1999, Peggy Hanley-Hackenbruck; 2000, David L. Scasta; 2001, Marshall Forstein; 2002, Margery Sved

Interviewed for JGLP: Bert Schaffner, Frank Rundle, Martha Kirkpatrick, Ed Hanin, Robert Campbell, Stu Nichols, John Fryer, Richard Isay, and due in Volume 6, Charles Silverstein

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AGLP San Francisco 2003

Continued from page 1

Saturday we plan an all-day CME conference, "Beyond Coming Out: LGBT Mental Health Care Across the Life Span." The conference will feature a plenary session on developmental issues and psychotherapy across the life span and another session on the clinical implications of LGBT mental health research. The afternoon will feature three separate tracks: mental health care for gay/bi men, for lesbian/bi women, and for trans people. The format will be case presentations with discussants. After the conference, there's the lesbian dinner, and later, a party for everyone.

Sunday morning we plan a brunch for residents, medical students, and early career psychiatrists. Sunday night will be the opening reception, at Zeum, the children's interactive art museum. Bring your inner child. There will be karaoke in the TV studio, which can be broadcast throughout the museum! Maybe we'll make some videos for the AGLP archives.

Monday, after the AGLP business meeting, will be the international psychiatrists and psychiatrists of color reception. This year, this event is slated to be at a beautiful home in the Castro. Tuesday night will be the LAGCAPA (child psychiatrist) reception, in the spacious hospitality suite. Wednesday night is the awards banquet, at the renowned California cuisine restaurant Hawthorne Lane.

If you plan an activity in the hospitality suite during AGLP/APA week, please contact me at dkarasic@aglp.org immediately, so that your event can go in the AGLP guide.

Also, UCSF resident Charles Lee is working on housing for medical students. Medical students may contact him at charlesin-charge72@yahoo.com.

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Photo courtesy of the San Francisco Visitors and Convention Bureau

San Francisco restaurants requiring advance reservations

There are some restaurants in the San Francisco Bay Area that require reservations several weeks in advance, particularly for weekend evenings. For those AGLP members who like to plan in advance, I am providing a very brief list of these restaurants in this newsletter, because it may be too late to make reservations by the time of the next newsletter, which includes the AGLP guide to the convention.

French Laundry

(707) 944-2380 This is one of the most difficult restaurants to obtain a reservation. It is about a 90 minute drive north of San Francisco in Napa Valley. It starts accepting reservations exactly 2 months before the date starting at 10a. You will need a phone that can automatically redial and lots of patience to get through. <http://www.sterba.net/yountville/frenchlaundry>

Chez Panisse

1517 Shattuck Ave. (510) 548 5525 (Café # is (510) 548 5049) (California Cuisine) This restaurant is in Berkeley, you can take the BART (the subway about 30 minutes), and it is a 15 minute walk from the Berkeley station. This restaurant has two parts. Downstairs is the main restaurant that only has a prix fixe menu and two sitting times Monday through Saturday. Chez Panisse Café is upstairs and cheaper. It has a more extensive menu and does not have strict sitting times. They both accept reservations one month in advance starting at 9:00a. (The Café used to have only a same day reservation policy, but this has changed). <http://www.chezpanisse.com>

Gary Danko

800 Point St. (Hyde) near Fisherman's wharf (415)749 2060. www.garydanko.com Starts accepting reservations two months in advance.

Aqua

252 California St (Battery and Front) Downtown (Seafood) (415)956 9662 <http://www.aquarestaurant.com/aquamain.htm>

Farallon

450 Post St (Mason and Powell) (Seafood) Downtown (415) 956-6969 <http://www.farallonrestaurant.com/>

Fifth Floor

12 Fourth St. (Market St) (Near convention center) (415) 348 1555 <http://fifthfloor.citysearch.com/1.html>

Jardiniere

300 Grove St. (Franklin St.) (415) 861 5555 <http://www.jardiniere.com/>

Boulevard

1 Mission St. (Steuart St.) 415 543 6084 <http://www.boulevardrestaurant.com>

Postrio

545 Post St. (Mason and Taylor) (415) 776-7825 <http://www.postrio.com> reservations start one month in advance

Green's Restaurant, Fort Mason (Vegetarian)

(415) 771 6222 <http://greensrest.citysearch.com/1.html> reservations start one month in advance

Slanted Door

100 Brannan St (Restaurant temporarily moved) (Vietnamese) (415) 861 8032

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The Man Who Fell in Love with the Moon

Continued from page 8

‡(another) positive homosexual symbol out there. Parker states: "Since the Berdache could mix characteristics of both genders, they were viewed as having a special status as if blessed by the gods. They were thought to be the middle gender, and seen as prophets and visionaries having an almost mystic and psychic vision into the future. They were often consulted by tribal elders and chieftains because they were thought to have a kind of 'universal knowledge' and special connection to the 'great spirit.'" Spanbauer, on one hand, reminds us about this dignified symbol of homosexuality within the longstanding cultures of the Native American tribes. He also points to some of the very basic realities of being human, and certainly makes this novel an entertaining read.

