At the end of May, our nine Global Mental Health (GMH) Program faculty members gathered to develop a strategic plan that articulates for the coming years our GMH mission, vision, educational and research strategies, goals, and metrics for assessing outcomes. Why is a new strategic plan needed? Quite simply, our GMH Program has grown so large that it requires one.

Now in its twentieth year, our GMH Program has grown organically, shaped over time by the personal commitments and special expertise of different faculty and residents, each of whom has expanded its scope both in new topics and new countries. Washington has provided a fertile environment for the growth of our GMH Program with physical proximity to NIMH, governmental agencies, non-governmental organizations, and communities with over a hundred languages and national identities among their members.

"With half of our faculty identifying their professional work as global mental health, it is unlikely that any other psychiatry department can claim such a broad commitment."

Professor Vikram Patel has defined global mental health as the “study and practice that places a priority on improving mental health and achieving equity in mental health for all people worldwide.” We have interpreted that definition broadly, creating a big tent that has encompassed mental health services for immigrants and refugees, programs of recovery for political torture-survivors, our Human Rights Clinic that provides psychiatric evaluations in support of political asylees, humanitarian missions to global disasters and complex emergencies, programs to integrate mental health into primary care in low- and middle-income countries, development of brief resilience-building clinical interventions, programs to reduce stigma and to improve access to mental health services, and, most recently, use of global mental health strategies to address poor mental health in rural America. Psychiatric education has been at the heart of our GMH Program, with multiple published curricula for psychiatric residencies. Signature achievements along the way have included the 2005 American Psychiatric Foundation Award for Advancing Minority Mental Health for our immigrant and refugee programs in Falls Church, Virginia, and the 2016 Creativity in Psychiatric Education Award from the American College of Psychiatrists for our

(Continued on page 2)
global mental health residency curriculum. With our Charles and Sonia Akman Professorship in Global Psychiatry, held by Dr. Brandon Kohrt, we have now expanded our historic missions in psychiatric education and mental health services into a major GMH research program, with funded studies that include two NIMH grants, two United Kingdom Medical Research Council grants, two World Health Organization grants, and a Gates Foundation grant. Our GMH research program now conducts funded studies in Nepal, India, Ethiopia, Uganda, Nigeria, South Africa, Tunisia, Liberia, Brazil, China, and the United Kingdom. This already too full paragraph has not mentioned the scores of publications, workshop and symposia presentations, and organizational leadership roles of our GMH faculty.

With half of our faculty identifying their professional work as global mental health, it is unlikely that any other psychiatry department can claim such a broad commitment. This GMH mission has put its imprint upon the values and identity of our entire department in the centrality we have given to building resilience to adversity, working with families and communities as well as with individual patients, relieving suffering whether due to symptoms of illness or to other adversities, and promoting human rights as a pathway to mental health. With our new strategic plan, we will re-focus and refine our Global Mental Program so that it becomes a more effective vehicle for training, treatment, and research by our faculty and residents on behalf of those who live in low-income regions, in settings of armed conflict, or as refugees displaced from their homes.

We are excited to announce the GW Psychiatry 2018-2019 Intern Class!

Carolyn Cookson
University of Cincinnati College of Medicine
Ohio State University, B.S. Biology, minor in Forensic science, Magna Cum Laude

Katherine (Kate) Cowhey
Louisiana State University School of Medicine
University of North Carolina, B.S. Psychology with highest honors
Tulane University, M.S. Neuroscience

Alexandra (Alex) Lynch
Medical College of Wisconsin
Regis University, B.S. Biology, minor in Chemistry

Rida Malick
Eastern Virginia Medical School
Northwestern University, B.A. Middle East and North African Studies

Weisheng (Renee) Mao
George Washington University School of Medicine
GWU, B.S. Economics, Summa Cum Laude

Rajkaran (Raj) Sachdej
Oregon Health & Science University School of Medicine
Columbia University, B.A. Neuroscience & Behavior, B.A. Middle Eastern, South Asian, & African Studies

Left to right: Kate, Rida, Carolyn, Renee, Raj, Alex
This year, we are proud to introduce the inaugural Residency Teaching and Professionalism Awards that are exemplary of our values here at the George Washington University Psychiatry Residency Training Program. In addition to the traditional ways of recognizing the great work that our residents do, including the Letter of Commendation issued by the Residency Administration, these awards are specifically designed to highlight the residents who demonstrate extraordinary dedication to teaching and professionalism. They are also unique in the sense that the winners are chosen based on feedback from various sources (peers, clinical site supervisors and administrators, medical students, etc).

