

AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY

W W W . A A C A P . O R G

2019 AACAP ELECTION

Candidates' Information Booklet

PRESIDENT-ELECT (*choose 1 of 2*)

*David G. Fassler, MD, DFAACAP
Warren Y.K. Ng, MD, MPH, DFAACAP*

SECRETARY (*choose 1 of 2*)

*Cathryn A. Galanter, MD, DFAACAP
Rama Rao Gogineni, MD, DFAACAP*

TREASURER (*choose 1 of 1*)

Bennett L. Leventhal, MD, DFAACAP

COUNCILORS-AT-LARGE (*choose 2 of 4*)

*Adrienne L. Adams, MD, Msc, DFAACAP
George A. Fouras, MD, DFAACAP
Anita R. Kishore, MD, DFAACAP
John W. Pruett, MD, DFAACAP*

NOMINATING COMMITTEE (*choose 2 of 4*)

*Eraka Bath, MD
Matthew G. Biel, MD, MSc, DFAACAP
Peter T. Daniolos, MD
John Sargent, MD, DFAACAP*

All information is included as submitted by the candidate.

PLEASE CHOOSE ONE OF TWO CANDIDATES

Candidate Biographical Information: **AACAP PRESIDENT-ELECT**

DAVID G. FASSLER, MD, DFAACAP



I attended medical school at Yale and received my training in adult psychiatry at the University of Vermont. After completing my fellowship in child and adolescent psychiatry at Cambridge Hospital, I returned to Vermont to help start Otter Creek Associates, a community-based practice providing comprehensive clinical services for children, adolescents and families. I've maintained my academic ties with UVM, where I'm a Clinical Professor and the Director of Advocacy and Public Policy. Within the Academy, I've served as Treasurer and Chair of the Assembly. I currently co-chair our Committee on Children and the Law. I'm also a member of the Consumer Issues Committee and of our Delegation to the AMA. At a local level, I'm the President of the Vermont Association of Child and Adolescent Psychiatry, and our delegate to the AACAP Assembly.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Chair, APA Investment Oversight Committee

Treasurer, Vermont Psychiatric Association

President, Vermont Association of Child and Adolescent Psychiatry

Financial Conflict: No

Family Member Conflict: No

Signed on 03/24/2019 by David G. Fassler, MD signed as David Fassler

I first came to the Academy in my last year of medical school. I had the opportunity to spend a month learning about advocacy from Mary Crosby, the Director of Government Relations at the time. We visited Congressional offices and helped work on a bill aimed at removing lead from gasoline. My role was to review and summarize the literature on the effects of lead on child development, behavior and intellectual functioning. Working with a large and diverse coalition, we eventually prevailed. The subsequent regulations contributed to the overall reduction in childhood lead exposure. The experience showed me how research and data could be used to influence public policy. It also taught me how to communicate effectively on behalf of our profession and advocate for change on behalf of our patients. The Academy has continued to provide inspiration, guidance and support ever since.

Like many of us, I've had a diverse and varied career. I've practiced rural child psychiatry as a traveling consultant for the State Health Department. I've administered training grants, run a private practice, started inpatient services, taught medical students, supervised residents and fellows, and dealt with state and local politics. My current practice includes forensic consultation, with an emphasis on cases involving adolescents and young adults. I'm also a Clinical Professor of Psychiatry at the University of Vermont, and the Director of Advocacy and Public Policy at the Vermont Center for Children, Youth & Families.

Within the Academy, I've served as Treasurer and as Chair of the Assembly. I currently co-chair our Committee on Children and the Law. I'm also a member of the Committee on Consumer Issues and of our Delegation to the AMA House of Delegates.

These are challenging times for all professional associations. In this regard, the Academy is no different. Our members are faced with the uncertainties presented by changing practice patterns, onerous and inappropriate recertification requirements, inefficient and problematic EHRs, and the access crisis at all levels of care. As an organization, we will thrive by paying close attention to the evolving needs of our members. We need to reach out and really represent all of child and adolescent psychiatry. We need to be proactive in our efforts to provide useful tools and resources for our members. We need to actively support our members in training and our early career psychiatrists. This includes advocacy for enhanced loan repayment and help finding jobs and negotiating fair contracts. And we need to continue our efforts to secure adequate and stable funding for our training programs and research agendas. The future of our profession depends on our ability to demonstrate the effectiveness of our interventions.

Despite the challenges we face, these are also exciting times for child and adolescent psychiatry and for the Academy. It's exciting that the science of our profession is stronger than ever. It's exciting to practice at a time when we're unraveling the genetics and the neurobiology of child psychiatric disorders. It's exciting that we're finally making real progress with respect to parity, integrated and collaborative care, early intervention and telepsychiatry. And it's exciting that we're joining forces with family members and advocacy organizations on legislative initiatives and public education campaigns.

Fortunately, the Academy is strong and stable, both organizationally and financially. Our membership and our resources are growing. Our Journal, Newsletter and website are all well utilized and highly regarded. Our Annual Meeting, Psychopharm Institute, Review Course and Legislative Conference are all well attended. As President-Elect, I would work to build on this solid foundation. I would emphasize the following priorities:

- Addressing the practical, concrete needs of our members
- Supporting our Regional Organizations
- Making the Academy as accessible and responsive as possible

One of the things I like best about the Academy is the sense of openness, welcoming, inclusion and encouragement. Supporting and enhancing this tradition of mentoring would be my primary focus as President-Elect.