Tom Spanbauer has published short stories, reviews, and three novels: *In the City of Shy Hunters*, *Faraway Places*, and *The Man Who Fell in Love with the Moon*, which was nominated for the Pulitzer Prize, a PEN/Faulkner Award, and the National and American Book Awards. His new novel, *In the City of Shy Hunters*, has received wide and enthusiastic recognition.

For further info on berdache <http://hotcakencyclopedia.com/ho.BerdacheOriginMyth.html>

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Caucus of Lesbian, Gay, and Bisexual Psychiatrists

Margie Sved, MD

Assembly Representative

Those of you who are members of the APA Caucus of Lesbian, Gay, and Bisexual Psychiatrists have recently elected Mark Townsend and I to another term as your Assembly Deputy Representative and Representative. Thank you for your confidence in our abilities to represent this group in that aspect of APA governance.

By now, you should have returned your ballots for the APA elections, and the unofficial results may even be available. Dr. Appelbaum, current President of our APA has written several excellent columns recently in Psych News about why it is important to stay a member of APA and why it is important to vote. I know it becomes increasingly difficult for some of you to continue paying APA dues. It can be easy at times to see only the negatives. But, our APA does continue to advocate for our patients and for our members in many ways that are not always obvious. Anytime you need a reminder about what the APA does for you, or why APA needs you to stay as a member, please feel free to contact me (drsved@aol.com). Or read Dr. Appelbaum's columns. If you discarded your Psych News, you can often still read the columns at www.psych.org.

There have been excellent summaries of the activities of the Assembly meeting from November 2002 in Psych News. As usual, many action papers were discussed, and the majority passed. Issues related to care of patients and recruitment and retention of APA members are always on the forefront. However, one of most significant to AGLP was the easy passage by the Assembly (followed by approval from the Board of Trustees) of the Position Statement on Adoption and Co-Parenting of Children by Same Sex Parents. This passed the Assembly very easily, with essentially no discussion and no expressed negative comments. What a change from previous years' Position Statements! This is due to the work many of you have done for years with the Assembly, the Committee on Gay/Lesbian/Bisexual Issues, the Council on National Affairs (and its various times with different names), the Joint Reference Committee, the Board of Trustees, and many District Branches. Thanks to everyone who had a part in this, which originated in the Committee on Gay, Lesbian, and Bisexual Issues.

However, one of most significant to AGLP was the easy passage by the Assembly (followed by approval from the Board of Trustees) of the Position Statement on Adoption and Co-Parenting of Children by Same Sex Parents.

Now is the time to be creating the Action Papers which will be discussed in the May Assembly meeting. Any APA member can initiate an Action Paper, and bring it to your District Branch or to Mark or I.

Several significant pieces of APA news follow. The APA office has moved from 1400 K St across to Arlington, and most staff settled in quickly. The new main phone number is 703-907-7300, and 888-35 PSYCH continues toll free. Linda Roll, from the Office of Minority and National Affairs, is retiring, and will be working part time for a transition period. She has been with the APA through the development of the minority and underrepresented caucuses, and a lot of institutional memory will leave with her. Jay Scully, MD, has started working as Medical Director. Those who have been elected as Fellows of the APA in the past are all being "promoted" to Distinguished Fellows of the APA this year, since the new Fellowship Program is now in effect. Congratulations to all this includes! See you in May in San Francisco!

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An Update from the Executive Director

Roy Harker

A thorough audit of our financial accounting has been underway for some time now. A final report for Fiscal Year 2000 has been completed and work for Fiscal Year 2001 is now underway. The time spent has proven invaluable. Besides bringing the entire accounting system of our organization into compliance with Pennsylvania non-profit regulations, the exercise has resulted in a substantial streamlining of the process. The audits are being conducted by Joseph Maccarone & Company, under the direction of Harold Childs, CPA.

Our website has a new "automated" referral system which provides much more up-to-date information on our membership. We currently have 226 referrals available via this site. If you would like to have your name added to the referral listings, please be in touch with me at the National Office.

