

NYCCAP News

A publication of the New York Council on Child and Adolescent Psychiatry



Summer 2018

NYCCAP News

A publication of the New York Council on Child and Adolescent Psychiatry

New York Council on Child and Adolescent Psychiatry

2017-2018 NYCCAP Board

Officers

President, Angel Caraballo, MD
President-Elect, Vera Feuer, MD
Treasurer, Melvin Oatis, MD
Secretary, Khadijah Watkins, MD
Immediate Past President, Scott Palyo, MD

Board Members

Beth Belkin, MD
Robert Dugger, MD
Tzvi Furer, MD
Cathryn Galanter, MD
Molly Gangopadhyay, MD
Iliyan Ivanov, MD
Olga Leibu, MD
Annie Li, MD
Akeem Marsh, MD
Owen Muir, MD
Yiu Kee Warren Ng, MD
Jennifer O'Keeffe, MD
Victoria Pham, MD
Richard Pleak, M.D.
Shervin Shadianloo, MD
Scott Shaffer, MD
Gabrielle Shapiro, MD
Jessica Simberlund, MD
Oliver Stroeh, MD
Jose Vito, M.D.
Bryon Young, MD
Carolina Zerrate, MD

New York Council on Child and Adolescent Psychiatry

141 Mulberry Street, Apt D1

New York, NY 10013

info@nyccap.org

www.nyccap.org

NYCCAP News Publication

Editor-in-Chief

Jose Vito, MD

Editorial Board

Akeem Marsh, MD
Shervin Shadianloo, MD

Managing Editor

Earl Magee

Inside this issue:

President's Column.....	3
<i>Angel Caraballo, MD</i>	
Advocacy Report.....	5
<i>Molly Gangopadhyay, MD</i>	
AACAP's LegCon 2018: An Inside Perspective.....	6
<i>Colleen Turek, MD</i>	
AACAP's LegCon 2018: A Fresh Perspective.....	7
<i>Veena Muthusamy, MD</i>	
Autism Awareness.....	8
<i>Annie Li, MD and Olga Leibu, MD</i>	
Transgender and Gender Non-Conforming Youth	9
<i>Shervin Shadianloo, MD</i>	
Private Practice Night	9
<i>Colleen Turek, MD</i>	
Theatre Night: Mean Girls	10
<i>Jennifer O'Keeffe, MD</i>	
Welcome Night 2018	10
<i>Robert Dugger, MD</i>	
NYCPS & NYCCAP ECP Social Mixer	11
<i>Jennifer O'Keeffe, MD</i>	
Responding to Disaster and Trauma:	
NYCCAP's New Committee	11
<i>M. Carolina Zerrate MD, MHS</i>	
An invitation to AACAP's Asian Caucus	12
<i>Annie S. Li, MD</i>	
Let's Keep Families Together!	13
<i>Akeem Marsh, MD</i>	
APA Awarded SAMHSA Funding	14
<i>Cathryn Galanter, MD</i>	
Puerto Rico's Resiliency	15
<i>M Carolina Zerrate, MD, MHS & Alexandra Canetti, MD</i>	
A Council Trip to Present in Prague	16
<i>Scott Palyo, MD; Iliyan Ivanov, MD; Melvin Oatis, MD; and Kristin Long, LCAT, LP</i>	
Photo Gallery	18
Are you coming? MARK YOUR CALENDAR!	21

If you would like to submit an article for publication in our next newsletter, please contact us info@nyccap.org.

Classified ads are FREE for NYCCAP members. For non-members or advertisers, please contact us at info@nyccap.org for rates and guidelines.

Dear NYCCAP Family:

Un millón de gracias!!! I've had a wonderful two years serving as NYCCAP's President! We've had so many successful events, new Board members, farewell to seasoned Board members and responses to critical issues. Our membership has held steady at approximately 900 (+/- 50) making NYCCAP the largest child and adolescent psychiatry organization in the U.S. During my presidency, we have collaborated with most of the medical schools in the area and sponsored events. Many NYCCAP members have responded to call for actions and are working on issues impacting children and their families such as the separation of children from their families at the border.



My first year as president began in July 2016 by welcoming new trainees into the child and adolescent family. Then, in September, child and adolescent psychiatrists, pediatricians, and psychiatric nurse practitioners came together to discuss collaborative care at [*Bridging the Workforce Shortage: Psychiatric Nurse Practitioners in Clinical Practice*](#).

During the fall of 2016, we also had the privilege to be the hosting regional organization of AACAP's 63rd Annual meeting. This was an extraordinary experience with great involvement of many members of NYCCAP. The annual meeting was a great success!

NYCCAP awarded the 2016 Wilfred C. Hulse Award to Victor Fornari, MD that included a lecture in December 2016 entitled, [*Increasing Access to Children's Mental Health Care*](#). NYCCAP's [*Career Night 2017*](#) in January focused on work life after residency and fellowship. Attendees held lively discussions with seasoned child psychiatrists from the New York area. NYCCAP continued its collaborative advocacy work with our annual Legislative Breakfast co-sponsored by NYCCAP, NYCPS, and NYCPS. In February 2017, NYCCAP, NYSAP, and the Academy Section on Psychiatry co-sponsored The Ed Hornick Memorial Lecture featuring Helen Egger, MD entitled, [*Seeing the Lion: Global Developmental Epidemiology in a Digital Age*](#).

[*Immigration and Human Rights—What Mental Health Providers Need to Know About Working with Immigrant Children and their Families—Experiences from 4 NYC Perspectives*](#) featured an extraordinary group of multidisciplinary professionals—Lorilei A. Williams; Alexander D. Kalogerakis, MD; Cristina Muniz de la Pena, PhD; Brett Stark, ESQ; Alan Shapiro, MD; and Lauren Pessa, LMSW, MPA—who dedicated their lives to humanitarian work with immigrant children (refugees, asylum seekers, undocumented minors, documented minors, etc.) and their families. They shared their experiences and perspectives; imparted wisdom on what we need to know when working with children and their families; educated us about the importance of collaborative care between mental health, advocacy, legal representation, and pediatrics to meet the needs of these populations; and discussed the implications of the new executive order on immigration on vulnerable populations.