I am honored by this nomination. If elected, I'll do everything I can to represent our members, advocate for our patients, and promote the goals and objectives of the Academy.

PLEASE CHOOSE ONE OF TWO CANDIDATES

Candidate Biographical Information: **AACAP PRESIDENT-ELECT**

WARREN Y.K. NG, MD, MPH, DFAACAP



Current: Director of Clinical Services in Pediatric Psychiatry and Medical Director of Outpatient Behavioral Health at Columbia University Medical Center/New York Presbyterian Hospital and Associate Professor of Psychiatry at CUMC. **AACAP Experience:** Treasurer 2015-2017; Executive Committee 2013-2017; Chair of Assembly of Regional Organizations 2013-2015; Vice-Chair 2011-13; Co-Chair AACAP PAC Board 2018-present; Co-Chair of Bylaws Committee 2011-present; AACAP Rep to APA Assembly 2014-present; President of New York Council CAP 2002-04; Delegate to Assembly 1999-present; President of LAGCAPA 2005-07. **Education:** BSc, MD University of Toronto; Family Medicine McGill; Psychiatry SUNY Brooklyn; Child Psychiatry NYU; Public Psychiatry Fellowship Columbia University; Executive Healthcare MPH Columbia University.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Board Member Cicatelli and Associates

Board Member New York Council on Child and Adolescent Psychiatry

Financial Conflict: No

Family Member Conflict: No

Signed on 03/13/2019 by Yiu Kee Warren Ng, MD signed as Warren YK Ng

I am humbled and truly honored to be a candidate for AACAP President-Elect. I joined the Academy as a trainee in child and adolescent psychiatry over two decades ago and was embraced with warmth and generosity. I'm grateful for the mentorship, friendship, and opportunities within my professional home, where I have grown and discovered the beauty of child and adolescent psychiatry. Having this home within the house of medicine has taught me that we have a unique and important voice and role within medicine, healthcare, society, and our communities.

The experience that I bring to this position as President-Elect comes from within the Academy and beyond. I have served in the Executive Committee from 2013-2017, first as the Chair of the Assembly of Regional Organizations and then as Treasurer. I am grateful for those opportunities as they provided a unique perspective to learn about the Academy's breadth, depth, and complexity. Understanding the fiscal framework, while appreciating the diversity of our programs and membership, has given me ideas on how to tackle challenges and create new solutions. I started in the Council as your Assembly Representative in 2008 and was fortunate to serve for almost a decade on our governing board. This provided me an incredible chance to partner with our amazing AACAP staff and leadership and contribute in meaningful ways within task forces, committees, and initiatives. Seeking knowledge as a tool, I earned an Executive MPH in healthcare management to become more effective in leading a complex health system.

I am passionate about child and adolescent psychiatry and I've dedicated my career to serving a largely ethnic minority inner city community at a large academic medical center. I direct the child and adolescent psychiatry clinical services at the children's hospital and all outpatient behavioral health services at the medical center and community programs. I thrive on challenges and finding innovative solutions with limited resources in partnership with our communities to treat mental illness. Finding the synergy between research, clinical care, and training is what excites me. It is inspiring to leverage research and state of the art medicine to bring high quality evidence-based treatments into the real world. Our field depends on the power of research both on the bench and in our clinical settings. The discoveries in the neurosciences and genetics will inform our interventions for future generations. Teaching and inspiring medical students and trainees about child and adolescent psychiatry is invigorating and keeps our profession vital and strong.

Our Academy's greatest riches are its members, and we are over 9000 strong and growing. By building on a foundation of responsibility and accountability to our members and mission, we can demonstrate the value of membership and community. Hearing about how our Life Member Owls inspire and support our aspiring trainee medical students through mentorship grants is priceless. The Academy's pride rests in its present, future and past. Serving in the Assembly as a delegate and my regional organization as a board member since 1999 has taught me the importance of our grass roots and the realities of practicing child psychiatry across the country. Our members practice in solo offices, community-based organizations, academic medical centers, and everything in between. The Academy represents all of us, and collectively, we can work together to tackle the challenges of access and reimbursement while ensuring quality care.

My priorities for AACAP include:

- **Enhance the value of AACAP membership:** We are a volunteer organization and creating initiatives with the greatest impact to our members is critical. Providing support locally through our regional organizations and nationally through our central office allows us to meet the needs of all of our members.
- **Expand Workforce:** Developing new pathways to training and partnering through collaborations with our allied health providers will expand the reach of our treatment teams. Investing in wellness across the professional lifespan promotes resilience and longevity.
- **Invest in our Future:** Expanding our initiatives to inspire medical students and trainees to pursue child and adolescent psychiatry and then mentoring and supporting their career development ensures our future.
- **Promote Discovery:** Equipping our profession with science through a robust child mental health research agenda will inform practice and policy.
- **Increase Innovation:** Integrating and expanding innovative care models effective in integrated care and utilizing technology, such as telepsychiatry, will be critical in addressing access and patient experience.
- **Celebrate Diversity:** Our strength as an organization lies in our ability to promote diversity in gender, race, ethnicity, sexual orientation, and experience throughout AACAP. Having different perspectives allows us to share ideas that collectively enables us to find the best solutions. Inclusion and equity are integral to championing this process.
- **Strengthen Advocacy:** This is a critical time for healthcare and our profession. As our federal and state healthcare systems evolve, AACAP is the voice for child and adolescent psychiatry and the youth and families that we serve. The creation of the American Association of Child and Adolescent Psychiatry and the AACAP PAC has strengthened the impact of our advocacy efforts. Advocacy is such an integral part of our identity. Witnessing the power of partnership with our youth and families during the Legislative Conference has changed me forever. Our ability to support champions of children’s mental health in the Capitol allows us to better serve our mission and children.

