

AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY

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

2018 AACAP ELECTION

Candidates' Information Booklet

COUNCILORS-AT-LARGE (*choose 2 of 4*) *Mary S. Ahn, MD*
Boris Birmaher, MD
David C. Rettew, MD
Sala S. Webb, MD, CPH

NOMINATING COMMITTEE (*choose 2 of 4*) *William Arroyo, MD*
Sandra L. Fritsch, MD, MEd
Wun Jung Kim, MD, MPH
Kaye L. McGinty, MD

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

MARY S. AHN, MD



Director of Residency Training in Child/Adolescent Psychiatry 2009-present, Vice Chair of Academic Affairs and Career Development 2015-present, Associate Professor of Psychiatry and Pediatrics at University of Massachusetts Medical School. Private practice in school consultation and combined psychotherapy/psychopharmacology 2003-present. AACAP Experience: Co-Chair, Psychotherapy Committee (2013-17); CME Committee (2010-present); Presidential Task Force on Clinical Essentials (2017-present); Distinguished Fellow. Relevant Experience: PRITE/Child PRITE Editorial Board 2014-present; Educational Grant Funding through DMH, LEND (HRSA), and AACAP Abramson Fund; AACAP Pilot Research Award; ICF-credentialed career coach. Education: Fellowship/Residency in Child Psych/Psych at MGH/McLean; MD University of Illinois at Chicago.

DISCLOSURES

Leadership Roles: No

Financial Conflict: No

Family Member Conflict: No

Signed on 03/05/2018 by Mary S. Ahn, MD signed as Mary Ahn

AACAP holds a special place in my heart. I “grew up” within the organization, initially as a medical student fortunate to receive mentorship in child psychiatry (AACAP Jeanne Spurlock and James Comer Minority Research Fellowships) at both the University of Illinois at Chicago and UCLA. These amazing mentors role-modeled the value of clinically-informed research, teaching and team collaboration. Without a doubt, the AACAP experience in medical school influenced my decision to become a child psychiatrist, and to value mentoring, training & education, and to “give back” through active membership and service to AACAP.

My professional path includes diverse clinical, educational, research and administrative experiences which has allowed me to be mindfully present as both a child psychiatrist and mother. I have stayed involved in academics while practicing as a therapist/prescriber for youth with complex psychiatric issues and as a consulting school psychiatrist. The work experiences in the public and private sector have fostered my appreciation for the multiple roles and identities of child psychiatrists. As a CAP Residency Program Director and Vice Chair for Academic Affairs and Career Development, I study and advise on the ever-changing workforce issues and training needs of both residents AND faculty. I listened to my passion for developing others’ careers, and this became a source of professional rejuvenation to also become a coach mentor to address physician resiliency/burnout, organizational change, and the typical challenges in the career development cycle (early, mid- to late career and staged retirement). Active listening and awareness of systems while also holding people empathically accountable are critical as a clinician, residency training director and coach mentor. I continuously strive for these ideals and believe that these skills can be developed in others. I am optimistic that through the AACAP community, child psychiatrists can find purpose and meaning in their daily work despite the challenges that we face regarding training needs for trainees and practicing CAPs, reimbursements, trade issues, professional isolation, recruitment/retention and engagement.

AACAP provides a wide range of resources *Across the Career Lifespan* from medical student to Life Member. AACAP has grown both in membership numbers as well as in defining “what do child psychiatrists do?” If given the opportunity, I will work hard to listen and learn from our diverse membership to fairly represent and advocate our interests in liaison with AACAP leadership and staff. Education and training never ends, making AACAP at any age a source of vitality and nurturance. I am energized and ready to embrace both the advances as well as natural growing pains of our organization in order to support our profession. In summary, I am both honored and excited for the opportunity to be considered for Councilor-at-Large. I reflect with gratitude how AACAP and the mentors within this academy have contributed to my professional and personal development and hope to continue to “pay it forward!”

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

BORIS BIRMAHER, MD



I am Professor and Endowed Chair in Psychiatry at the University of Pittsburgh where I have been working for 30 years as a director of inpatient/outpatient clinics. I trained in adult psychiatry in Israel and Albert Einstein School of Medicine and in child psychiatry at Columbia University, NY. I have directed numerous NIMH-funded studies and have published over 400 articles mainly on the phenomenology, course, biology, and psychosocial and pharmacological treatment of mood and anxiety disorders. Also, I do extensive clinical work teaching, and administration. I am the AACAP Chair of the Program Committee (until 2019) and in the past, a member of the JAACAP editorial board. I have received several honors including resident teaching awards, “Health Care Hero” by parents, APA and AACAP Distinguished Fellow, Brain and Behavior Colvin Prize for Mood Disorders Research, and the 2014 APA Ittleson Award for Research in Child and Adolescent Psychiatry

DISCLOSURES

Leadership Roles: No

Financial Conflict: Yes

Financial Roles and Organizations

Organization Nature of Conflict

National Institute of Mental Health Research Funding

Random House, Inc. Royalties for publications.