In April 2017, members enjoyed [*Dear Evan Hansen*](#) that included a talkback session with the cast. NYCCAP collaborated with NYCPS to hold an [*ECP Social and Networking Mixer*](#) in June 2017. What a great opportunity for members of both organizations to meet their colleagues in the field. And, of course, NYCCAP's [*End of the Year*](#) event on June 12 featured the presentation of the 2018 Wilfred C. Hulse Award winner to Gabrielle Shapiro, MD and speeches by NYCCAP members that were nominated for AACAP elections of 2017 including the current AACAP President-Elect Gabrielle Carlson, MD.

In July, my second year of presidency commenced once again with [*Welcome Night 2017*](#) in which NYCCAP members welcomed new trainees to the child and adolescent psychiatry community. Also, during the summer of 2017, we sponsored a fundraising event during NY Summer Streets for the AACAP initiative **Break the Cycle**. Later that year, NYCCAP hosted [*Prepping for Presentations and Publications: How to Tell Your Story in Child Psychiatry*](#)

that featured presentations by Angel Caraballo, MD; Molly Gangopadhyay, MD; Jessica Simberlund, MD; and Oliver Stroeh, MD. Dr. Shapiro, the 2017 Hulse awardee, held her lecture entitled, [Child and Adolescent Psychiatrist as Physician Advocate: Empowerment through Collaboration](#), at Lenox Hill Hospital. The event included guest speakers: Steve Auerbach, MD; Farzon Nahvi, MD; and Scott Palyo, MD.

Attendees of NYCCAP's [Career Night 2018](#) had the opportunity to meet a diverse panel of child and adolescent psychiatrists who spoke about their career paths and interests such as academia, private practice, telepsychiatry, advocacy, school-based psychiatry, and work-home integration.

Throughout the year, we continued our series of Medical Student Nights with events at NY Medical College (Westchester County), at NYU, Columbia, CUNY medical school, Weill Cornell, SUNY Downstate, Long Island medical schools and Albert Einstein School of Medicine. NYCCAP has truly recognized the importance of educating medical students about the world of child and adolescent psychiatry in an effort to decrease the workforce shortage. The turnout has been amazing and we hope to see many more medical students go into the field of child and adolescent psychiatry.

NYCCAP hosted [Advocating and Clinically Caring for Transgender and Gender Non-Conforming Youth](#) in April in which Leonid Poretsky, MD; Richard Pleak, MD; Yeouching Hsu, MD; and Shervin Shadianloo, MD presented the latest clinical approaches to caring for transgender and gender non-conforming youth and how to advocate for them beyond basics of clinical care. Panelists talked about children and adolescents and the developmental differences in regards to their presentations as well as local and federal laws impacting their care.

We rounded out spring with members gathering at the August Wilson Theatre in May to see [Mean Girls](#).

In June, NYCCAP and NYCPS held its second annual [ECP Social Networking Mixer](#). We rounded out the year with our annual [End of the Year](#) event that featured AACAP President Karen Dineen Wagner, MD, PhD and the 2018 Wilfred C. Hulse Award presented to Scott Palyo, MD. This event was held for the first time in Uptown Manhattan with great attendance and lots of fun. A delegation from NYCCAP presented at the [23rd World Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions](#) (IACAPAP) from July 23–27 in Prague, Czech Republic.

It has been a great honor for me to serve as your president during these past couple of years. I hope that we will continue to grow as a council and do wonderful things for the continued growth and advancement of our field of child and adolescent psychiatry. I want to thank all board members for their support, time, and hard work. I will always be impressed by your dedication to the children of NY and the rest of the nation. To all NYCCAP members, thank you for your support by attending our events throughout the year, for reading our newsletter, for your emails or encouragement, for visiting our website and social media outlets, and for allowing us to continue to serve you.

Finally, I am very excited to welcome our new president, Vera Feuer, MD, and wish her a successful and rewarding term as president. I look forward to my continued involvement in NYCCAP under the leadership of Dr. Feuer. Vera, I know that you will do an amazing job!

With my most sincere gratitude,

Angel Caraballo, MD
NYCCAP President

Advocacy Report

By Molly Gangopadhyay, MD



Spring madness in DC welcomed the visits from child and adolescent psychiatrists nationally to advocate for children's mental health in April for AACAP's annual Legislative Conference. With over 200 attendees and 40 family and youth advocates, we had a rich discussion and training at The Mayflower Hotel before braving the cloudy day and tense atmosphere on the Hill. NYCCAP sponsored two CAP fellows—Veena Muthusamy and Colleen Turek—to attend the conference; they were articulate and fierce advocates along with our youth advocate, Leonor. We engaged in productive conversations with the staffers for Senators Gillibrand and Schumer as well as those for Representatives Maloney and Espaillat to educate on the current state of mental health morbidity and lack of access nationally. We encouraged their support of bills in the House and Senate that would expand loan forgiveness by the

National Health Service Corps to our pediatric specialty and expressed how this expansion would help address some of the factors contributing to the workforce shortage of child and adolescent psychiatrists nationally. Additionally, in the context of school violence and addressing mental health stigma, we talked about the Mental Health in Schools Act based on a program created in California. This bipartisan bill would provide \$200 million in grant funding to support staff training, mental health evaluations, and trauma focused treatment for children in schools.

In addition to these national needs, the conference highlighted that advocacy efforts start locally and being involved at the city and state levels is just as important. By creating and sustaining relationships between child psychiatrists and local legislators at the grassroots level, we can start the impact nationally as well. One way to keep track of the numerous bills would be enrolling in VoterVoice or by visiting the Physician Advocacy page of the Medical Society of the State of New York (MSSNY).

At the state level in NY, the following bills are needing support:

Public Health: Raise the Age of Tobacco Purchase to 21 Years of Age

Encourage your Assembly member and Senator to support a legislative proposal that will greatly impact the public health of New York State's children. S.3978/A.273 would increase the purchasing age for tobacco products from eighteen to 21 years of age.

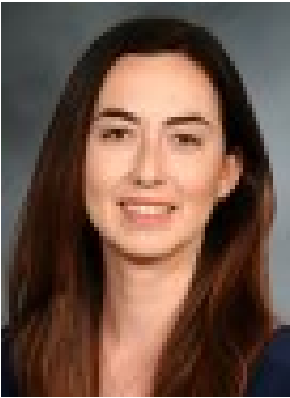


MH Parity: Requirement for Comparison of MH/SUD Care and Treatment to Medical Treatment

Support the passage of legislation (S.1156-C/A.3694-C) that directs the Superintendent of the Department of Financial Services to collect certain key data points and elements from insurers and health plans in order to scrutinize and analyze if they are in compliance with the federal (The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008) and state (Chapter 748 of the laws of 2006 – “Timothy’s Law”) mental health and substance use (MH/SUD) disorder parity laws.