My vision for the Academy is to be the premier voice for children’s mental health. I celebrate the vital mission of our Academy. Promoting the healthy development of children, adolescents, and families through advocacy, education, and research, and meeting the professional needs of child and adolescent psychiatrists throughout their careers has shaped my professional identity and has continued to inspire me every day.

I am moved to action by the words of Mahatma Gandhi, “If you want real peace in the world, start with children”. If elected, I will bring all of my passion, energy, dedication, and imagination to serve you and our Academy.

PLEASE CHOOSE ONE OF TWO CANDIDATES

Candidate Biographical Information: **AACAP SECRETARY**

CATHRYN A. GALANTER, MD, DFAACAP



Director, Child & Adolescent Psychiatry Fellowship, Visiting Associate Professor, SUNY Downstate, Brooklyn, NY ('11-); part time Private Practice ('01-). **AACAP National** Councilor-at-Large ('15-18); Committees: Consumer Issues Member to Co-Chair ('99-); Membership Drive ('01-04); Nominating ('11-13), Grants Oversight ('17-19); ADHD, Bipolar & Depression Med Guides ('07, '08, '13, '18); Annual Review Course Co-Director ('12-13); Taskforces: School Violence ('15-16), Foundation ('16-17), Crisis in Recruitment ('18-); Assembly ('15, '17, '18). **Regional** Board ('99-); President ('06-08); Committees: Training Co-Chair ('01-) & Pediatric Liaison ('07-12). **APA** Child Fellowship Founder & Chair ('02-18); Clinical & Public Health for DSM-5 ('12); Child Council ('11-14). **Education** MD, NYU; General & Child Residencies, Research & Kestenbaum Education Fellowships, Columbia Univ.

DISCLOSURES

Cathryn A. Galanter, MD

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Child and Adolescent Psychiatry Training Director, State University of New York (SUNY) Downstate **Financial Conflict:** Yes

Financial Roles and Organizations:

Organization

American Psychiatric Publishing

The Resource for Advancing Children’s Health (REACH) Institute,

Mini-Fellowship in Primary Pediatric Psychopharmacology (PPP)

Patient-Centered Outcomes Research Institute (PCORI)

Nature of Conflict

Royalties

Steering Committee and Faculty

Research Subcontract

Family Member Conflict: No

Signed on 03/25/2019 by Cathryn A. Galanter, MD signed as Cathryn A Galanter

I am honored to be nominated for the position of Secretary and committed to preserving and enhancing AACAP’s value for our members. AACAP supports us through education, advocacy, research, collaboration and as a professional community. I was recently elected Councilor-at-Large and worked with our leaders to address concerns raised through our assembly, committees and directly from members. I have the pleasure of treating children and adolescents and serving as an educator and researcher. My varied roles within and outside our Organization have prepared me for the position of Secretary. If elected, I will continue to address the needs of our diverse membership and focus on priorities of education and workforce.

Education: I have dedicated much of my career to education. I spent 15 years at Columbia University as a trainee, then researcher, then Kestenbaum Fellow for Training and Education. I applied theory-based methods to educating child and adolescent psychiatrists on best practices for treating aggression and training pediatricians in the assessment and treatment of children’s mental health. I completed an NIMH career development award, Improving Child Psychiatrists' Clinical Decision Making, studying the assessment of bipolar disorder. Now as Child and Adolescent Psychiatry Training Director at SUNY Downstate, I educate the future members of our field.

AACAP Roles: In addition to serving as Councilor-at-Large, I have co-chaired the Consumer Issues Committee, developing Facts for Families that members can use to inform families, professionals and the press, and Resource Centers to organize AACAP materials on conditions and direct members and families to high quality, expert-recommended materials. As a former Co-Chair of AACAP’s Annual Review Course and presenter at the Annual Meeting, I brought scientific and clinical updates to our members. As Past President of the Board of the New York Council and Training Committee Co-Chair, I have developed activities to educate and support fellows to become future leaders in our field. *Education of our trainees, members and families of the children we treat continues to be a central focus of our organization.*

Workforce: There are not enough child and adolescent psychiatrists in practice or entering our subspecialty. Our compensation must be improved. Working at a public university setting, I am familiar with challenges of recruitment faced across the county. I have lobbied the legislature to support initiatives to increase our workforce. I helped found a travel grant through the APA to recruit residents into our subspecialty. I am part of AACAP’s Task Force on the Crisis in Recruitment, examining the possibility of a straight from medical school path to child and adolescent psychiatry in order to increase the number of trainees entering our field. I have spent years training primary care pediatricians about the assessment and treatment of mental health. *Meeting the workforce shortage will take varied approaches. I hope to have the opportunity to develop solutions to these challenges as AACAP Secretary.*