The membership campaign for 2003 has been exception in many regards – most notably the "upgrading" of memberships by a large number of our members. Frank Rundle's campaign to enlist new Founding Members has been extremely successful as well. Many thanks to you, Frank! Student membership is up dramatically. The enticement of our Travel Fund and the prospect of San Francisco has made this category very popular. Our membership numbers to date are:

as of December 31, 2002	as of December 31, 2001
Founding: 4	Founding: 1
Patron: 9	Patron: 5
Sponsoring: 46	Sponsoring: 33
Full: 276	Full: 318
Associate: 22	Associate: 28
Resident: 50	Resident: 45
Early Career: 35	Early Career: 29
Newsletter: 61	Newsletter: 69
Medical Student 31	Medical Student: 19
International 27	International: 34
Total 561	581

Looking to the future

I hope that you have made your reservations for the San Francisco Annual Meeting. Popular demand for this area of the country is filling our hotel quickly. The conference will be held at the brand new San Francisco Downtown

Courtyard Marriott, at 2nd and Folsom Streets (299 Second Street), just 3 blocks from the APA meeting at the Moscone Center. Rooms are \$199/night single or double occupancy (and \$20 for additional guests), and can be reserved by calling 800-321-2211 and asking for the AGLP block (group code AGLP). The meeting dates are May 17-23.

Preparations for future AGLP Annual Meetings are already underway. Following the meeting in San Francisco, AGLP will visit **New York in 2004**. Ubaldo Leli, M.D., is local arrangements chair for this event. We have booked the Park Central Hotel, located at Seventh Avenue and 56th Street in New York. The Park Central is directly across the street from Carnegie Hall, two blocks South of Central Park, a short walk from Rockefeller Center, all the best Museums, Broadway and all of Fifth Avenue and Madison Avenue's finest stores. The hotel recently finished a \$74 million renovation. The AGLP special group rate is \$198/night. The block runs from April 30 to May 7, 2004.



The Park Central, New York, site of the AGLP 2004 Annual Meeting

LAGCAPA

The Lesbian and Gay Child and Adolescent Psychiatric Association

By Stewart L. Adelson, M.D.

Who We Are

The Lesbian and Gay Child and Adolescent Psychiatric Association (LAGCAPA) is an organization dedicated to the mental health needs of youth related to sexual minority issues. LAGCAPA is an affiliate of the American Academy of Child and Adolescent Psychiatry (AACAP), with which it works closely on a number of scientific, educational, and advocacy activities.

The mission of LAGCAPA is:

- To promote changes within the practice of psychiatry and society at large which maximize the health and development of lesbian and gay youth and their families, and families with gay or lesbian parents.
- To promote the delivery of medical and psychosocial services to all children and adolescents without regard to sexual orientation or gender.
- To eliminate within the psychiatric profession and society at large, exploitation and discrimination based on sexual orientation and gender.
- To foster education about the needs of lesbian and gay youth to physicians of all specialties, mental health professionals, and the scientific community.
- To encourage scholarly research of biopsychosocial issues relevant to understanding and serving lesbian and gay persons, particularly youth and their families, and families with gay or lesbian parents.
- To increase the recognition of the roles and contributions of lesbian and gay psychiatrists and other lesbian and gay professionals who serve the needs of youth.
- To support and encourage attendance of medical students and trainees at scholarly and professional meetings, including the meetings of this corporation.

Our History

The existence of irrational anti-homosexual bias in psychiatric and other medical organizations has traditionally had a chilling effect on the ability of medical professionals to freely and objectively discuss the mental-health needs of youth affected by sexual minority issues. In the early 1990's, in an act of courage and integrity, a small group of child and adolescent psychiatrists interested in the problems and needs of such youth came together to form LAGCAPA. Since that time, the organization has grown to a nationwide membership. Because of LAGCAPA's existence, it has become easier for child and adolescent psychiatrists to discuss LGBT child and adolescent mental health issues freely. As a direct result of LAGCAPA's advocacy, the American Academy of Child and Adolescent Psychiatry (AACAP) formed a Homosexual Issues Committee which functions as an integral part of the Academy to address these issues within child and adolescent psychiatry. LAGCAPA members continue to work closely with this committee.

The progress made in overcoming anti-homosexual bias within the profession has been remarkable, in large part due to the efforts of LAGCAPA's founding members. While it has become easy in a short period of time to take this progress for granted, it is crucial that the field not become complacent. With the place they have won at the table in the discussion of child and adolescent mental-health issues, LAGCAPA members have much ongoing work to do to use their scientific knowledge base, placed in the context of important clinical insights, to continue to serve the needs of youth.