AACAP's Legislative Conference 2018: An Inside Perspective

By Colleen Turek, MD



After years of interest in child advocacy, I was excited to attend the AACAP Legislative Conference for the first time this year. On April 8th, I traveled to Washington, DC where I was educated on how to lobby for issues and the bills that AACAP was advocating for this year. The first issue identified was to address the shortage of child and adolescent psychiatrists by including CAPs in the NHSC loan repayment, and another was a bill to provide grant funding for embedded mental health programs in schools. Then, on April 9, we split up by regions and attended multiple meetings on Capitol Hill with our respective Senators and House Representatives.

As I was with the New York group, and were fortunate to have a large cohort, we split up to attend the first two sessions. The first session I attended was the meeting with a member of Senator Gillebrand's staff, Francesca Longo. Prior to arriving at the site, we had been forewarned that we might meet in hallways or only have a few minutes squeezed between other meetings. Because of this, it was not a surprise when Ms. Longo asked to meet us out in the hall and we found a secluded corner in which to speak. Our group devised a game plan for topics to talk about and divided up who would speak about each of the two topics. As I was one of the few trainees in the group, it was decided I would speak about extending the loan repayment program to cover child psychiatrists after the shortage statistics for NY were discussed.

We began with introductions and discussing backgrounds where we found out Ms. Longo had an interest in developmental psychology, which I found to be a promising sign our messages would be well received. Next, we transitioned to discussing the shortage where a majority of New York, with the exception of two counties, had high, severe shortages, or even in some areas no CAPs at all. Subsequently we discussed how to recruit more trainees to the field and it was my turn. I spoke to the length of time invested in medical training that contributes to the decade of delayed earnings potential, the high amount of student loan debt, and need for loan repayment programs such as the NHSC to offset the financial burden of further training and delayed earnings. Specifically, I spoke about my own student loan debt and what I had to delay due to training. The current bill states that the length of child psychiatry training would preclude child psychiatrists from qualifying for the loan repayment as this additional training does not count towards the program eligibility, and the two years of training puts CAPs outside the time criteria. We then concluded the topic by discussing the bills currently in the senate and advocated for co-sponsorship of bill S989 to include pediatric subspecialists in the NHSC loan program through technical corrections.



The final topic our group discussed was programs such as the Mental Health in Schools Act bill in the House of Representatives and the request for similar programs through the Senate. As we wrapped up, Ms. Longo agreed that the technical correction to S989 was an easier fix than funding a new Senate Mental Health in Schools bill as we were told the Senate was busy with budget appropriations already so such a big funding project would likely have to wait until after the current budget was handled. Overall, I felt our visit was well received by the Senator's office as the messages resonated with Ms. Longo's values. Going forward, I am hopeful our message will continue to impact their policies to benefit children's mental health.

AACAP's Legislative Conference 2018: A Fresh Perspective

By Veena Muthusamy, MD



This spring I was fortunate enough to receive an award from AACAP and my regional ROCAP (NYCCAP) to attend the AACAP Legislative Conference in Washington DC. I was interested in attending this particular conference as I wanted to learn about advocacy for child and adolescent mental health needs on a federal level. Given today's acrimonious political climate and the increase in school violence over the last few years, there appears to be great discord in the community about how to tackle school violence and psychiatry's role. Often after each and every tragedy, a blame game occurs and psychiatry, often child psychiatry, is blamed for not doing enough to prevent horrific acts of violence. I believe this is due to a lack of understanding/knowledge in the community and in our government about treatable childhood mental disorders, the role of psychiatry, and inadequacies on a systems level. I felt that

attending the Legislative Conference would allow me to learn how to engage with state legislators to begin to educate them about childhood mental disorders, the need to improve access to mental health care on a systems level, and the importance of better gun control legislation.

I arrived in Washington, DC excited to talk to my state legislators. Since the conference was 2 days, the first day was spent training us through didactics about two bills currently on the floor of the House of Representatives and Senate. The first bill addressed the children's mental health workforce shortage and would provide loan relief through the National Health Service Corp (NHSC) to primary care physicians as well pediatric subspecialties including child and adolescent psychiatrists (CAP). However, in the final revision of the bill, the provision to cover CAP's had been dropped so we would be asking our legislators to co-sponsor and advance the bill by including pediatric subspecialties. The second bill, the Mental Health in Schools Act, provided \$200 million in grant funding through SAMHSA to bring on-site behavioral and mental health services to schools, and we would be asking our legislators to co-sponsor and help advance this legislation as well. As that first day progressed, I remember starting to feel a bit nervous that I wouldn't be able to remember all the details of both bills and even if I could, would I be able to articulate my thoughts in an organized and succinct manner? Luckily, we were able to practice our speeches through role play, which helped solidify the information.

I awoke the second day, still somewhat nervous but eager to go to Capitol Hill. With the rest of the NYC delegation, I arrived at Representative Maloney's office ready to tackle the task at hand. We met with Kelly Hennessy, staff assistant to Rep. Maloney. As we made our case about both bills, I noticed that Ms. Hennessy was both attentive and taking notes throughout our presentation. She agreed with us that mental health care is needed in school settings as the vast majority of children in need of care are unable to access it for various reasons including but not limited to finances, long wait times, and shortage of providers. She also felt that the fact CAP's were not included in the loan relief program was an oversight and felt that the solution to re-word a small section of the bill could be simple. Ms. Hennessy was kind and professional and agreed to bring both bills to the attention of Rep. Maloney. At the same time, she did caution us that at the present time the current focus of the government is on appropriations so while our requests were reasonable, they would take time to be introduced on the House and Senate floors again. I left Rep. Maloney's office feeling optimistic about the meeting as I felt that she had heard and understood the importance of what we were asking, but at the same time, I felt apprehensive that our requests could potentially get lost in the shuffle. I also felt a sense of accomplishment at advocating for something I believed in and more confident in my abilities to be an advocate.

Overall, my experience at the AACAP Legislative Conference this year solidified my interest in advocacy for child and adolescent mental health. It was an educational, enjoyable, and eye opening experience, and I hope to attend the conference on a yearly basis.