PLEASE CHOOSE ONE OF TWO CANDIDATES

Candidate Biographical Information: **AACAP SECRETARY**

RAMA RAO GOGINENI, MD, DFAACAP



Head, Division of Child and Adolescent Psychiatry, Cooper Medical School of Rowan University; Medical Director, Capital Academy, a Juvenile Residential treatment facility for Delinquents; Medical Director, Pediatric collaboration project; Professor of Psychiatry, Cooper Medical School of Rowan University
Leadership positions-President, Philadelphia and Southern New Jersey ROCAP, 99-01; President Philadelphia Psychiatric Society (04-05); Delegate to AACAP Assembly; Member family committee (96-02); Member Diversity and Culture committee (10-14); Co-Chair Membership committee (12-present); Board member-AACAP-PAC (14-18); Chair, Program Committee, ROCAP (96-present); Chair, Alliance for Psychoanalytic thought of Psychoanalytic Center of Philadelphia (06-present); Chair, South Asian American Forum (96-present); Membership committee, APA (95-04); President; American Association for Social Psychiatry (11-13); Chair, Group for Advancement of Psychiatry, Global and IMG committee, 2016-present Community Service award, ROCAP; Daniel Blain Award of Philadelphia Psychiatric Society; Scientific Program committee -World Association for Social Psychiatry (16, 19)

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Past President, American Association for Social Psychiatry

Co-Chair, Alliance for Psychoanalytic Thought of Psychoanalytic Center of Philadelphia

Chair-Group for Advancement of Psychiatry-Committee on Global Psychiatry

Chair-South Asian American Forum

Financial Conflict: No

Family Member Conflict: No

Signed on 03/15/2019 by Rama Rao Gogineni, MD signed as Rama Rao Gogineni

My life experiences began in a small village in Southern India and were progressively enriched as I attended Osmania University, University of Pennsylvania, Medical College of Pennsylvania, Psychoanalytic Center of Philadelphia and the Family Institute of Philadelphia to complete my formal training.

I was introduced to the AACAP organization in 1995, when I was invited to chair the Program committee of Philadelphia ROCAP. Since then as part of the local regional council organization, I have worked to organize Annual Staples lecture, Career Day, Mock boards, the Annual Child & Adolescent Psychopharmacology & Psychotherapy conferences, and other educational, advocacy and social programs. My involvement with AACAP has become more substantial as a member of 1996 AACAP local arrangements committee, the family committee, diversity and culture committee, delegate to assembly, co-chair of membership committee and a board member of inaugural AACAP-PAC. In my work at AACAP I have especially enjoyed working on increasing the variety of constituencies of membership. It is my pleasure to connect like-minded presenters and weave their interests into topics of importance in our field. To that end, I have been a frequent presenter at annual meetings on topics such as culture, immigration, psychotherapy, fatherhood, psychopharmacology, and aggression. I am also fortunate to have mentored several trainees and younger colleagues in promoting their scholarly activities.

I feel fortunate to be an adopted son of America, and to work in the best profession, Child and Adolescent Psychiatry. It gives me the opportunity to integrate knowledge from biological, developmental, psychological, familial, social, and cultural domains framed within scientific and humanistic perspectives in order to treat and promote mental health of children and adolescents, ranging from the anxious child to the violent, sex offending adolescents.

For me AACAP has been the most treasured professional home providing opportunities for professional and personal growth and friendships. I feel indebted to the mentorship of many of AACAP leaders, including John Schowalter, Elizabeth Weller, Paramjit Joshi, Marylyn Benoit, Lawrence Greenhill, Ginger Anthony and many others, as well as to my patients and their families. What I have received from them, I hope I can give back to our future generations.

It is an honor to be nominated to serve as secretary of AACAP. It would be wonderful to serve with Gabrielle A. Carlson, MD, our President-Elect, executive committee and leadership, and support the advocacy of Integrated or collaborative care, the advocacy to ensure the health of children and families throughout the immigration process, to ensure insurance to patients with a chronic medical condition and co-occurring mental health or substance use disorders, gun violence, school safety and the shortage of Child and Adolescent Psychiatrists in the workforce and many other ongoing projects. If elected for this office, I will work with a strong voice on behalf of our profession and for the care of children and adolescents, their families and caregivers.

PLEASE CHOOSE ONE OF ONE CANDIDATE

Candidate Biographical Information: **AACAP TREASURER**

BENNETT L. LEVENTHAL, MD, DFAACAP



Current: Professor, Child & Adolescent Psychiatry, UCSF. Prof of Psychiatry, Yonsei University, Seoul; Irving B. Harris Professor of Child & Adolescent Psychiatry, *emeritus*. **Past:** LSU, BS 1972, MD, 1974. Resident: Gen'l Psychiatry & Child and Adolescent Psychiatry Fellow. Chief Fellow & Chief Resident-Duke; LCDR, US Navy 1978-80. Univ of Chicago 1978-2005: Trng Dir (1980-1988); C-L Dir (1980-82); OPD Director (1980-1985); Division Chief (1982-2004); Assoc Chair (1985-91; Chair (Interim) (1991-1998), Vice-Chair (1998-2004), Dir, Orthogenic School (2001-2004); Prof Univ of IL: Prof (2005-2009). Prof & Vice-Chair, Child & Adol Psychiatry, NYU (2009-2011); Deputy Director, Nathan Kline Inst (2009-2013). APA Disting Life Fellow. Fellow AACAP. AACAP Prog Cte Dep Chair (1978-2013); AACAP/NIDA K12 Mentor for 20 years; NBME 25 yrs.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Board Member, Brain Research Foundation;
Scientific Board Member, Child Mind Institute;