Our Present

LAGCAPA plays an integral role in planning the scientific program for AACAP's annual meeting. Issues that LAGCAPA members have presented to psychiatric colleagues include topics such as gay teen suicide, gays and lesbians as parents, and parenting gender-nonconforming children. Future topics to be presented include homophobia, bullying and the psychology of prejudice.

The Whole Enchilada

Andy Tompkins

It's that time of year again when residency programs invite applicants to interview. I have yet to pull out my conservative black suit, to put on conservative black loafers, and to begin to part my hair on the left again. That time will have to wait another year. Most people have tried to portray him or herself as someone else, someone hipper or, as in my case, not so hip. I remember my friend in college who concealed her shaved head with a wig while on the medical school interview tract. She thought (and perhaps correctly) that this fashion choice on a tall Asian woman gave one to many connotations. Her first choice school accepted her. Was this the overall goal? OR, should she have striven more for maintaining her sense of honesty in her practical pursuits?

This is no longer just medical school at which we former pre-med piranhas are nipping. Now, it is the big time, the whole enchilada, the rest of our lives. For GLBT applicants, the issue of "coming out" on the interview remains an especially daunting one. To try and provide some answers (and to raise a few questions in the minds of each reader), I have excerpted a formidable document put together by Yee-Ming Chan, Jen Pula, Art Jongco, and myself. This document, as well as other resources, can be found at www.amsa.org/adv/lgbtpm. This work is the result of two independent discussions on the issue held in San Francisco, CA and New York, NY. I offer it to the AGLP membership as a tool for each future practitioner to come to a more informed decision.

Listing potentially LGBT-related activities, e.g. the AIDS Ride, as a substitute for coming out is probably too subtle and vague of an approach.

"In deciding whether to come out on applications, you must first decide what your priorities are. If your foremost goal is to be ranked highly by a program and you are concerned that being out may negatively impact your ranking, then being out may be too much of a risk for you. If, however, you have no interest in entering a program that won't accept you as an LGBT person, then being out is an easy way to screen out inhospitable programs. Being out in the residency application process allows you to project your pride and comfort with being LGBT. The more comfortable you are with yourself, the more confident you will appear as an applicant. Conversely, if you are not comfortable with your identity or orientation, your discomfort will come through as well. The residency application process is not the time to come out for the first time.

Being out also frees you to collect information openly about whether a program is hospitable for LGBT people. Fortunately, there are many resources available to obtain information about how LGBT people fare in a particular residency program, but it can still be awkward to gather information while trying not to reveal your LGBT identity. Also, being out makes it less awkward to ask questions about issues that may impact your significant other."

To be sure, residency programs want more than simple diversity. Residency is a job as well as a training program. "Residency programs look at several features in evaluating you as an applicant: academic ability, professionalism, uniqueness, commitment to the specialty, and how likely you are to rank the program highly." Each one of these qualities will play into the decision on whether to accept an applicant.

The first step in applying for residency is completing the common application form. Since this form is distributed to all programs you apply to, coming out on the common application is an all-or-none decision. This can be awkward if you have LGBT-related activities you would like to highlight but are unsure whether you should be out to

Welcoming residents to SF for the AGLP conference!

Kristin Riley-Lazo,
AGLP Resident Representative

Come meet other LGBT residents and have fun playing in the city with us. It's worth taking some time off from work to participate in the Saturday conference and AGLP social events. We're organizing a Sunday brunch for residents, medical students and early career psychiatrists. We'll be sending out more information to the AGLP email list soon. For residents with questions about your San Francisco trip, please contact Charles Lee (PGY 4) at charlesincharge72@yahoo.com or Kristin Riley-Lazo (PGY 3) at (415) 476-7271. We're looking forward to seeing you here!