Autism Awareness

By Annie Li, MD and Olga Leibu, MD



This past April, NYCCAP spearheaded the first social media advocacy campaign for Autism Awareness, as part of a local initiative to support the national designation of April as Autism Awareness Month and the United Nations General Assembly designation of April 2 as World Autism Awareness Day. Through the joint collaboration of NYCCAP's Collaborative Systems Committee and Communications Committee, the intent was to share as much information on autism and provide relevant local resources to our members and the general public. This first collaboration and social media advocacy campaign turned out to be prolific and successful as key information was shared via Twitter, NYCCAP's website, and email at a rapid and exciting rate! Going forward, we hope to foster more collaborations between NYCCAP committees and harness the power of technology to spread relevant and important child and adolescent psychiatry information at a faster capacity!

In case you missed the circulations, we are highlighting the top hits below!

- The Centers for Disease Control and Prevention (CDC) estimates autism's prevalence as 1 in 68 children in the United States. This includes 1 in 42 boys and 1 in 189 girls.
- In NY state, the Office for People with Developmental Disabilities (OPWDD) is the system that can provide supports and services to youth and adults with autism. An individual who has a developmental disability and lives in New York State can request a basic eligibility review by calling an OPWDD office directly and attending a Front Door presentation. https://opwdd.ny.gov/welcome-front-door/Front_Door_Contact_Numbers



- There are five Developmental Disability Regional Offices (DDROs) that are located throughout New York State each with an eligibility coordinator who can help walk a family through the assessments and documents needed to determine eligibility. <https://opwdd.ny.gov/sites/default/files/documents/OPWDDDDROEligibilityCoordinators%202018.2.pdf>
- Organizations that help with assessments to determine eligibility vary from county to county and might necessitate documentation from the pediatrician, school, or a psychologist. https://opwdd.ny.gov/sites/default/files/documents/guide_to_eligibility_assessment_resources_final_2.pdf
- NYSTART is a community-based program that provides crisis prevention and response services to individuals (6yo+) with intellectual and developmental disabilities and is available to clients who are considered OPWDD eligible. Referrals can be made by individuals, families, service providers, hospitals, psychiatric centers and other crisis services. In the metro area, NYSTART teams can be accessed by calling: Brooklyn and Staten Island: (646) 565-5890; Bronx, Manhattan and Queens: (212) 273-6300; and Long Island, call (516) 870-1647
- The Theater Development Fund (TDF) coordinates autism-friendly Broadway performances in NYC every year. For more information, visit: <https://www.tdf.org/nyc/40/Autism-Theatre-Initiative>
- Mark your calendar and walk for a cause. Autism Speaks will be having its annual walk in NYC on Sunday, September 16, 2018 at South Street Seaport. For more information, check out: http://act.autismspeaks.org/site/TR?pg=entry&fr_id=3836
- The Autism Speaks Advocacy Ambassador Program is designed to enhance Autism Speaks' advocacy efforts by promoting outreach to federal legislators. Grassroots volunteers serve as ambassadors and are the main point of contact for their assigned legislator and will work directly with Autism Speaks staff both in local and national offices. To learn more, please contact advocacy@autismspeaks.org
- Advocates for Children of New York is an organization specializing in educational rights for students with disabilities. Parents can become informed of their legal rights and have consultants negotiate on their behalf to obtain the services their children need to succeed in school. Call AFC's Education Helpline at (866) 427-6033, Monday to Thursday, 10:00 a.m. to 4:00 p.m.

Advocating and Clinically Caring for Transgender and Gender Non-Conforming (TGNC) Youth

By Shervin Shadianloo, MD



Caring and advocating for transgender and gender non-conforming children and youth is a growing and often new field to many child and adolescent psychiatrist. The Advocacy Committee has been focused on identifying the need of care and attention for mental health of children and youth and, in particular, the ones who are in greater need due to further marginalization and discriminations than the general population. Our committee decided to arrange for an evening of discussion and learning clinical care and advocacy for TGNC children and youth in collaboration with Gerald J. Friedman Transgender Health & Wellness Program/Northwell. On April 17, two NYCCAP Board Members—Richard Pleak, MD and Shervin Shadianloo, MD—presented along with Leonid Poretsky, MD (adult endocrinologist) and Yeouching Hsu, MD (pediatric endocrinologist) in a well-attended event at the Friedman Transgender Center. They brought together a group of physicians from various specialties, non-physicians, and

clinical/non-clinical individuals for a fun and lively discussion.

The presentations covered the subjects in a multidisciplinary approach where Dr. Pleak talked about history of diagnosis of gender dysphoria in mental health as well as gender development and basics of caring for these kids. Dr. Hsu went over important endocrinology facts and newly updated guidelines of hormonal treatment for these youth, and Dr. Shadianloo focused on current legal issues that TGNC children and youth are facing and the need and ways of advocating for them ranging from school to federal level. Current New York State Department of Education guidelines supporting TGNC youth at school was also brought to the audience's attention. The audience participated actively with questions about both advocacy issues and clinical care.

At the beginning of the evening, participants had a chance to get to know the each other and enjoy dinner. The event concluded with a tour by Dr. Poretsky of the artistically designed Lenox Hill Friedman Diabetic Clinic where the Friedman Transgender Health Wellness Program is hosted.

Private Practice Night

By Colleen Turek, MD

This year the Training and Education Committee with the Members-in-Training Subcommittee hosted Private Practice Night on May 17 for trainees in the NY area who are interested in private practice. The event took place at the New York Presbyterian-Weill Cornell site and included 15 trainees from local programs and a guest panel of Oliver Stroeh, MD; Owen Muir, MD; and Zana Dobroschi, MD.

Each panelists provided unique perspectives and spoke to his/her experiences in private practice. Dr. Muir spoke about his experience founding Brooklyn Minds and discussed important topics such as the use of electronic medical records, malpractice insurance, and group private practice. Dr. Stroeh spoke to the nuts and bolts of creating a private practice, including location, planning your schedule, billing, patient acuity, and emergency coverage. Similarly, Dr. Stroeh also spoke to differences with faculty practice compared to individual private practice. Finally, Dr. Dobroschi spoke to her longtime experience in part-time private practice as an individual, including doing consultations and child psychotherapy while balancing a full-time academic position. Trainees were encouraged to ask questions both during and after the individual presentations. Overall, the event was a great success and participants left both full of pizza and information!