“**We, as scientific professionals, are naturally resistant to the idea of relying on our instincts.”**

When discussing this exciting initiative, I would be remiss not to mention the man who championed for the creation of these awards, our AY 2017-2018 Chief-Resident-Extraordinaire, Dr. Terry Price, Jr., known as “TJ” in our inner circle. TJ spearheaded this process as part of his legacy during his time as the Chief Resident. In fact, it has been a privilege and a pleasure to watch TJ grow since the day I met him for the first time during his residency candidacy interview four years ago.

In the beginning of his Chief year, TJ would often turn to me or one of the Associate Program Directors and ask us what should be done in a particular situation. As the year progressed, his maturation took hold: he would present a problem/situation, provide his assessment, offer suggestions on how to approach/address it, and ask for our perspective. It indeed has been incredibly gratifying for us to witness his evolution, which is much more than acquisition of clinical and administrative skills; it is the process of finding and trusting his own voice.

We, as scientific professionals, are naturally resistant to the idea of relying on our instincts. Often times, we easily dismiss our inner voice as a hunch or an impression, which by definition lacks tangible evidence. Nevertheless, what is intuition but the rapid assimilation of our observations and assessment of a person/situation that yields a reaction/judgment so swiftly that we are not sure how it arrived in the moment? While the complex machinery underlying this process is difficult to elucidate, it does not mean that it does not exist. With conscious practice of learning from each intuitive call and awareness of our own potential biases, it is possible not only to unearth the pathway by which we arrive at our intuitive reactions and identify the concrete reasons why, but also to nurture this innate ability.

While I treasure every part of working with our trainees, one of the most meaningful experiences I have had is when I get to help them, be they medical students or chief residents, cultivate their own voice and hone their instincts. As the Program Director, my role is never to force my vision upon them; it is to help them project their own voice and craft their own path. And I am forever grateful to be able to serve in this humble role.
From the Associate Program Directors
Reconnecting with the Puerto Rican Diaspora

Vanessa Llenza-Torres, M.D.
Associate Program Director

My father turned 60 on September 19th, 2017.* It was not so different from previous years. This date is usually peak hurricane season, and I remember many past birthdays in which, instead of celebrating, we had to protect the house by installing “paneles” to cover the windows and doors. That day, Category 5 Hurricane Maria was projected to make landfall, which was worrisome for all. My father stayed up late, initially because it was his birthday, but then it was the winds that kept him and my mother awake. I lost contact with them the next morning and did not hear back for another day. And so began the worry, not only for me but for the other 5 million Puerto Ricans who currently live outside of the island. In the past, hurricanes were a time to come together as a family. Without electricity, you were challenged to engage the mind and connect with others. The adults played dominos and the younger ones played “briscas” or just talked. No one expected what rapper Vico C said to become true: ”María tiene algo para ti.” Maria had something for us.

After the hurricane, there was a collective sense of worry, despair, and even guilt from those of us who were not there. Many of my colleagues and friends did not hear from their families for days, some even weeks. I remember working on the consult service that week and hearing about Puerto Rico on the news in patient rooms, making it challenging to focus for a few days. I am forever grateful to my GW colleagues who were incredibly supportive. Residents and students who knew of my background asked about my family’s wellbeing and how the island was doing.

The sense of helplessness did not last long. We all felt the need to do something and that led to mobilization. A social media group called Doctoras Boricuas was created where Puerto Rican doctors could post the needs of the community so that other Puerto Ricans living on the mainland could help. Connecticut group, PR Rise Up, delivered medical goods similar to other grassroots movements that started after the hurricane. They helped by providing aid and sending flights full of medical supplies to the island. Their work ranged from fundraising, to gathering supplies to be delivered, to donating money, just to name a few. We could not be idle and watch the devastation without springing into action. In the past, some Puerto Ricans living on the island would express resentment toward those who had left. Those who stayed said ”yo no me quito,” or “I don’t quit,” implying that those who left had abandoned the land when in need. However, since the hurricane, everyone, inside and out of the island, has lived by ”yo no me quito.” There has been a reconnection with the Puerto Rican diaspora since Hurricane Maria hit. This crisis showed that it is possible to live outside the island and still carry with you the love for the land and the people – from wherever you are.

...the bond between people on the island and people on the mainland is stronger than ever. “

As chair of CrearConSalud, a non-profit focused on mental health education which was formally established one month before the hurricane, I knew it was also time to react as a group. For the past three years we’d participated in a yearly mental health awareness tour which started during my time as an APA minority SAMHSA fellow. We quickly realized once a year was not enough. Since the hurricane, we have been to Puerto Rico seven times. We obtained water filters for the town of Humacao where Maria made landfall. We collaborated with local non-profits including PECES, VamosPR, and PR Stands, a grassroots group in Baltimore. In March, we piloted a Resilience Workshop which included four days of topics on emotional stages of disaster, burnout, resilience, hope, and mindfulness. Stories of hope after the hurricane included core identity of the family’s role. For example, “Por mi hijo [for my son], I needed to be the strong one,” among other inspirational stories.