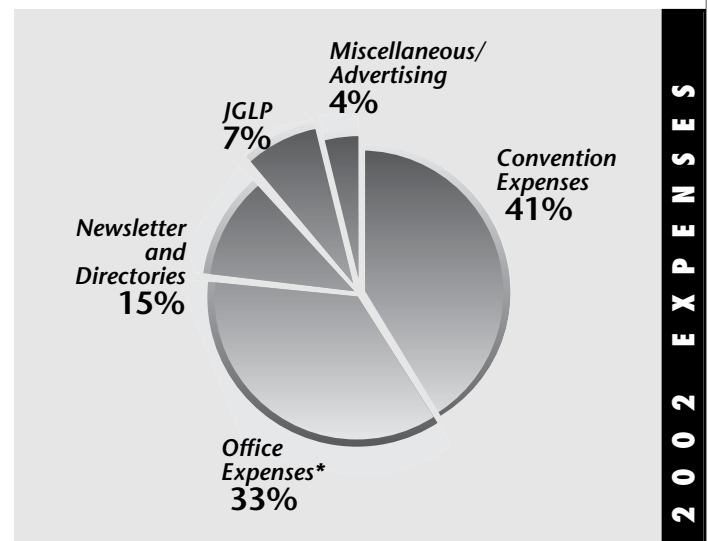
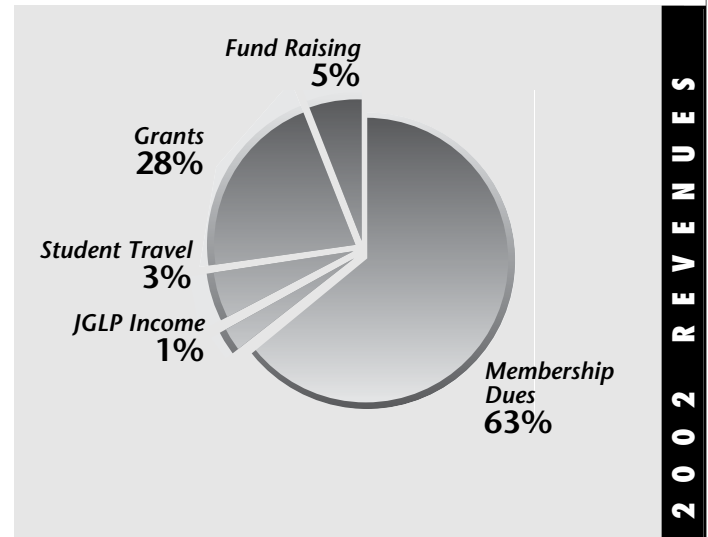
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Photo courtesy of the San Francisco Visitors and Convention Bureau

Association of Gay and Lesbian Psychiatrists 2002 Preliminary Financial Statement

Robert Mitchell, M.D., Treasurer



LEDGER SUMMARY

	2001	2002
Total Receipts	\$ 105,295.85	\$ 100,745.00
Total Disbursements	\$ 101,261.51	\$ 100,317.06
Receipts/Disbursements	\$ 4,034.34	\$ 427.94
TOTAL ASSETS		
Beginning of Year	End of Year	
\$51,060.33	\$52,704.12	

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

Book Review

The Man Who Fell in Love with the Moon

By Tom Spanbauer

Reviewed by Todd M. Kline M.D.

When Richard Dieterle retells The Berdache Myth (web-based version) he describes a Native American boy becoming a “man-woman” during his fasting vision quest. He is blessed at this time by Moon and given the power of both the feminine and masculine and to foresee the future. Wendy Parker, in her article, The Berdache Spirit, writes “These men were regarded as holy men, high religious priests and shamans. They were often healers, surgeons, counselors and therapists; regarded respectfully as ‘winktes’ in the Lakota Sioux, ‘Nadle’ in Navaho tribes, ‘Shamans’ in the Mojave and ‘Mahu’ in the Polynesian culture of Tahiti.”

Gay novelist Tom Spanbauer, in *The Man Who Fell in Love with the Moon*, succeeds in achieving what can be called a “new bisexual voice” from the old west, utilizing the legend of the Berdache. This is a novel about a Native-American bisexual boy named Shed who is raised by his mother, Ida, in a turn-of-the-century western brothel. In a tragic upbringing, Shed is prostituted by his mother and raped by his father, finding his only solace in a game called “killdeer,” during which he learns to look at himself and his unique life objectively, and in the context of those around him. Shed also grows, with the reader, in language, understanding of his bisexuality and psychological depth as he struggles to find a place for himself culturally and sexually in the lineage of his people. On a journey through an unforgiving landscape, Shed discovers that he is Berdache.

I love the psychological dimensions of Shed, who begins as a character of very primitive defenses, even regarding his role as narrator: “If you’re the devil, then it’s not me telling this story.” His sexuality is also discovered in a primitive fashion. “If the boy reaches for the gourd and basket, or if the girl reaches for the bow and feather, then you got a boy or you got a girl whose human-being sex story you got to shut up about.” Shed also experiences a dyadic, enmeshed and sexual relationship with Ida, and progresses to Oedipal dimensions later in the book, when he ends up killing a man named Billy, but I won’t elaborate. Shed later states “I didn’t figure I’d ever fall in love with anybody, let alone a white man, let alone my father, let alone forever.”