Theatre Night: *Mean Girls*

By Jennifer O'Keeffe, MD



The attendees of Theater Night wore their best pink on Wednesday, May 2 to enjoy the Broadway hit, *Mean Girls the Musical*. The event started with mingling at Social Bar. The networking transitioned to roaring laughter and some tears while watching the cast of *Mean Girls* deliver an incredible performance, including Tina Fey! *Mean Girls* was selected as the show for Theater Night to spark discussion around important topics such as school pressure and bullying, issues directly affecting our patients daily. We look forward to continuing this yearly theatre tradition!



Welcome Night 2018

By Robert Dugger, MD



On July 31, the NYCCAP Training and Education Committee and the Members-in-Training (MIT) Subcommittee sponsored Welcome Night 2018 at Professor Thom's Bar and Restaurant, hosted by members Drs. Cathryn Galanter, Oliver Stroeh, Veena Muthusamy, Robert Dugger and Colleen Turek. There were 48 attendees, including trainees and board members from 7 different training programs across the New York area. Vera Feuer, MD provided introductions while Drs. Galanter and Stroeh shared the great benefits of participating in NYCCAP and AACAP. This very diverse group enjoyed Child Psychiatrist Bingo and also a raffle. Two trainees won the opportunity to have their AACAP membership reimbursed by NYCCAP. Awesome drinks and food complimented an overall wonderful evening! Special thanks to Monica Badillo, MD; Tanya Dutta, MD; and Piyush Taparia, MD, child and adolescent psychiatry Fellows who helped make the evening possible.

The MIT Subcommittee would like to have representation from all training programs in our region that includes NYC, Long Island, Westchester and Rockland County. Please reach out to us if you have questions or would like to become involved:

Veena Muthusamy MD (veena715@gmail.com)

Robert Dugger MD (robertdugger@gmail.com)

Colleen Turek MD (colleen.turek@gmail.com)

NYCPS & NYCCAP Early Career Psychiatry Social Mixer

By Jennifer O’Keeffe, MD



On Monday, June 11, adult and child psychiatrists from the NY area enjoyed the beautiful late spring weather with great food and mingling on the Frying Pan boat. The event offered space for the early career psychiatrists to network, enhancing bonds both professionally and socially. The New York County Psychiatric Society (NYCPS) and NYCCAP co-sponsored the event. NYCCAP’s Early Career Psychiatrist Committee hopes to offer more events this coming academic year to create opportunities for further networking and peer support.

Responding to Disaster and Trauma: NYCCAP’s New Committee

By M. Carolina Zerrate MD, MHS



Disasters and trauma related situations affecting youth in the United States continue to be frequent headlines. Whether it be natural or man-made disasters, acts of violence, or unfortunate events like the forced separation of immigrant children, it is important that the voices of child and adolescent psychiatrists are part of the conversation when informing the public, developing response plans and advocating for policy changes. AACAP has an established protocol for responding and providing information and resources to membership, media and the public. AACAP’s online Disaster Resource Center offers consumer-friendly definitions, answers to frequently asked questions, clinical resources, expert videos, and abstracts from the JAACAP, Scientific Proceedings and Facts for Families relevant to each disorder.

Furthermore, AACAP’s Disaster and Trauma Issues Committee is building a grassroots disaster community with the goal of having an established network and liaisons with each regional organization to lead efforts and activities related to trauma and disaster issues. As part of this process, NYCCAP has established the Disaster and Trauma Committee. The committee will strive to provide guidance, resources and when possible direct help when unfortunate events impact our community. It will also respond when there is need at a regional or national level for coordination and collaboration to address mental health needs of children, adolescents, and their families after disaster or traumatic events.

We would like to extend an invitation to all members to participate in committee activities and to share their expertise on trauma and disaster related issues. If you are interested, please send an email to info@nyccap.org requesting to be added of the Trauma and Disaster Committee list and indicating your area of expertise or your area of interest. We look forward to working with you!

An invitation to AACAP's Asian Caucus in Seattle, WA

By Annie S. Li, MD

As a minority group in the United States, Asian American and Pacific Islanders have a lot to celebrate. According to the 2010 US Census Bureau, Asian Americans surpassed Hispanics as the fastest-growing racial group in the United States and it is projected that by the year 2050, Asian Americans will be 9% of the total population, up from 5.6% in 2010. Turn on the TV and we have more faces of Asian American entertainers than ever before. It is exhilarating for young Asian boys to find an idol in the NBA thanks to Jeremy Lin and I laugh hysterically at Ali Wong's comedic material on pregnancy and motherhood. In fact, I am impatiently waiting for the film's adaptation of Kevin Kwan's *Crazy Rich Asian* to go on the big screen this coming August.

And while it is great to highlight the achievements of us as a minority group, we must draw light to an epidemic that remains hidden in the shadows of stigma. It is unfortunate that Asian Americans persistently underutilize mental health services and tend to perceive mental health issues with stigma and shame. As a consequence, Asian Americans, especially its youth, are vulnerable to the sequelae of untreated mental illness. According to the 2015 CDC High School Youth Risk Behavior Survey Data, suicide attempts were reportedly higher in both Asian American males and females grades 9-12 compared to Non-Hispanic White at a ratio of 1:4 for males and 1:1 for females. There is also currently a lack of Asian American child and adolescent mental health service providers in this country.

It does not help that the myth of the "model minority" creates an illusion that we are immune from the symptoms of depression, anxiety, bipolar disorder or substance use. The truth is Asian Americans and Pacific Islanders are quite heterogeneous in terms of religion, language, and socioeconomic backgrounds. We are not all sharing equally our lauded successes. And even if some are positioned in the most prestigious of positions, psychosocial stressors such as implicit and explicit workplace discrimination, the so called "bamboo ceiling" as coined by Jane Hyun in 2005, remains a commonplace and takes a toll on mental well-being and contribute to burn out.

Earlier in May, the New York Post published an article on a fourth-year Asian American medical student at NYU who completed suicide in her dorm room. In the days after, over on the local Chinese radio station, callers were commenting to a radio talk show host about the suicide. Callers expressed shock and bewilderment at how she could have ended her life when she was so close to earning her medical degree. Some even suggested she was weak and was not appreciative of her good fortune. My heart broke for the family. I do not know her but I cannot imagine anyone going through the rigors of medical training to be weak. If anything, medical school takes a toll on one's emotional and mental well-being.