CrearConSalud plans to continue our focus on empowering the community. The 2018 Hurricane Season has already started. Although the island heads into this season with unstable power grids, and many still unmet needs, there is some comfort in knowing that the bond between people on the island and on the mainland is stronger than ever. The Puerto Rican diaspora has shown that our ties to the community and our commitment to it are very much alive. As I transition out from Associate Program Director, a position I had the honor of being entrusted with for the past two years, I am reminded of how grateful I am to be part of an institution where this work and mission is supported.  

*In March, we finally celebrated my father’s birthday as a family. As we say “tarde pero seguro” (better late than never).
Inova Fairfax Update

Catherine Crone, M.D.
Program Director
Inova-GW Psychosomatic Medicine Fellowship

With Spring comes the annual APA meeting and upcoming graduation plans! Drs. Wise and Crone, along with our CL/PM fellows, Dr. Andrew Matz, Dr. Neda Kovacevic, and Dr. Kishore Kilaru, went to NYC to present the Medical Mimics workshop, an annual event that we have been fortunate to be asked to do for the past 6 years. Three new cases were chosen and incorporated into a discussion of issues pertaining to the care of patients at the crossroads of medical and psychiatric diagnoses. In addition, Dr. Crone, who chairs on the APA Practice Guidelines Writing Group, presented on Eating Disorders, and together with Drs. Dong and Gandhi, presented a case conference on severe and enduring anorexia nervosa. The conference involved experts in eating disorders, endocrinology, and ethics.

Our fellows are actively preparing for graduation and the transition to be attending physicians, and we are fortunate that two will remain in the area. Dr. Matz is entering private practice and will also be assisting with ECT services at IFH, while Dr. Kovacevic will be working with Dr. Rashid at NVHMI. Both are planning to continue as clinical faculty so expect to see them around! Dr. Kilaru will be returning to NYC, where he will be at NYU, working in the emergency psychiatric services of Bellevue Hospital. He will also be working with and teaching residents there. We will soon be missing them but are excited for their next steps in their careers.

Further changes are coming soon to IFH this Summer with a move and expansion of inpatient psychiatric services and inpatient CATS, both of which will be moved to a new space in the former Women’s and Children’s Hospital. Replacing the single inpatient psychiatry unit will be three smaller specialized units focused on Mood Disorders, Psychotic Disorders, and Medical Psychiatry. A 15-bed adolescent unit will also be added. This move will increase our overall patient capacity from 52 to 81 beds and we are hopeful this will provide some strong clinical experiences and learning opportunities once the staff and patients settle in. Dr. Clark, our new chair, has been busy overseeing this expansion. He is also looking forward to becoming official GWU faculty and providing Psychiatry Grand Rounds in the not-so-distant future. Dr. Wise is active as ever, throwing himself into attending on our CL service part-time and both teaching and supervising students, residents, fellows, and NPs.

Michael R. Clark, MD, MPH, MBA,
is the New Chair of Psychiatry in theInova Health System, Virginia.

Farewell!

Congratulations and good luck to our graduating residents!

Monika Karazja will travel and consider a career at the VA or locum tenens positions in Alaska.

Terry (T.J.) Price, Jr. accepted a position as an inpatient psychiatrist at the W.G. Hefner VA Medical Center in Salisbury, North Carolina.

Seth Rosenblatt will join the staff at Whitman Walker Health.

John Tarim will travel abroad to visit family then pursue locum tenens contracts in Alaska.

Janice Yuen will begin her fellowship in Child and Adolescent Psychiatry at Stanford University.

Our Associate Program Directors will be leaving their roles but will remain active as GW faculty. Dr. Pooja Lakshmin will continue to focus on women’s mental health research, advocacy, and teaching in collaboration with local community partners, in addition to working with residents as a clinical supervisor in the Five Trimesters clinic. Dr. Vanessa Torres-Llenza will apply for a certificate in non profit management at GW this summer. She will also focus on NVFS curriculum and research opportunities in addition to continuing inpatient CL work.

Last but not least, Executive Coordinator, Evan Workman, will be moving forward to a new career with the Red Cross as a Disaster Program Manager in West Virginia. His outstanding work ethic and organizational skills, kind and patient willingness to help, and extensive problem solving abilities will be sorely missed. We wish him the best in his future endeavors!
As intern year winds down, we have an opportunity to reflect on our first patients, mistakes, triumphs, and the avalanche of both clinical and experiential information we’ve absorbed. Looking back, I recall times when I've felt successful: overcoming obstacles, applying newly acquired skills, and working cohesively and efficiently with my team to help patients lead healthier and happier lives. I also recall times when I've felt entirely overwhelmed: the physical toll of exhaustion, the anxiety that I’m letting down a patient or my coworkers, and the fear that I’m neglecting my personal relationships and wellbeing along the way. It’s truly been the best of times and the worst of times.