Lippincott Williams and Wilkins Royalties for publications.

Family Member Conflict: No

Signed on 04/6/2018 by Boris Birmaher, MD signed as Boris Birmaher

It is an honor to be considered for Council at Large. My broad background and experiences are characterized by diverse collaborations and integrative approaches and have allowed me to develop expertise in several areas of Child Psychiatry. I maintain extensive clinical, research, administrative, and educational roles, which contribute to my unique perspective of the field, and ensure that I am in touch with the values and priorities relevant to Child Psychiatry, including and beyond the research community. Moreover, I have established and nurtured meaningful collaborative efforts internationally.

Since residency, I have been actively involved in the psychiatric diagnosis and treatment of individuals across the lifespan, from preschool through adulthood. Although my research has mainly focused on youth with mood and anxiety disorders, I have personally assessed and treated individuals with many types of disorders and have worked in inpatient and outpatient clinics as well as general adult and pediatric hospitals in cities and rural areas.

My research work and clinical practice with patients and families keep me attuned to the ongoing struggles they face as they cope with mental illness. This, in addition to my teaching and supervising trainees, keeps me aware of the importance of collecting and disseminating relevant information to educate patients, families and the professionals who treat them. I am also familiar with many of the issues that clinicians encounter in their practice about which they seek up-to-date information.

Furthermore, as the Chair of the AACAP Program Committee, a position that I have held for almost 4 years, I have had the opportunity to work with and address the needs of child psychiatrists with varied interests and expertise (e.g., services, managed care, teaching).

With the above experiences I would bring a wide perspective to the Council and make valuable contributions to discussions regarding the future of our field. For example, dealing with ongoing taboos regarding mental illness, particularly related to violence; informing the public and politicians about the advances in our field and the to promote new legislation (e.g., increase funding and services) aimed at improving the mental health of children and their families, and fostering research to identify the early signs and to prevent or at least delay the onset of psychiatric disorders. Also, since Psychiatry does not yet have biomarkers that inform diagnoses and treatment, the accurate diagnosis of a child is crucial for providing the best available treatments for a specific condition. Unfortunately, many children referred to our clinic for second opinions have been inadequately assessed and inaccurately diagnosed, resulting in treatment with unnecessary multiple medications, or being incorrectly labeled “treatment resistant”. Finally, most of our existing treatments are based on results obtained for groups of children, but they do not represent an individual’s response to treatment. Thus, similar to what is done in other areas of medicine (e.g., cardiovascular illnesses, cancer), we should promote research to develop personalized treatments based on the characteristics of a child, his/her family and his/her environment.

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

DAVID C. RETTEW, MD



Current Positions: Training Director of Child & Adolescent Psychiatry Fellowship Program and Director of the Pediatric Psychiatric Clinic at the University of Vermont Medical Center. **AACAP Experience:** JAACAP Editorial Board (2011-2016); Health Promotion and Prevention Committee Member; JAACAP Connect Advisory Board; Invited Mentor for AACAP Conference Trainee Program. **Other Experience:** NIH K Grant awardee; Researcher in child temperament; Author of *Psychology Today* blog “ABCs of Child Psychiatry” and book *Child Temperament: New Thinking About the Boundaries Between Traits and Illness*; Course Director for Child Psychiatry in Primary Care Conference. **Education:** BA-University of Pennsylvania; MD-University of Vermont; General and Child Residencies at Mass General/McLean, Harvard Medical School

DISCLOSURES

Leadership Roles: No

Financial Conflict: No

Family Member Conflict: No

Signed on 03/10/2018 by David C. Rettew, MD signed as David Rettew

Thanks for considering me to be one of your Councilors-At-Large! I’m very excited about this prospect, as AACAP has been a tremendously important organization for me over the years. I’m passionate about seeing AACAP rise to its full potential.

Like many of you, I’ve worked in many different capacities throughout my career, and have enjoyed trying to embody the “quadruple threat” of working in clinical care, research, education, and public policy. I started primarily in research, looking at the interaction between child temperament and psychiatric disorders. I’ve also run our outpatient clinic for over 15 years. In 2008, I created a new child psychiatry fellowship program at the University of Vermont that emphasizes working with the entire family and incorporating wellness and health promotion into clinical care as part of a model called the Vermont Family Based Approach. I also created a new annual conference called Child Psychiatry in Primary Care to teach practical information to our primary care colleagues. Lately, I’ve become more active in public policy, having testified numerous times to legislative committees on a variety of topics.