As a Chinese American child and adolescent psychiatrist working in the front lines of direct patient care, I have found my professional passion to be my biggest challenge. My toughest interactions have always been advocating for the mental health needs of my Asian American adolescent patients and getting their families to be on board, to lessen their fears and to help them cross that bridge to acceptance. Fighting stigma can be exhausting and I am grateful I am not alone. There are many of us recognizing the need for a call to action.

This coming October, the American Academy of Child and Adolescent Psychiatry (AACAP) will inaugurate its first ever Asian Caucus. It will be a coming together of Asian American child and adolescent child psychiatrists with the goal of creating a network of support and mentorship such that all of us can work towards reducing stigma, dispelling stereotypes, promoting awareness and bringing research driven evidenced based practices to this field. I am excited to have been a part of its founding, along with my colleagues--Jean Cho, MD; Neha Sharma, MD; and Steven Sust, MD. It is a much-needed endeavor to bring greater awareness to this epidemic.

I am excited for what is to come and am welcoming anyone who is interested to come join us at AACAP's Annual Meeting in Seattle for our inaugural meeting on Thursday, October 25, 2018 from 5:15 p.m. to 7:15 p.m. Hope to see you there!

Let's Keep Families Together!

By Akeem Marsh, MD



The issue of family separation has galvanized the country after recently coming into national spotlight through amended policy of a 2005 executive order known as 'Operation Streamline'. The specific policy was a joint venture of the Department of Homeland Security (DHS) and Department of Justice (DOJ) of the United States Federal Government. Along the United States/Mexico border, unauthorized entry was deemed a criminal justice issue subject to immediate detention, mass hearings, and deportation soon thereafter. Changes to the program were made over time to allow some leniency for families to be detained together as well as some families with special circumstances (i.e. young children, medical / mental health issues, asylum seekers) were even offered alternatives to detention.

In April 2018, things changed, as an attempt was made for stricter deterring of unwanted immigration by executing "zero tolerance"—no exceptions to prosecution of people that cross the border by means of "improper entry," not even families. With that, all adults, irrespective of whether or not they were accompanied by children, were detained. Adults were placed in federal detention centers while awaiting trial, while children were subsequently placed in federal juvenile detention centers or foster care on referral from the Department of Health and Human Services' Office of Refugee Resettlement. Some youth were fortunate enough to be united with a sponsor or family member. Unfortunately, though too, this form of family separation represents something unique but the concept is not totally new in our country.

Images of children in what appeared to be animal type cages, some sleeping on the floor with minimal linen, and horror stories prompted widespread outrage and intense political pressure. In June 2018, a new executive order kept "zero tolerance" in place but returned some leeway to keep families together when possible. Though a step in the right direction, sufficient damage has been done. There were reports of various allegations including physical/sexual abuse, medical neglect, excessive use of restraints, and even children being administered psychotropic medication without consent. Over two thousand youth had been separated from parents most of which were dispersed throughout the country. Children separated from their families at the border were ordered to be reunited, though unfortunately this was not possible for all children thus the situation remains unresolved.

The health-related implications from these forms of toxic stress can ultimately result in far reaching, potentially lifelong consequences. Sadly, many of these individuals charged with "improper entry" are indeed fleeing some form of tragedy in their home country and while seeking a better life have only met more unforeseen trauma. Reports have found that several children did not recognize parents on reunification, a sign of clear stress. Most disturbing anecdotes are those where parents commit suicide while detained or deported after separation, and detained women having miscarriages. Specific long-term consequences remain to be seen but if the Adverse Childhood Experiences work and related studies are any indication, there is a host of potential medical and mental health related outcomes for individuals and future generations.

Historically, government sanctioned family separation is not without precedent in the United States. During the time period when slavery was the law of the land, African American children were routinely sold separately from parents, often never to be seen by families again. There are a several thousand ads that appeared in newspapers after slavery officially ended detailing the searches people embarked on to find those lost relatives. In the late 1800s through the early 20th century, Native American children were forcibly removed from families and placed in boarding schools for forced assimilation. In the modern era, nationwide the child welfare system which is charged to remove children for safety concerns functionally disproportionately removes impoverished, African American, and Native American children as compared to wealthier and Caucasian counterparts. Likewise, the criminal justice system with a higher percentage of American citizens incarcerated compared to how other countries incarcerate citizens, at least some families may be disconnected unnecessarily.

Family separation in its various forms has long been a problem that we continue to face. Part of our ethical obligation as health professionals consists of promoting healthy and resilient children and families. Therefore, it comes as no surprise that opposition to the border separation policy has been espoused by multiple related organizations including American Academy of Child & Adolescent Psychiatry (AACAP), American Psychiatric Association (APA), American Academy of Pediatrics (AAP), American College of Physicians (ACP), and American Psychological Association among many other groups. Organizations can take it a step further in supporting the unity of families to the extent possible. In New York City, since the foster care infrastructure allowed for accommodation of border separated youth that had been displaced, many ended up there. Local hospitals have been seeing youth attempting to deal with the medical issues, while groups such as Catholic Charities have stepped up direct advocacy efforts. Ultimately, we need to do all that we can to ensure that all families are kept together while encouraging the highest quality of relational health as a society.

Update from NYCCAP's Training Committee: Your Voice Counts! APA is Awarded Funding the APA SAMHSA Minority Fellowship Program

By Cathryn Galanter, MD



In June, some of you may have heard that the American Psychiatric Association (APA) was at risk of losing funding for the APA Substance Abuse and Mental Health Services Administration (SAMHSA) Minority Fellowships Program (MFP). Through efforts by the APA and members who reached out to Congress, in July, the APA was awarded a five-year, \$7.1 million grant from SAMHSA to expand the reach of APA's MFP. The amount of the grant is almost double that of the grant awarded to APA to support the fellowships in the previous five-year cycle. For those of you who contacted Congress, your voice counts!

The MFP's mission is to enhance the knowledge and capabilities of racial and ethnic minority psychiatry residents to teach, administer, conduct services research and provide culturally competent, evidence-based mental health services to minority and/or underserved populations. Given that racial and ethnic minorities make up more than 28% of the nation's population, and less than 20% of America's mental health workforce consists of members of

racial or ethnic minorities, initiatives such as the MFP can play a crucial role in mentoring general and child and adolescent psychiatry trainees.