When speaking with my peers, I am reminded that I am not the only one suffering from this whiplash of highs and lows. While that solidarity is reassuring, it brings to mind the ever-growing data on clinician burnout (Dzau 2018), its frequency, and the risks it poses to the lives of physicians and our patients. As we come up for a breath of air at the close of this year, it’s important to take time to check-in with ourselves and our colleagues, assess what is making us happy, what our stressors are, and where there is room for systematic improvement in our working environment.

In light of this, I want to promote a culture of validation and encouragement. One thing that I have noticed since my first year of clinical rotations in medical school is a dearth of positive feedback in the medical field culture. In my own day-to-day, I have had to actively remind myself to notify students when they have simply done a good job or are well deserving of praise. I’ve witnessed so much talent in my co-interns and other peers - they have been brilliant, providing competent healthcare, and sticking their necks out for what they believed was right for patients. They are super heroes at times, and it seems impossible that they might not recognize it. Yet, if someone else said any of these things about me, I am not sure I would hear them. I acknowledge that this proposed solution does sound simplistic and even naïve. Compliments can be awkward and they may risk condescension at times, but institutionalizing kindness and creating a routine of positive rewards strikes me as an obvious step forward in a culture of burnout and imposter complex. Congratulations, everyone, on one year in the books – let’s make the next even more positive. ■


Retreat pics!

PGY-1 Fun

The Whole Gang
Resident Kudos!
A plethora of talent and ambition

Janice Yuen, PGY-3, matched into her first choice Child and Adolescent fellowship at Stanford, and was selected for their only Community Track position. Way to go, Janice!

Monika Karazja, PGY-4, was awarded the 2018 John P. Spiegel Memorial Fellowship by the Society for the Study of Culture and Psychiatry and presented her research at the 2018 SSPC Annual Meeting in April. She also just returned from a Global Mental Health rotation in Nepal!

T.J. Price, PGY-4, has been a hard-working and dependable solo-Chief, with duties beginning midway thru his PGY-3 year. His legacy will live on with the creation of our new Teaching and Professionalism awards. Thank you for all you’ve done, T.J.!

Seth Rosenblatt, PGY-4, presented his extensive research on the psycho-oncology clinic at both the American Psychosocial Oncology Society Annual Conference and the APA.

Recruitment season was a great success thanks to co-chairs Caroline Roberts, PGY-3, and Kaitlin Slaven, PGY-3, and they couldn’t have done it without the help of our Recruitment Superstars: Sara Teichholtz, PGY-2, was recognized in November, Carl Quesnell, PGY-1, was the December stand-out, and Maggie Valverde, PGY-3, provided a strong finish in January.

Jacqueline Posada, PGY-3, Patricia Ortiz, PGY-3, and Gowri Ramachandran, PGY-2, represented the GWU Psychiatry Residency Program at the WPS CLM MindGames in December. They put up an incredible fight with intelligence, integrity, and grace.

Janice Yuen, PGY-3, Kelly King, PGY-2, and Gowri Ramachandran, PGY-2, expertly organized a fun, educational, and productive Annual Retreat that went off without a hitch!

And finally, a GREAT BIG SHOUT OUT to Program Coordinator, Charity Bryan, for her endless year-round support. We couldn’t do it without you!
Hello and Welcome!

A warm welcome to our new Associate Program Director, Dr. Anna Weissman! Dr. Weissman earned her B.A. in English literature from Yale University and her M.D. from the Perelman School of Medicine at the University of Pennsylvania. She completed her internship and residency at the Massachusetts General Hospital and McLean Hospital, where she served as chief resident of Bipolar and Psychotic Disorders and of Psychotherapy. In addition, she received the Anne Alonso award for outstanding work in psychotherapy and served as Assistant Editor for the Harvard Review of Psychiatry. She then completed a fellowship in Forensic Psychiatry at St. Elizabeths Hospital. In addition to her focus on the intersection of psychiatry and the law, Dr. Weissman is dedicated to medical education and social justice.

We are pleased to announce that we have three incoming Chief Residents for AY 2018-2019! Congratulations to:

- **Kaitlin Slaven, PGY-3**: Inpatient Chief
- **Caroline Roberts, PGY-3**: Outpatient Chief
- **Patricia Ortiz, PGY-3**: Administrative Chief

We have two new additions to our residency family in AY 2018-2019. Carrie Andrews will join the PGY-2 class, and Corina Freitas will transfer as a PGY-4 for a Psychosomatic Medicine elective at Inova. Welcome aboard!