AACAP has been a huge part of my career and I’m excited about contributing more to this wonderful group. For 6 years, I served on the editorial board of *JAACAP* and now am an advisor to *JAACAP Connect*. I’ve also been a member of the Health Promotion and Prevention Committee. For the past decade, I’ve been asked to be a mentor in AACAP’s Mentorship Program to medical students, residents, and fellows during the annual meeting.

Let me tell you a few things that I believe are very important for AACAP and our field overall. First, *I strongly believe that psychiatry needs to be the field about mental health, not just mental illness.* This doesn’t mean we abandon tried and true interventions that have worked for decades, but it does imply expanding our scope and our toolbox. Second, I think *we need to get out of the ivory tower and do more in this age of information and misinformation to disseminate good science-backed information while refuting nonsense.* Towards this goal, I am an author of a blog for primary care clinicians and another for the public called the “ABCs of Child Psychiatry” which is hosted by *Psychology Today* and has been viewed over 350,000 times. I also write a regular column called “Lab to Smartphone” in *JAACAP Connect* on this theme. These efforts and more are supported by an active social media presence (you can find me on Twitter at @PediPsych). Third, I believe we need to *be proactive about ensuring child psychiatry’s huge role to play as our country continues to experiment with new systems of healthcare delivery.*

Over the years, I’ve learned to be careful about what I agree to do in order to make sure that I have the time, skills, and enthusiasm necessary to do excellent work. Being one of your Councilors-At-Large would be a great privilege, and I’d really appreciate your vote.

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

SALA S. WEBB, MD, CPH



Sala Webb currently serves as the Children's Medical Administrator of Mercy Maricopa Integrated Care. In this role, she is responsible for ensuring the clinical quality and integrity of the behavioral health system of care for the under 18 Medicaid recipients of the Phoenix metro area. Dr. Webb held prior appointment as Assistant Professor of Psychiatry at the Virginia Commonwealth University; and was a psychiatric consultant to the United States Army Medical Department European Regional Medical Command in Bavaria, Germany. Since joining AACAP as a trainee in 2007, she served until 2017 on the Diversity & Culture Committee and is a co-author of the Practice Parameters on Cultural Competence. Dr. Webb was a column editor for the AACAP News. She has been active in both the VA & AZ Regional Organizations.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Children's Medical Administrator, Mercy Maricopa Integrated Care

Appointee, Human Services Commission, City of Phoenix

Financial Conflict: No

Family Member Conflict: No

Signed on 03/10/2018 by Sala Webb, MD signed as Sala Webb

Greetings AACAP Colleagues!

I am truly thankful and excited to be before you as a candidate for AACAP Councilor-at-Large!

I consider myself an AACAP baby. I found mentors who encouraged me not only to attend the annual meetings as a trainee, but to present and actively participate in the organization's workings. My time on the Diversity & Culture Committee exposed me to exemplary leaders who embody the practice of grooming future successors. I was never made to feel that I was "only" a resident or an early career psychiatrist- but that I was a colleague with a unique and relevant perspective. I have moved around a lot, but this has afforded me the opportunity to be a part of multiple state and local chapters. I see how important AACAP is to the child psychiatrist in private or community clinic practice. I appreciate how this single organization represents various things to different people; but it is through the cohesion of vision and purpose- the best possible outcomes for children and families- that we all can agree.

In my day job, I am constantly balancing the influence of population health with individual care needs. As AACAP Councilor, I anticipate functioning in a similar role: advocating for the Child Psychiatry Collective while ensuring the prosperity of the Child and Adolescent Psychiatrist. This is done working as a liaison between the national Committees and the Executive Council. With your assistance, I will strive to:

- **Keep AACAP Welcoming.** This is one of our strongest assets at all levels of the organization, from the annual meeting to the Regional Organizations. This likely had something to do with why you came and are still around. We need to make sure this does not change.
- **Bloom Where Planted.** This is my challenge to each individual AACAP member, me included. You don't need to be the CMO of a hospital, a Department Chair or have three books to your name. As a Child and Adolescent Psychiatrist, you are the SME- the Subject Matter Expert- right where you are. We need to empower you to own and exert your sphere of influence, whether education or advocacy, in the way that is most meaningful to you.
- **Beef up the Sandwich.** We are extremely fortunate to have great elders who have blazed trails and blasted rocks for us. We are actively working to recruit and foster the pipeline that will fill our ranks. We have some good bread. Let us not forget the meat and toppings that make the sandwich filling and tasty. The need for mentoring does not dissipate because you are more than 7 years out of training. This career phase often coincides with challenging life stages and could be a vulnerable point to us losing members. Let's support them. Let's bring them back home.

I am grateful to the Academy for its influence in my professional development and for you as colleagues. I look forward to serving you as Councilor-at-Large. Hope to see you in Seattle!

