

MEDICAL STUDENTS AND RESIDENTS COMMITTEE: MENTORSHIP MATTERS

Klingenstein Games 2012



■ Lisa Jacobs, M.B.A.

When **Elizabeth Lowenhaupt, M.D.**, leaned across the table in August 2011 and said, with a hint of urgency in her voice, “We need to start planning the games,” I was a bit alarmed. What kind of medical organization plays games?

I was new to the Klingenstein Third Generation Foundation (KTGF) and unfamiliar with its practices. I soon learned that generating an informal atmosphere of camaraderie, energy, and fun is integral to its efforts promoting research, interest, and mentorship in child and adolescent psychiatry among medical students. Though games are not the bulk of the KTGF conference, they are very much at its heart.

At the seventh annual KTGF Games, 50 medical students and faculty mentors from seven medical schools gathered at the Warren Alpert School of Medicine of Brown University. By all accounts, it was one of the most successful Games ever. **Robert Kitts, M.D.**, commented that his students unanimously deemed it “one of, if not the best and most meaningful conference they’ve attended.”

I joined the KTGF group during my first year of medical school at Brown. My road to medical school was long: I came by way of business school after employment in finance, journalism, educational administration, and government. It was mentorship in psychiatry that brought me to medicine. Working with **Jacob Lindenthal, Dr.P.H., Ph.D.**, at New Jersey Medical School, I helped launch a program that brought psychiatry

residents to lecture prison employees on the recognition and treatment of psychiatric illness. I felt inspired by the work and people in a way I had not since college, and decided that that alone—in contrast to my experiences in so many offices—was worth nine more years of education and training.

There were many moments during my first year of medical school when I doubted my choice. I came with big ideas of how to affect change on a macro level, but what I did all day, every day, was to study science at a micro level. I felt isolated. My classmates snickered at my interest in psychiatry, said it was not “real” medicine, and questioned my priorities and sanity. They asked, “Why would you want to do that?” My hospital mentor, and many others, confidently predicted that I would change my mind.

The KTGF events helped me remember my motivations and connect with people with similar priorities. Held at psychiatrists’ homes, KTGF dinners were meetings of like-minded individuals at all levels of training. I learned about career, research, and mentorship opportunities in child and adolescent psychiatry. More than anything, it was the warmth and enthusiasm the KTGF members, and Dr. Lowenhaupt’s accessibility and passion, that drew me to the organization.

I assumed student leadership of the KTGF at the beginning of my second year, and Dr. Lowenhaupt quickly told me that my job would be different from that of my predecessors. This year was all about the Games. She fondly reminisced about past Games’ competitive and collaborative spirit, the energy and excitement—and honestly, I could not picture it, because what she described was so foreign from my experiences of medical school at that point.

We put together a planning committee of students from all years of medical education as soon as school began. We met at Dr. Lowenhaupt’s home and

restaurants to imagine the best event we could create, making endless lists and spreadsheets to outline how we would execute it.

Dr. Lowenhaupt also encouraged us to think past the games to our future careers, and to find ways to get involved in child and adolescent psychiatry. A fellow committee member and I accompanied her to the AACAP Annual Meeting in Toronto, while other students worked with her to develop psycho-educational curricula and plan clinical clerkships.

It was February before we knew it, and the Games had arrived. We threw a kick-off event at a local restaurant in downtown Providence, Rhode Island, the Friday night before the Games began. I remember waiting there nervous about how many would attend, until a huge group from Mount Sinai arrived followed by an equal crowd from Harvard, all spirited and laughing. From that moment on, the event was effortless. It felt like a party as much as a conference, because everyone was so excited to be with people who shared their interests.

The morning of the Games was devoted to scholarship. First we had oral presentations. Deborah Brooks, a Brown medical student, discussed creating and evaluating a sex education curriculum for an all-girls middle school. **Melisa Carrasco**, an M.D., Ph.D. student at the University of Michigan, detailed evidence of publication bias related to pharmacotherapy for repetitive behaviors of autism spectrum disorders. **Samuel Pullen, D.O.**, a resident at the Mayo Clinic, discussed using video teleconference technology to promote education in child and adolescent psychiatry among medical students. **Deborah Doroshov**, an M.D., Ph.D., student at Harvard, discussed residential treatment in child psychiatry and the struggle to define normal childhood from 1930-1980 in America.

The second part of the morning was for poster presentations. **Josh Stein**, a medical student at Mount Sinai, presented on a topic at the heart of the conference: whether early mentorship in child and adolescent psychiatry through the KTGF is effective in generating interest in child and adolescent psychiatry. He concluded that the KTGF increased interest in the profession, and significantly increased positive perceptions of the value of mentorship and knowledge base in child and adolescent psychiatry. **Jeremy Stricsek**, a Brown medical student, presented on the correlation between familial suicide and child behavior problems among preschoolers receiving psychiatric partial hospitalization. **Pamela Daher** and **Laura Powers** from Mount Sinai presented on the prevalence of psychiatric illness in pediatric oncology. **Julie Chilton, M.D.**, a fellow at Yale, presented on psychosocial supports in cinematic depictions of childhood cancer.

Lunch was held at Bradley Hospital, which has remained the only free standing children's psychiatric hospital in the country since its inception in 1931. **Thomas Anders, M.D.**, professor emeritus of Psychiatry at University of

California Davis and a past-president of AACAP, and his protégée, **Gregory Fritz, M.D.**, professor of Psychiatry at Brown University, spoke about their careers and the value of mentorship.

After lunch, the games began. A three-legged race was followed by the traditional "brain toss." The open multi-level structure of the new Brown Medical School building allowed for a particularly challenging competition as we worked to sink the most foam brains into the trophy on the lobby floor a level below. Each team was given a stack of magazines and a bogus research topic for a hilarious mock poster presentation competition. In the end, Mount Sinai's spirited performance in the games, together with its academic contributions to the conference and impressive attendance, won them the trophy for another year.

Now the Games are over, but their spirit continues. E-mails have been exchanged among attendees. Harvard has already begun planning to host the Games in 2013. Many of the attendees are now considering a future in child and adolescent psychiatry.

Since passing on the reigns of KTGF leadership as I prepare to start my third year on the wards with a clerkship in surgery, I take solace knowing that I have a place within psychiatry and an interest and passion that is shared by others. ■

Lisa Jacobs is a 3rd year medical student at Brown. She holds an M.B.A. from the University of Rochester. She is a freelance writer, cyclist, adventurer (23 countries and counting), and a grilled cheese enthusiast.

AACAP wishes to thank the Klingenstein Third Generation Foundation for their continued support of the following activities:

AACAP Klingenstein Third Generation Foundation Award for Research in Depression or Suicide

Medical School Fellowship Program Evaluation

AACAP's *Facts for Families* on Depression and Suicide

AACAP Election Results Announced

The AACAP election of two Councilors-at-Large and two Nominating Committee members began in April and concluded at midnight on May 31, 2012. The following members were elected. Their terms begin in October 2012 at the end of the Annual Meeting.

Councilor-at-Large (October 2012-2015)

Stephen J. Cozza, M.D.
Joan Luby, M.D.

Nominating Committee (October 2012-2014)

Tami D. Benton, M.D.
Alice R. Mao, M.D.

AACAP Election Policy

(approved by the Executive Committee March 23, 2001)

Ballots will be held for three months after the election, during which time anyone who wishes to contest the election can do so. After three months the ballots will be destroyed.

Campaigning is prohibited in AACAP elections.