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- Cheryl D. Wills, M.D.

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- Alexander W. Luo, M.D., M.B.S.
CANDIDATES FOR
PRESIDENT-ELECT
It is an honor to have been nominated for President-Elect. Alongside my energy and passion, I bring relevant experience including Past Speaker of the Assembly, the American Medical Association House of Delegates, and direct work with legislators.

Our profession faces multiple challenges. We need a cohesive, actionable, multi-year strategy to enact effective and permanent change. As President, I will focus on ‘The Workforce Challenge’ facing psychiatry.

The increased demand for psychiatric services has collided with a shortage of psychiatrists exacerbated by non-clinical demands. Administrative burdens such as prior authorizations and ever-expanding documentation requirements add to our already heavy workloads. The continued attempts by non-physicians to expand their scope of practice, and the pressing need to reinforce culturally competent psychiatric care to advance health equity all lead to increased practice fatigue. This is unsustainable. I will work with you to craft a plan with clearly defined initiatives. To name some, I will forcefully champion psychiatrist-led multidisciplinary team-based care; leverage academic centers to explore and improve innovative ways to expand access including integrated health care models; advocate to retain telepsychiatric services, and promote diversity-enhancing interdisciplinary programs such as the Women’s Wellness Through Equity and Leadership.

My overarching goal being to reverse our workforce challenges, enabling greater fulfillment in our practices, and ultimately achieve better patient outcomes.

One more thought... Politicians keep referring to our nation’s broken mental health system when confronted with difficult legislative decisions. This statement trivializes complex societal problems and portrays psychiatric treatment as ineffective. I commit to challenging this notion by reaching out with a list of tangible initiatives. They will either support them, or refrain from this type of hollow statement.

I am poised to embark on this journey and work for our membership. If you agree with this vision, I ask for your vote! Thank you.
Professionally, I am most proud of engaging, guiding and mentoring underrepresented psychiatrists and mental health professionals from multi-disciplinary teams. As a Hispanic psychiatrist, enhancing diversity and inclusion has always been close to my heart. It has been a privilege and a great responsibility to prepare the next generation for the challenges that lie ahead. Among numerous initiatives, I served on the Board of Advisors for the National Resource Center for Hispanic Mental Health, mentoring bilingual and bicultural mental health professionals to meet the needs of minoritized patient populations seeking psychiatric care. Most recently, I serve on the Steering Committee of the Women’s Wellness through Equity and Leadership program tasked with recruiting and mentoring women psychiatrists to create a healthier and more equitable work environment.

It’s the year 2029. A recent survey indicates job satisfaction among psychiatrists is at an all-time high. Contributing factors include a palpable decrease in administrative burdens, effective use of technology in the delivery of psychiatric care, a diverse and culturally competent workforce, and newly implemented equitable reimbursement solutions. The survey suggests a dramatic improvement in access to care compared to 5 years ago, linked to the proliferation of integrated behavioral care systems. The survey also indicates that the advocacy efforts of the APA have been instrumental in paving the way to secure these improvements. Such a vision requires a concerted effort to materialize. That is why a carefully executed long-term strategy is needed now to address the various challenges that are impinging on our profession.

Most people don’t know that I was born, grew up, and completed my undergraduate studies in the town of Mayaguez, Puerto Rico. Growing up on a tropical island had many advantages. One of my favorite activities was boogie boarding at the surfing hubs of Rincon and Isabela. I was also a long-distance runner and member of our track team. But the most fun fact that people don’t know about me has to be that I was active in my hometown local theater scene. In fact, among the various plays we performed at our Cultural Center, one comes to mind because it foreshadowed my future in mental health; the play by Spanish playwright Fernando Vizcaíno Casas, “Psicoanálisis de una Boda” (Psychoanalysis of a Wedding).
My threefold platform is to improve access to care with the expansion of federally funded Certified Community Behavioral Health Clinics, eliminate disparities in mental health treatment and advance initiatives to promote recovery while eliminating the stigma of mental disorders.