One former recipient, Byron Young, MD, is now a child and adolescent psychiatrist and a Board Member of NYCCAP. He works in the public sector to expand the reach of mental health care to children and adolescents through collaboration with primary care doctors. He says of his experiences as a Fellow, "It was single-handedly the most impactful experience of my medical career. It made me a much more community-oriented psychiatrist and taught me about the impact of merging mental healthcare, social justice, and creativity. It was heartbreaking to hear that it was about to lose funding and I was elated to hear that this vital initiative will continue and that all the many prayers have been answered. I often hear individuals and organizations speak about making the field of psychiatry and medicine in general more diverse and inclusive, but too little is done to make it happen. This program is a shining example of organizations actually putting action to words."

The grant will allow APA to continue and expand its program and efforts to reduce health disparities, mentor residents and child and adolescent psychiatry fellows in improving health care outcomes for underserved populations and encourage more racial and ethnic minorities to join the behavioral health workforce.

The APA and AACAP offer many Fellowship awards to mentor the future leaders of our field. If you are interested in learning more, you can check out APA's and AACAP's website for more information.

<https://www.psychiatry.org/residents-medical-students/residents/fellowships/available-apa-apaf-fellowships>
[https://www.aacap.org/AACAP/Awards/Resident and ECP Awards/Awards REC Home.aspx](https://www.aacap.org/AACAP/Awards/Resident_and_ECP_Awards/Awards_REC Home.aspx)

Puerto Rico's Resiliency: Building Human Capacity After Maria

By M Carolina Zerrate, MD, MHS and Alexandra Canetti, MD

On the morning of September 29, the eye of hurricane Maria made landfall in Puerto Rico, just two weeks after the passage of hurricane Irma, leaving behind what many have described as a humanitarian crisis. Almost a year after this devastation, Puerto Ricans are still recovering and working towards rebuilding their island and healing the wounds from this tragedy.

Maria, a category 5 hurricane, left Puerto Rico with tremendous needs ranging from basic necessities including food and drinkable water, to larger infrastructure gaps like electricity coverage throughout the island. More profoundly, the impact on Puerto Rico's most important asset, its people, was evident when government agencies and mainstream media shared concerns for a growing mental health crisis six months after Maria. In response to an overwhelming number of calls to Puerto Rico's suicide prevention line, an increase on attempted and completed suicides, and a growing number of Puerto Rican's endorsing clinical symptoms of depression, anxiety, and Post Traumatic Stress disorder¹; several efforts from the island and the mainland were put together through various private, public, and non-profit agencies.

While directly addressing the needs of the community is certainly a priority in post disaster situations, thoughtfully considering sustainable interventions not just to overcome the immediate crisis, but building and maintaining capacity overtime is crucial in particular for already vulnerable populations. With this in mind, The AIDS Education and Training Center Program through The Columbia University HIV Mental Health Training Project reached out to Alexandra Canetti, MD, a child, adolescent and adult psychiatrist at NYPH-CUMC with extensive experience working with HIV positive populations, with a request to put together a team of mental health providers and develop a culturally competent curriculum for Puerto Rican community health care providers and staff working with individuals infected with HIV.

The Columbia University HIV Mental Health Training Project is part of the Northeast/Caribbean regional office of the AIDS Education and Training Center (AETC) Program, which offers free HIV training to mental health and primary care providers and prescribers who work with HIV clients. The AETC Program is a national network of leading HIV experts who provide locally based, tailored education, clinical consultation and technical assistance to healthcare professionals and healthcare organizations to integrate high quality, comprehensive care for those living with or affected by HIV.²

In January 2018, our fully bicultural (Latina-American) and bilingual (Spanish-English) team comprised of two psychiatrists (Drs. Canetti and Dr. Zerrate), one psychologist (Maciel Campos, PsyD) and a social worker (Elena Alonso, LCSW) travelled to Puerto Rico to present a carefully created workshop to provide psychoeducation on common mental health disorders post disaster, as well as burnout and compassion fatigue among health care providers and staff. Two different workshops took place, one in the capital city of San Juan and the second one in the more rural area of Manatí. Participants included medical providers (physicians, and nurses), psychologists, social workers, case managers, and administrative staff from clinics funded via Ryan White Part A (provides grant funding for medical and support services to Eligible Metropolitan Areas and Transitional Grant Areas³ who specialize in treatment of individuals infected with HIV).

We presented a comprehensive curriculum covering identification and treatment of depression, anxiety, PTSD, and suicide screening and prevention among the general population, followed by psychoeducation and reflective exercises on burnout, and compassion fatigue as well as mindfulness-based activities for health care providers and staff.

Beyond accomplishing our training goals and doing our best to answer questions ranging from how to ask about suicide to how to provide care for actively suicidal patients within a health care system that was not yet set up to address these needs; we were thrilled to have the opportunity during our workshops to follow the participants' lead and create a space for them to share their stories of resiliency. We were blown away and honored to hear their stories of strength, of compassion, of rebuilding community, and finding meaning in their difficult experiences in order to face both the challenges their patients struggled with and their personal

tragedies. Every story shared a positive reflection on how a gesture big or small—offering a warm cup of coffee or traveling long distances to check on uncommunicated patients or coworkers—allowed them to move forward and see Maria as a tragedy that has made them stronger. A disaster that helped them reconnect as proud, and empowered Puerto Ricans ready to continue to help each other and build a better future.

There is still a tremendous need for support in the island and ways you can help Puerto Ricans continue to be empowered in their recovery. To support ongoing relief efforts in Puerto Rico, Google is now matching donations up to \$2 million to the Hispanic Federation and Mercy Corps. You can donate now: g.co/supportPR; or at United Way of Puerto Rico: www.fondosunidos.org.

1. Barbaro, Michael (2018). "Puerto Rico's Mental Health Crisis". *The New York Times, The Daily*. February 8, 2018.
2. Retrieved from <https://aidsetc.org/about>
3. Retrieved from <https://hab.hrsa.gov/about-ryan-white-hiv-aids-program/about-ryan-white-hiv-aids-program>

A Council Trip to Present in Prague

By Scott Palyo, MD; Iliyan Ivanov, MD; Melvin Oatis, MD; and Kristin Long, LCAT, LP



This past July, members of our Council traveled to Europe to present and attend the 23rd World Congress of the International Association for Child and Adolescent Psychiatrists and Allied Professions (IACAPAP), July 23-27, in Prague Congress Centre, Prague, Czech Republic.