Financial Conflict: Yes

Financial Roles and Organizations:

Organization

Illinois Children's Healthcare Foundation
Janssen
CVS/Caremark
NIH

Nature of Conflict

Advisor/Consultant
Advisor/Consultant No remuneration for this effort
Advisor/Consultant
Research Funding

Family Member Conflict: No

Signed on 03/23/2019 by Bennett L. Leventhal, MD signed as Bennett L. Leventhal

It has been a privilege to serve as AACAP Treasurer for 2017-2019. I am honored by the nomination to serve a second term in this position of great trust. I pledge my effort and energy in working with the remarkable people serving on the Executive, Council and Assembly. Together, we will manage AACAP's resources and put them to the best use in support of clinical care, education, science and advocacy in Child and Adolescent Psychiatry. We are fortunate to have an ample reserve and ever-improving operating systems. However, we face many challenges on the horizon, challenges that we must be prepared to address with careful consideration and determination.

The current political and social environment continues to be a crisis for Child and Adolescent Psychiatry and puts our mission to care for children and families in jeopardy. We have long been concerned about the many children and families facing illness as well as war and economic strife. Now, there are dangers much closer to home with unprecedented assaults on the education, health, social justice, and social welfare systems. We have seen fundamental violations of the rights of children in distress who placed at greater risk by separation from the care of their families. Moreover, the proposed national budget will compromise research resources key to the unprecedented advances in our field while further disrupting the healthcare, social services, and educational safety net for children and families. These issues make AACAP all-the-more-important to us as individuals and professionals, as well as for the children and families we serve. The present times demand strength, courage, determination and true leadership; AACAP must lead by being thoughtful yet decisive as it develops the policies and actions that are crucial for our present and the future.

I am a proud Child and Adolescent Psychiatrist and long-time AACAP member. I thrive in my career as a practitioner, educator, and investigator. I have been active in professional medical organizations and served AACAP in a many roles: Deputy Chair of the Program Committee for 35 years; partner in developing AACAP's "Operating Principles," the first proactive management of commercial relationships among all professional medical organizations; founder of the Work Group on Research and the K12 initiative; and service on numerous committees, task forces, work groups, Presidential initiatives, and informal projects. As I have contributed to AACAP, it has contributed to me by providing professional growth and remarkable colleagues and friends. For this, I am grateful as this allowed me to personally meet and learn from many of you.

I have learned much as your treasurer. With this experience, I am confident that I can meet the demands of the current times support our shared professional goals and ambitions by managing AACAP resources. I will work diligently through the AACAP governance structure so AACAP organization serves and protects you while leading efforts to support professionals and systems essential for the best practices of child and adolescent psychiatry as an integral part of quality healthcare and other necessary resources for children and families.

PLEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP COUNCILOR-AT-LARGE**

ADRIENNE L. ADAMS, MD, MSc, DFAACAP



Director of Fellowship Training in Child & Adolescent Psychiatry, 2007-Present, Rush University in Chicago, IL, 2007-Present, CAP Outpatient Medical Director, Rush University, 2006-2018, chief clinical research physician for Child and Adolescent Psychiatry, Rush University, 2018-Present. **Leadership Experience:** American Association of Directors of Psychiatric Residency Training (AADPRT) Executive Council 2018-Present, Illinois Council of Child & Adolescent Psychiatry (ICCAP) President 2016-2018, ICCAP Treasurer 2007-2010, AACAP Assembly Alt/Delegate 2008-Present, Illinois Psychiatric Society (IPS), Board 2017-Present, AACAP Local Arrangements committee Monitors Chair 2019. **Relevant Experience:** PRITE Editorial Board, 2016-Present, National and Local mental health advocate for AACAP and APA, 2008-Present

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Executive Council, AADPRT for chair of Diversity and Inclusion Committee

AACAP Assembly delegate for Illinois

Financial Conflict: No

Family Member Conflict: No

Signed on 03/20/2019 by Adrienne L. Adams, MD signed as Adrienne Louise Adams

To quote one of my favorite lines, **“It was the best of times. It was the worst of times”** I feel this line describes many events occurring in our society. Child and adolescent psychiatry as well as health care in general, have seen many transformations occurring over the last several years. We have passed the Affordable Care Act which aspired to the noble goals that all would receive health care and leave no one uninsured. We have seen the passing of the federal law for Mental Health parity so that our patients are no longer penalized or stigmatized for seeking mental health care, and more school systems recognizing the need for early mental health interventions. However, in that same span we have seen children and youth being exposed to participating in school shooter drills, children being separated from their parents and placed in detentions, and dwindling funding which equals limited resources for public schools. The American Academy of Child and Adolescent Psychiatry has stood in the forefront advocating for us, our patients, our trainees and calling upon our legislators, community leaders, and judicial system for constructive changes for the future. As a child psychiatrist and a mom, I am passionate about caring for kids. Thus, my top priorities include: advocating for training programs to provide robust numbers of new child psychiatrists who are not only clinically strong but also culturally competent. One step in this endeavor has been the update in the common program goals (July 2019) that includes the diversity and inclusion initiative in recruitment and retention of faculty and trainees. Another priority is to continue to develop innovative options for additional patient care strategies. One recent development is collaborative care. It has demonstrated good evidence-based practice by using the principle of child psychiatrist working with our pediatric and family medicine colleagues to provide sound psychiatric care to a greater patient population. Last but not least in my priorities, **Activism**. Early in my career I learned the importance of federal and local advocacy and that grassroots efforts can make a difference. Therefore, as part of AACAP I will continue to be a champion for our patients on mental health needs. I will foster relationships with our congressional leaders to facilitate laws and bills that do no harm and are beneficial.