This past year, the APA worked successfully with other mental health organizations and secured continued federal funding for Certified Community Behavioral Health Clinics nationwide. The Bipartisan Safer Communities Act expanded funding for Certified Community Behavioral Health Clinics. This expansion is built upon the Excellence in Mental Health and Addiction Treatment Expansion Act’s success and aligns with the APA mission, vision, values and strategic plan. Both call for improving access to and quality of psychiatric services, promoting evidence-based care, serving the needs of underrepresented and underserved patient populations, building the psychiatric workforce and leading advocacy efforts to increase funding from public sources to advance the understanding, prevention and treatment of mental illness. We must continue these efforts to secure permanent ongoing funding for Certified Community Behavioral Health Clinics nationwide to accomplish these goals.

I remain committed to advancing initiatives that improve patient access to seamless and affordable quality care. I will continue advocating for the further expansion of fully funded Certified Community Behavioral Health Clinics. These clinics provide comprehensive mental health services and addiction treatment for children, adolescents and older adults with mild, moderate and severe mental disorders who are uninsured, underinsured, or underserved. Targeted populations include veterans, Native Americans and the LGBTQIA+ community.

I am also dedicated to promoting APA initiatives that will provide additional resources to advance recovery and reduce stigma with organizations such as the National Alliance on Mental Illness and Mental Health America. These activities are designed to eliminate the stigma of mental disorders and improve access to high-quality, evidence-based mental health care.
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<th><strong>Tell us about your most important achievement.</strong></th>
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<td>My most important achievement was helping to secure Certified Community Behavioral Health Center Demonstration State Status at CNS Healthcare. Over the past two years, we received over $58 million in funding, resulting in significant expansion of services and staff. As a result, I was promoted to Vice President/Chief Operating Officer in 2023. We were able to expand our focus on traditionally underserved populations including veterans, the LGBTQIA+ community and Native Americans. Now, even more people receive primary care, laboratory and pharmacy services, cooking, nutrition and exercise classes on-site. Outcomes include significant increases in blood pressure control, vaccination rates, including COVID-19 and Medication-Assisted Treatment for tobacco, alcohol and opioid use disorders.</td>
<td>In five years, I envision the profession of psychiatry making major progress in advancing recovery and dramatically reducing the stigma of mental disorders resulting in increased access to mental health services, especially for underserved communities. Certified Community Behavioral Health Clinics will expand nationwide, and hundreds of thousands of people will receive evidence-based services in their own communities. The APA will address inequities in our field and how they influence the practice of psychiatry. The continuation of these efforts will increase access to care for underserved populations and increase the role of minority and underrepresented residents, fellows and early and later career psychiatrists in leadership and decision-making roles.</td>
<td>I have numerous family members that have attended Historically Black Colleges and Universities. Early on, I decided that I wanted to share in this proud tradition. In the early 1900s, my grandfather and his brother graduated from pharmacy school at Meharry Medical College, established in 1876, where I later went to medical school. My father graduated from Alabama State University, established in 1867, for high school and college, after which he went on to serve in the United States Army Air Corps. He was a Tuskegee Airman as an air traffic controller in World War II. Following the completion of his military duties, he went to graduate school and completed a master’s degree and in social work at Atlanta University, established in 1865.</td>
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CANDIDATES FOR
TREASURER
My name is Steve Koh and I have the honor and privilege of asking for your vote as APA’s next Treasurer. My career owes much to our great organization. From my time as the resident fellow membership chair to the Board, active membership as early career psychiatrist, involvement with the Assembly, Councils and financial committees, I am a physician leader in psychiatry today because of the APA. The evolution of my professional growth is aligned with that of our organization. As I reflect on where APA has been and where it needs to go, I believe that we need a Treasurer who will be an activist and an advocate to ensure our fiscal stability and strategic positioning.

Healthcare environment is changing all around us. Our membership’s demographic, work setting, compensation and expectations are evolving at a rate that we have not seen. There is a public and political pressure to meet the high demands for mental health care. APA must be the active leader in this evolutionary process and be its compass. To achieve this, our financial standing must be strengthened and strategic investments must be made for our future state. We must become diversified in our financial positioning and make decisions to ensure future value to our younger colleagues. Treasurer cannot be a passive role but rather an activist and an advocate to push our organization forward. Our patients and colleagues demand and deserve this. I believe that I can contribute to that end and so am honored to be asking for your vote.