The New York Council on Child and Adolescent Psychiatry (NYCCAP) was inspired by Dr Paramjit Joshi's presidential initiative, *Partnering for the World's Children*, and since then we have participated in 4 international conferences over the past 4 years.

The congress addressed a variety of topics reflected in the poster sessions, daily symposia and keynote lectures. The congress had 30 keynote presentations ranging from

updates on the diagnosis and treatment of autism by Michal Hrdlicka to "synchronicity" in behavioral and biological measures between child and care taker by Ruth Feldman to the treatment of self-harm and suicidal behavior in adolescents by Michael Kaess.

This conference also marked the first E. James Anthony Lecture Series. Created in 2017, the IACAPAP bureau honored Dr. Anthony's contributions to the association. He was IACAPAP President from 1970-1974. The lecturer is selected by the IACAPAP leadership and must be an outstanding expert in the field of child psychiatry and mental health. His wife, Ginger Anthony, was in attendance for this special event and the lecture was given by Alexandra Harrison, MD, Assistant Professor of Psychiatry, Cambridge Health Alliance, and a training and supervising analyst at the Boston Psychoanalytic Society and Institute. Dr. Harrison's lecture was appropriately entitled, *Insights from Developmental Research for the Practicing Child Psychiatrist*. She discussed the theoretical principles and presented clinical material illustrating the 'music and dance' of the therapeutic process in child analysis.

The IACAPAP conference included many members of AACAP. AACAP's President, Karen Dineen Wagner, MD, PhD, participated in a panel entitled, *The Future of Child and Adolescent Psychiatry*, and spoke about her presidential initiative with "Depression Awareness and Screening in Children and Adolescents" as well as partook in a daylong course on psychopharmacology. AACAP President-Elect Gay Carlson, MD attended the conference and presented on childhood depression. What a pleasure to have outstanding leaders represent

AACAP.

NYCCAP's delegation had a notable presence in the program. The New York symposium, *Cultural Diversity and Its Impact on Mental Health Care*, included four presentations:

- *Improving Treatment of Children with Trauma by Engaging Caregivers* by Scott Palyo, MD
- *Unconscious Bias, Micro Verses Macro Aggressions* by Melvin Oatis, MD
- *Immigrant Youth and Families Seeking Asylum* by Gabrielle Shapiro, MD (presented by Kristin Long, LCAT, LP)
- *Mental Health Services Delivery to Special Populations - Minorities, Emigrants, and LGBT Youth* by Iliyan Ivanov, MD

In this symposium Dr. Palyo discussed working with caregivers when treating children who are victims of trauma. In lieu of Dr. Shapiro, Ms. Long presented a clinical case of immigrant family receiving care through community clinics. Dr. Oatis reviewed issues of micro and macro aggression, and Dr. Ivanov discussed Mt. Sinai's CARES model of care delivery to patients from minority groups.

The NYCAAP representatives participated in several other forums. Dr. Palyo took part in another symposium and discussed creative treatment modalities for culturally diverse children along with Simret Nanda, MD, a child psychiatrist in Northern California, and Ms. Long, a creative arts therapist and analyst in New York. The New York delegation was very happy to have Kristin Long participate when Dr Shapiro was unable to attend. In addition, Dr. Palyo participated in a panel lead by two child psychiatrists in Paris, France where they discussed obstacles of working with immigrant and refugee unaccompanied minors. Further, Dr. Ivanov was a presenter at the International Society for Adolescent Psychiatry and Psychology (IS- APP) invited session chaired by Lois Flaherty, MD and F. Çuhadaroglu Çetin, MD and spoke about resilience and treatment for adolescents with school avoidance. Each of these presentations was well attended and received.

We had so much fun working and sightseeing together. The city of Prague was an exceptional host for the congress. While we were in Prague, many of us met with other AACAP members in attendance and shared many activities and dinners. Although busy in a fashion familiar to any New Yorker, Prague seems to barely sleep—the city is easy to navigate and the locals are always willing to help with direction in the maze of centuries old streets in the historical town center. Prague offers all around the year cultural activities—opera, classical and contemporary music, jazz—and has world class museums covering wide spectrum of interest including some unconventional topics like the Alchemy museum and the Museum of Medieval Torture Instruments. Means of transportation are also ample—taxi and Uber, subway, trams and riverboats; however, one can also take a ride in a vintage car around town or paddle down the Vltava River. When in a mood for a stroll, one can try to spot and visit bars and cafes that hosted world famous artists and intellectuals among those Hemingway, Rilke and Kafka as well as the famous Svejks Restaurant. Of note the novel, *The good solder Svejks* by Czech writer Jaroslav Hasek, considered a classic of the European literature, reflects on the absurdity of war through the adventures of a simple man turned soldier during WWI not unlike the way "Catch 22" by Joseph Heller dissects the insanity of WWII. Overall, Prague ranks among the top destinations for the IACAPAP congress and sets a rather high bar for the hospitality of the upcoming 24th World IACAPAP Congress in Singapore in 2020.

Many of us are already discussing the opportunity to attend future events such as the European Society on Child and Adolescent Psychiatry's next conference (June 30-July 2, 2019, in Vienna, Austria www.escap-congress.org) and IACAPAP's 24th World Congress (July 20-23, 2020 in Singapore www.iacapap2020.org). We want to thank NYCCAP's International Committee who always helps with advertising these events. If you are interested in speaking with NYCCAP about these fantastic experiences or, if you have other conferences internationally you would like to promote, please reach out to our International Committee Co-Chairs Khadijah Watkins, MD and Iliyan Ivanov, MD at info@nyccap.org.

PHOTO GALLERY

End of the Year 2018





Advocating and Clinically Caring for Transgender and Gender Non-Conforming (TGNC) Youth



Welcome Night 2018





ECP Social Mixer



IACAPAP (Prague)



Private Practice Night



Medical Student Night



Are you coming? MARK YOUR CALENDAR!

AACAP 65 th Annual Meeting	October 22-27, 2018 Washington State Convention Center, Seattle, Washington Registration
AACAP Assembly of Regional Organizations	October 23, 2018 Washington State Convention Center, Seattle, Washington
Wilfred C. Hulse Award Lecture: Scott Palyo, MD	November 14, 2018 NYU Smilow Room (<i>tentative</i>)