Therefore, my vision for Child Psychiatry and AACAP specifically is to build a wonderful and bright future for our kids and the up and coming child psychiatrist in the 21st century while using a multi-prong approach (innovation, evidence-based psychiatric care, advocacy).

PLEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP COUNCILOR-AT-LARGE**

GEORGE A. FOURAS, MD, DFAACAP



Career Posts: 1995- 2016 Psychiatric consultant to the Dept. of Human Services, City and County of SF (CCSF), 2016-17 Private practice, 2017- Present, LA County Dept. of MH, Continuum of Care Reform. **Leadership Exp.:** 2007- Present, San Francisco/ Marin Medical Society (SFMMMS) Delegate- CA Med. Assoc. House of Delegates, 2011 President, SFMMMS, 2014- 17 State of CA, Psych. Medication Guidelines expert panel. **Honors:** 2005 Distinguished Fellow APA, 2012 Proclamation: CCSF Board of Sup. Leadership & Service for Public Health, Cert. of Recognition: Senator Darrell Steinberg Senator Pro Tem and Assembly member Fionna Ma, Speaker Pro Tem. **AACAP Leadership Exp.:** 2000 President, NC ROCAP, 2005- 18 Co-chair; Adoption and Foster Care Comm., 2013- Present, Liaison to AAP Council on Foster Care, Adoption and Kinship Care.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

California Psychiatric Assoc. PAC Chair

Southern California Psychiatric Assoc. President-elect

California Medical Assoc. Member- CALPAC Board of Directors

Financial Conflict: No

Family Member Conflict: No

Signed on 03/21/2019 by George Alex Fouras, MD signed as George A. Fouras, MD DFAACAP

During my child psychiatry fellowship, and before organized medicine began talking about mentorship, I was fortunate to have one of my professors take an interest in my professional development. We began with his encouragement to take a position with the California Psychiatric Association as an MIT representative to the APA Assembly. On another occasion, he allowed me to accompany him when he went to a meeting with a California state legislator. After graduating from my fellowship, I travelled North to the SF Bay area to become a medical director of an innovative program that combined child mental health and child welfare. San Francisco County was the first government agency to initiate a psychotropic medication oversight program.

As time went on, in addition to being active with Northern California ROCAP, and the California Psychiatric Association, I became more involved with the broader house of medicine, joining the San Francisco Medical Society along with the California Medical Association. Over time, I took on more leadership roles, becoming part of our delegation to the CMA House of Delegates and eventually becoming the first child psychiatrist as President of the SFMS in its 150-year history.

Perhaps one of the chief things I have learned throughout my career is the benefits of building coalitions and working together with other groups to achieve our common goals. My first, and only committee, that I ever belonged to at AACAP was with Adoption and Foster Care, eventually becoming a co-chair. For those of you who know me already, this is my passion. In those early years, child welfare issues did not garner much attention from society, but over time, efforts were made by society to address disparities. AACAP was quick to take a leadership role, as reflected in the presence that AACAP has as a leader in children's mental health policy development and service delivery. As an example of this, AACAP was the first child mental health/medical organization to develop a practice parameter for children involved with child welfare.

It is incontrovertible that the practice of medicine will change in general, and psychiatry specifically, over time. This will be due to the benefits of research moving us forward and public policy changing. How we approach and adapt to these changes will be important.

As AACAP has continued to form closer relationships with the American Academy of Pediatrics, I was asked to fill the role of liaison to the Council on Foster Care, Adoption, and Kinship Care. Working with our partners both medical, legislative, and allied health organizations, will continue to be an important avenue for AACAP to promote our goals. I believe that my experience within the Academy and with our partners would serve AACAP well. It would be an honor for me continue my service to the Academy as your councilor-at-large, as I continue my advocacy efforts with our partners in the care of youth.

PLEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP COUNCILOR-AT-LARGE**

ANITA R. KISHORE, MD, DFAACAP



Leadership: Clinical Associate Professor, Stanford School of Medicine, Division of Child and Adolescent Psychiatry; Co-Director, Stanford Klingenstein Medical Student Mentorship Program in Child Psychiatry. **AACAP Experience:** Work Group on Training and Education; Co-Chaired the Early Career Psychiatrist Committee. **ROCAP Experience:** President, Northern California ROCAP and National Assembly Delegate; Program Chair, NC-ROCAP Annual Meeting; Northern VA Representative, CAPS-GW. **Honors:** Fulbright Global Scholar Award; Chairman’s Award for Excellence in Education, Distinguished Fellow of AACAP and APA. **Training:** Psychiatry, Western Psychiatric Institute and Clinic; Child Psychiatry, Yale Child Study Center. **Experience:** Independent Private Practice 2013-present; ABPN Board Examiner; Stanford School of Medicine Faculty Senate.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Co-Director, Stanford Klingenstein Medical Student Mentorship Program in Child Psychiatry