Thank you.
Tell us about your most important achievement.

My most important achievement really is being a new dad and keeping my son alive! It has been an amazing experience and nothing like what I expected. Observing his growth also allows me to be reflective about myself and to encourage me to be a better person, professional and partner, every day. Learning from him has been both humbling and exciting. Being a dad has forced me to really understand the meaning of priorities and importance of one’s actions. It has been the singular experience of my life and everyday brings me sense of achievement.

Where does the profession of psychiatry need to be in five years?

I believe that psychiatry needs to evolve to embrace our identity as a physician, to become a data driven field, and to be leaders in the behavioral health environment as a whole. I view myself as being a physician with expertise in psychiatry. This perspective has led me to believe that we need to move towards no longer being carved out from rest of medicine. We must become more objective and data driven in our practices. Measurement based care and informatics should guide our practices. I believe that we should be physician leaders working with larger behavioral health team comprised of our physician colleagues, social work, therapist, advanced practice providers and health administrators. We have the skills to be ideal physician leaders.

Tell us something about yourself that most people don’t know.

Most people don’t know that I cannot cook worth anything. Love food and definitely going to good restaurants is a joy for my family but can’t actually cook. I find it very stressful. I am not sure why but I get very frustrated in even following a recipe. I think I can talk about food quite a bit and so people think that I know how to cook but the opposite is true. I love watching cooking shows and such but not because I would actually do it. It just impresses me to see how good cooks do their thing.
The profession of psychiatry has been evolving rapidly. I have been fortunate to participate in the process as an APA Board member. The APA Treasurer must be fiscally responsible while advocating for psychiatrists, patients and the profession. My election platform has three key points.

Member Engagement:

The Board of Trustees should be cognizant of members’ concerns during deliberations. Transparency and bidirectional communication between the Board and APA members is essential to maintain credibility and foster trust. Mentoring is needed for residents and early-career psychiatrists so that they will appreciate the value of continued membership.

Improving Access to Care:

Addressing health disparities requires us to examine how systemic bias, including where healthcare services can be accessed, impacts the social determinants of health. I endorse increasing reimbursement rates and parity for phone psychiatry sessions when patients lack reliable Internet and/or hardware for video sessions. Also, I advocate for funding for additional psychiatry residency positions and increasing loan repayment programs for psychiatrists working in urban and rural physician shortage areas.

Maintenance of certification should be simplified and international medical graduates should receive additional support. They represent 30% of practicing psychiatrists and contribute to health equity by practicing in the public sector.

Continuity of Service

As an almost six-year APA trustee, I can provide historical context to facilitate the APA’s next CEO/Medical Director’s acclimation to the position in May 2024.

Please support my candidacy for APA Treasurer.
I welcome your feedback and questions.
My most important professional achievement involves advocacy for psychiatrists, patients, and the profession of psychiatry. In 2020-2021, during the pandemic and civil unrest, I chaired the APA Presidential Task Force on Structural Racism (TFSR). The group completed a data-driven, systematic and transparent review of the APA’s functioning, including its adherence to best practice principles in governance, diversity, equity and inclusion. This resulted in organization-wide reform, including a historic 18 actions being approved by the Board. One of the greatest challenges for me involved promoting transparency by disseminating consistent information about the TFSR work to APA members while the APA was recruiting a communications chief.

In 2028 psychiatry must be the most prominent and respected mental health profession in the world. Also, since mental health is an essential part of all health, the prominence of psychiatrists as thought leaders in medicine should be growing substantially. Parity for psychiatric care needs to be enforced. Also, increased funding must be available for psychiatric research. Also, more state legislatures will be funding community and rural psychiatry residency programs that can prepare psychiatrists to meet the needs of a diverse population. Additionally, more psychiatry pipeline programs will be developed so that the future psychiatry workforce may better reflect the community that receives care. Lastly, training in reproductive and climate psychiatry will be required for all psychiatry residents.