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

WILLIAM ARROYO, MD



Medical Director of Children's System of Care, Los Angeles County, DMH; Clinical Assistant Professor of Keck Univ. of Southern CA, School of Med, Dept of Psychiatry; PI of three SAMHSA SOC awards; AACAP Council (98-01); AACAP Advocacy Committee; So. CA ROCAP Asm Rep; served on AACAP Committees: Chair, Task Force on Juvenile Justice Reform; Co-chair of Comm on JJR; Task Force on Recruitment; Adolescent Psychiatry; Diversity and Culture; Committee on Advocacy; Campaign for America's Children; Medical Delegation to Cuba. Former Pres. of CA Acad CAP; former Pres. So. CA ROCAP. Eliminating MH Disparities Advisory Comm to SAMHSA. DSM IV Advisory Groups on Disorders First Usually Diagnosed in Infancy, Childhood and Adol, and on Culture and Diversity. Ad Hoc Review Board, NIMH. Examiner, ABPN. Peer Reviewer of J Child and Family Studies, JAACAP, J of APA. CA Commission on Juvenile Justice; CA Rehabilitation Oversight Board (prisons); Advisor to Rsch Ctrs at Georgetown, U So Fl, Portland St U.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

Pres., CA Psychiatric Association

Board, County Behavioral Health Directors Association

Board, CALMHSA

Board, CA Acad of Child & Adol Psychiatry

Board, AIDS Healthcare Foundation

Financial Conflict: No

Family Member Conflict: No

Signed on 03/01/2018 by William Arroyo, MD signed as William Arroyo

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

SANDRA L. FRITSCH, MD, MEd



Being selected as a candidate for the Nominating Committee is a real honor. I have been a member of AACAP for over 25 years. The support I've received from the Academy has helped guide my professional development, allowed me to develop a network of highly valued colleagues, and provided resources to support my clinical work. Having served on the Physically Ill Child Committee, Liaison with Primary Care and Allied Professionals Committee, Consumer Issues Committee, and the Advocacy Committee, I have a window into the mission and complexity of AACAP and am committed to supporting AACAP's support of its members during an uncertain time in health care delivery and medical education. My personal career has included working at the interface of pediatrics and child psychiatry, having been a training director for 10 years, and working at all levels of care in a variety of public and private settings. Thank you for this opportunity.

DISCLOSURES

Leadership Roles: Yes

**Leadership Roles and
Name of the Organization:**

Medical Director, Pediatric Mental Health Institute, Children's Hospital Colorado

Financial Conflict: No

Family Member Conflict: No

Signed on 12/06/2017 by Sandra L. Fritsch, MD signed as Sandra L Fritsch

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

WUN JUNG KIM, MD, MPH



The AACAP leadership of different eras has valued my contribution to AACAP and has appointed me to multiple components, beginning in 1983 although I was never elected to any office. I have served as a member of more than a dozen standing, ad hoc and award committees and as Editor of AACAP News, and as co-chair of the Taskforce on Workforce Needs, and currently the International Relations Committee, etc. Professionally, I have been a career teacher, having served as a division director in Ohio and now at Rutgers, NJ as well as a training director, clinician and advocate. I have been around for some time and know the organization and members well. My contribution now would be to discover talented members to lead us and help them make our professional home thrive and be useful to our profession, society and children/families we serve. Thanks for your support.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

AACAP IRC co-chair,

Professor and Director

Child and Adolescent Psychiatry

Rutgers University/RWJ Medical School

Financial Conflict: No

Family Member Conflict: No

Signed on 11/06/2017 by Wun Jung Kim, MD, MPH signed as Wun Jung Kim

PLEASE CHOOSE TWO OF FOUR CANDIDATES

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

KAYE L. MCGINTY, MD



There are many opportunities for our members and organization to contribute to the national and regional conversations regarding the needs of children and families, including mental health care. It is vital to have a diverse group of voices contributing to this conversation. So, the choice of leaders to guide AACAP is of the utmost importance. My experience in AACAP and other organizations has given me a knowledge of our members and the needs of the field. In AACAP I have served as the Co-Chair of the Community-Based Systems of Care Committee, Councilor at Large on AACAP Council and Assembly Delegate. In the North Carolina Council of Child and Adolescent Psychiatry I have served in multiple leadership positions for 18 years. At East Carolina University, I have served as the Training Director for Child and Adolescent Psychiatry and been a consultant in multiple child serving systems. I would be honored to serve on the AACAP Nominating Committee.

DISCLOSURES

Leadership Roles: Yes

Leadership Roles and Name of the Organization:

North Carolina Council of Child and Adolescent Psychiatry, delegate to Assembly

Brody School of Medicine at East Carolina University, Professor of Child and Adolescent Psychiatry

Financial Conflict: No

Family Member Conflict: No

Signed on 12/21/2017 by Kaye L. McGinty, MD signed as Kaye McGinty

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