Clinical Associate Professor, Stanford School of Medicine, Division of Child and Adolescent Psychiatry President and National Assembly Delegate, Northern California Regional Organization of Child Psychiatrists (NC-ROCAP)

Financial Conflict: No

Family Member Conflict: No

Signed on 03/21/2019 by Anita Kishore, MD signed as Anita Kishore

Worldwide 10-20% of children experience mental disorders and even resource-rich nations like our own lack the number of child psychiatrists needed to treat the increasing number of children suffering from psychiatric illness. Mentorship has long been postulated to have a positive impact on the numbers of trainees who choose any given clinical specialty, and child psychiatry is no exception. I feel honored to serve AACAP, whose commitment to children’s mental health causes extends to supporting mentorship programs for those interested in the field of child psychiatry, with the ultimate goal of enhancing recruitment into the field and increasing access to child psychiatric services for youth. I have had a rewarding fifteen-year relationship with the Academy, during which I have served in a number of capacities.

My passion as a child and adolescent psychiatrist is in innovation in education and advocacy. My relationship with AACAP started during general psychiatry residency and provided a ‘place’ for me to receive knowledge and mentorship that has contributed to my professional and personal development and by extension that of the many fellows, residents and medical students whom I have been honored to teach and mentor.

In 2004 I was chosen to serve on AACAP’s Work Group on Training and Education. I served in this capacity through 2010. It was in this role that I developed my interest in education and mentorship. Throughout the early years of my career I was also involved with AACAP through my role as Co-Chair of AACAP’s Early Career Psychiatrist Committee. In addition, I was recently awarded a Fulbright U.S. Scholar grant to build an international collaborative mentorship network in child psychiatry, with the goal of increasing access to child psychiatric services worldwide. I have also served AACAP regionally, through the Assembly, initially as a member of the Executive Committee for CAPS-GW, and currently as President of the NC (Northern California)-ROCAP. In my role as President of NC-ROCAP, I recently planned, organized and hosted our most successful annual meeting to date, with a record-setting attendance.

I have attended the annual meeting of the Academy every year since becoming a member in training – presenting and chairing presentations in numerous categories. Most recently, at our 65th Annual Meeting in Seattle, I chaired a workshop on Unconscious Gender Bias in Child Psychiatry. Attendees described their appreciation for a workshop that helped to advance a culture and climate of diversity, inclusion and wellness in medicine.

As a child psychiatrist who has benefited from stellar professional opportunities and mentorship in large part afforded by the Academy, I now have a dual role, to share the skill and knowledge I have gained, while continuing my journey of professional development through the exchange of ideas and innovation in child and adolescent psychiatry. I would be deeply honored to serve the Academy as a Councilor-at-Large.

PEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP COUNCILOR-AT-LARGE**

JOHN W. PRUETT, MD, DFAACAP



2016-Present: Division and Training Director, Child & Adolescent Psychiatry, University of Nevada, Reno; Medical Director, West Hills Behavioral Hospital, **2000—2016:** Division and intermittently Training Director, Child & Adolescent Psychiatry, University of Mississippi (MS) Medical Center
Experience: AACAP Art and Native American Committees, President (2008-2012, 2014-2016) and Assembly Delegate (2006-2016) MS Society of Child and Adolescent Psychiatrists, Assembly Delegate NCCAP (2018), American Association of Directors of Child and Adolescent Psychiatry, 2003-Present, Secretary-Treasurer 2016-2018, Councilor-at-Large to Past-President of the MS Psychiatric Association 2003-2015, State Advisory Group, OJJDP, Gubernatorial Panel 2003-2016, Co-Chair Grant Committee 2008-2010, Advisor MS Supreme Court, Epic Oversight Committee.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Medical Director, West Hills Behavioral Health Hospital

Financial Conflict: No

Family Member Conflict: No

Signed on 03/18/2019 by John W. Pruett, MD signed as John Pruett, MD

I am extremely honored to be nominated as a candidate for one of the positions of Councilor-at-Large for AACAP. I've had an interest specifically in Child and Adolescent Psychiatry since soon after high school and while I flirted with the idea of other choices, being a CAP was always my first. My path began soon after realizing that working in a bar was not conducive to making the grades required for admission to medical school, and I was lucky enough to be recruited as a Psychiatric Technician (having been told I was easy to talk to and having turned down the opportunity to apply for a position as a Space Camp Counselor). So I entered medical school with a keen interest in the neurosciences, and having some idea what I was getting into. I love my jobs, both clinical and academic, and I tell my medical students and residents we actually get paid to play at work!

These are exciting, and challenging times for Child and Adolescent Psychiatry. I feel Child Psychiatrist have done a better job than most developing multidimensional assessments, and if you haven't heard "Psychiatry is the new Derm" due to a consistent increase in applicants to General Psychiatry Training Programs. Wellness and resilience are frequently talked about around medical schools and residency training programs, mental health parity has improved and telemedicine is improving access to quality mental health treatment.