Gay novelist Tom Spanbauer, in *The Man Who Fell in Love with the Moon*, succeeds in achieving what can be called a “new bisexual voice” from the old west, utilizing the legend of the Berdache.

Oh, did I mention there is a lot of sex in this book? Spanbauer laces into the novel at least 30 references or depictions of sexual acts straight and gay, incestuous, loving and violent alike. At times, Spanbauer seems to struggle with presenting the legend of the Berdache as a noble symbol, but then debasing it with a focus on sex. Dellwood Barker, Shed’s lover states: “B..E..R..D..A..C..H..E means holy man who fucks with men.” At times while reading the novel, I wondered whether the graphic sexual depictions were done in order to make the book more publishable. On the other hand, this dichotomy between what is holy and what is sexual permeates the book as a central struggle, and does seem to point out a universal human struggle: How does one feel at the same time both a dignified and lustful creature?

In all, I enjoyed this book greatly. The psychological dimensions of the characters are notable. I hadn’t known anything about the Berdache legend before reading the book, and was delighted to know that there is (a)-

International Issues Committee

Gene Nakajima, M.D.

In August, a contingent of about 15 AGLP members attended the World Psychiatric Congress in Yokohama. Prior to attending the meeting, many of us met with members of the Association of Gay Professionals in Counseling and Related Medical fields in Tokyo. Ichiro Itoda, MD an infectious disease specialist whom we meet with wants to start a gay medical clinic in Tokyo. Kenn Ashley, MD, Ubaldo Leli, MD and I presented a preview of our presentations to members of the group, and Itoda, wrote an article about our meeting for a local gay newspaper. In Yokohama, members of AGLP presented two symposia and a workshop, which were well attended. During the meeting, we went as a group to Sankei-en Garden, as well as to Kamakura and Hakone.

In the previous World Congress (Hamburg) in 1999, I had written a resolution on endorsing the ICD-10 position that homosexuality was not a mental illness which the APA officially submitted to the World Psychiatric Association House of Delegates. Because of opposition lead by the British delegate, the resolution was tabled, and it was decided that the WPA executive committee would consider the proposal and bring it up at the next World Congress. After changing the resolution, they resubmitted it at the House of Delegates in Yokohama. The resolution that passed now reads:

"Whereas in 1992, on the basis of a large body of scientific research, the World Health Organization deleted homosexuality as a disorder in the International Statistical Classification of diseases and Related Health Problems (ICD-10) stating 'Sexual orientation by itself is not to be regarded as a disorder', The World Psychiatric Association calls on its member societies and individual members to amend medical and psychiatric textbooks according to the above statement taking cultural context into consideration. And further, the World Psychiatric Association calls on these organizations and individuals to do all that is possible to oppose any mental health evaluation or treatment, which is based upon the assumption that homosexuality per se is a mental disorder."

The only major change was the addition of the statement "according to the above statement taking cultural context into consideration." This significantly weakens the resolution and shows how much work still needs to be done internationally.

After the meeting, a smaller group visited Osaka and Kyoto. In Osaka, we met and ate dinner with the Osaka branch of the Association of Gay Professionals, which included three psychiatrists. Many thanks to Toshiaki Hirata, MD who organized this dinner.

The next World Psychiatric Congress will be in Cairo in September, 2005.

A few of us have submitted a symposium proposal to a smaller WPA International Thematic Conference (Diagnosis in Psychiatry, Integrating the Sciences) from 6/18-21/03 in Vienna. We may be able to add one or two speakers if the symposium is accepted. For more information see www.wpa2003vienna.at In Caracas, the WPA will hold a regional confer-

ence 10/2-4/2003. For information see www.wpa2003.org. Submission deadline is March 2003. Please contact Milton Wainberg, MD at (212) 265-1817 or mlw35@columbia.edu if you are interested. The WPA will also co-sponsor the World Congress of Psychosomatic Medicine which will take place in Waikoloa, Hawaii 8./23-28/2003. For information see www.hawaii residency.org/icpm2003 Submission deadline is 3/2003. The WPA will also hold an international congress in Florence, Italy from 11/10-13/2004. If you have any questions about these meetings, please feel free to contact me at (415) 292 1554 or Gnakajima@alumni.stanford.org.

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