However, we continue to have difficulty filling Child and Adolescent Psychiatry Fellowship spots, medical students and physicians still have suicide rates two to three times that of the general population, and there continue to be marked inequities in the delivery of mental health services. There are relatively fewer centers of research for Psychiatry, especially Child and Adolescent Psychiatry and Medical Schools are restructuring their curricula (changing the century-old Flexner Model) partially in response to increased competition for residency slots which has resulted in other unintended consequences. And as always the insurance industry and more specifically managed care organizations continue to attempt to erode the rights of patients.

Yet though we are few in number, I am optimistic about the future of Child and Adolescent Psychiatry. We are creative, motivated and tend to play well with others. AACAP is the leading voice advocating for children's mental health and if elected I hope to continue to support that work in a new role while learning from the members and leadership of AACAP.

PLEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP NOMINATING COMMITTEE MEMBER**

ERAKA BATH, MD



She is an Associate Professor in the Division of Child and Adolescent Psychiatry and the Associate Chair for Justice, Equity, Diversity and Inclusion at the UCLA Neuropsychiatric Institute in the David Geffen School of Medicine. Board certified in child and adolescent, adult and forensic psychiatry, she obtained her medical degree at Howard University; completed general psychiatry training at Saint Vincents Hospital in Manhattan, an affiliate of New York Medical College, and fellowships in child psychiatry and forensic psychiatry at the NYU School of Medicine. She has a long-standing interest in health care disparities; minority and community mental health, with particular interest in underserved youth involved in the juvenile justice and foster care systems. She is a funded researcher in the area of juvenile justice, focusing on youth impacted by commercial sexual exploitation. She is currently the Co-Chair of AACAP's Children and Law Committee and has been active on that committee for a number of years.

DISCLOSURES

Leadership Roles: No

Financial Conflict: No

Family Member Conflict: No

Signed on 01/23/2019 by Eraka Bath, MD signed as Eraka Bath

MATTHEW G. BIEL, MD, MSc, DFAACAP



I am very honored to be considered for this important role with AACAP's Nominating Committee. I serve as the Division Chief of Child and Adolescent Psychiatry and Associate Professor of Clinical Psychiatry and Pediatrics at Georgetown University School of Medicine/MedStar Georgetown University Hospital. I am currently Co-Chair of AACAP's Committee on Health Promotion and Prevention, and previously served on the Committee on Training and Education and the Committee on Collaboration with Medical Professionals. My clinical efforts and research focus on understanding the impact of adversity and stress upon children and families and improving access to mental health supports for underserved children and families through interventions based in primary care, community, and school settings. My relationships with fellow AACAP members are one of the great joys of my professional life, and I am eager to contribute to our Academy and to work to advance AACAP's role as a champion for kids and families.

DISCLOSURES

Leadership Roles: No

Financial Conflict: No

Family Member Conflict: No

Signed on 11/20/2018 by Matthew Graham Biel, MD, MSc signed as Matthew Biel

PLEASE CHOOSE TWO OF FOUR CANDIDATES

Candidate Biographical Information: **AACAP NOMINATING COMMITTEE MEMBER**

PETER T. DANIOLOS, MD



Dr. Daniolos is a Clinical Professor in Child and Adolescent Psychiatry at the University of Iowa Stead Family Children's Hospital, where he serves as the Training Director of the Child and Adolescent Psychiatry Residency Training Program and provides clinical evaluations as part of the University of Iowa Autism Center. He also runs the Gender Evaluation Program in Child and Adolescent Psychiatry, affiliated with the University of Iowa LGBTQI program. Prior to moving to Iowa, he served as the Training Director for the Child and Adolescent Psychiatry fellowship at Children's National Medical Center/The George Washington University in DC, and the medical director of the Center for Autism Spectrum Disorders. Born and raised in Bismarck, ND of Greek immigrant parents (his father was an internist at Q&R Clinic/The Bismarck Hospital), he did his Psychiatry residency at Duke, followed by his Child and Adolescent Psychiatry Fellowship at Harvard/The Cambridge Hospital.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

ACGME- RC Psychiatry

ABPN- CAP Certification Committee

AACAP- Program Committee

Financial Conflict: No

Family Member Conflict: No

Signed on 12/11/2018 by Peter T. Daniolos, MD signed as Peter T Daniolos, MD

JOHN SARGENT, MD, DFAACAP



I am the Director of Child and Adolescent Psychiatry at Tufts Medical Center and Professor of Psychiatry and Pediatrics at Tufts University School of Medicine and have held this position for the past 10 years. I have been a practicing Child and Adolescent Psychiatrist for over 35 years and have held a variety of responsibilities including inpatient, outpatient and consultation/liaison. I have also been involved in psychiatric education throughout my career. I have had the privilege of teaching and developing programs internationally, having taught in 18 countries. I am also known for my work as a family therapist and for encouraging attention to families in child and adolescent psychiatry practice. I have been active in the Academy for over 30 years. I have been co-chair of the Training and Education Committee and now co-chair of the Family Committee. The Academy has also been where I have brought my work and thoughts annually at our meeting. I would be honored to serve on the Nominations Committee.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Secretary American Association of Directors of Child and Adolescent Psychiatry

Treasurer Global Alliance of Behavioral Health and Social Justice

Financial Conflict: No

Family Member Conflict: No

Signed on 12/13/2018 by John Sargent, MD signed as John Sargent, M.D.

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PSYCHIATRY

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