I performed with a band at Carnegie Hall.
CANDIDATES FOR
TRUSTEE-AT-LARGE
I am a Clinical Assistant Professor in the Department of Psychiatry at Michigan State University. Over my career, I have compiled a noteworthy record of teaching and advocacy accomplishments in academic, medical, and community settings.

My work lies on the intersections of faith, spirituality, ethnicity, and race in the realm of public health. I have presented extensively Nationally and Globally to illustrious organizations like the Kennedy Forum, Steve Fund, Kevin’s Song, the World Alliance Clergy Interfaith Organization, the Ohio Suicide Prevention Foundation, Asian and Pacific Islander American (APIA) Scholars, and One World Health Summit Davos.

I teach culturally responsive care to Psychiatry residents, psychologists, and medical students. I serve on the diversity committees for the College of Human Medicine and the College of Osteopathic Medicine, also a core faculty on multidisciplinary programs including Asian Studies, the Center for Gender in Global Context, and the Institute of International Health.

I have the distinct honor of chairing the Mayor of Lansing Mental Health Task Force, serving as medical director Gero Psych unit of Greater McLaren Hospital Lansing, and as a member of the University Wellbeing Coalition at Michigan State University.

I work relentlessly to lift the voices of the vulnerable and ensure that marginalized groups get due representation in research and clinical care. I am currently focused on fighting the prevalent stigma around mental illnesses in the BIPOC (Black, Indigenous, and People of Color) and LGBTQIA (Lesbian, Gay, Transgender, Queer/Questioning, Intersex, and Asexual) communities. This becomes the biggest barrier to accessing timely care resulting in underutilization of services. I have launched a campaign “Avail to Prevail” to promote the 988-crisis hotline in these stigmatized communities.

I advocate acceptance and commitment to coexist with a compassionate sense of equity and social justice as the only path forward to peace and prosperity.
My professional trajectory and personal growth have been deeply shaped by the mentorship provided to me as the SAMHSA (Substance Abuse and Mental Health Services Administration) minority fellow (2008-2010).

I use this grant to develop the Annual Muslim Mental Health Conference. In its 15th year, this remains the only conference of its kind worldwide. It is academic in focus and faith-based in its sensibility, surrounding issues impacting the mental health of the Muslim community. Past American Psychiatric Association President, esteemed Altha Stewart, lauded this conference as one of the most impactful works being done by an APA fellow. It was acknowledged as a successful endeavor at an Alumni panel for the 50th-anniversary celebration of SAMHSA. Secretary Becerra called it extraordinary leadership on behalf of humanity.

By 2050, it is estimated that 50% of the U.S. population will consist of minorities, increasing the provision of mental health services to patients of diverse cultures or languages. Discrimination and implicit biases towards homeless persons, people with disabilities, people of color, LGBTQIA, or incarcerated individuals can contribute to health disparities. Biased provision of health services is a well-documented barrier to health for marginalized patients and can have multiple negative consequences for individuals seeking mental health treatment. We would need to invest in training a mental health workforce that understands health from the patient’s experience, values, or perspective, and provides nondiscriminatory patient-centered care. Developing multietnic and multilingual services will be imperative. Creative application of A.I. (Artificial Intelligence) technology to develop these culturally appropriate services may be warranted.

I am a proud single mother of three strong daughters. I come from a culture where marriage defines your identity and divorce is taboo, not favored, and never encouraged. Immigration is a traumatic process, the integration journey can either bind families close or cause rifts. My relationship could not endure the pressure of divergence in values and growth. The dissolution of my marriage and the disruption of my family impacted me deeply. Being a mother and a person of faith sustained me. It gave me the courage to redefine the conventional role of a divorced woman. I emerged as a leader, the mythical bird phoenix from the ashes of distorted traditions. This pain led the path to my purpose for equity and justice for all.
During the last seven years I have been active in the APA Assembly, representing my District Branch and then as Deputy Representative for Area 7, the most widespread geographical area within the APA. I have developed knowledge about matters of importance to our members across states e.g., access to care, the importance of the physician-led treatment team and mentoring the next generation of psychiatrists.

If I am elected Trustee-at-Large I will:

Use my role to ensure that all voices are heard and I will advocate for you to the Board of Trustees: As Chair of the Colorado Psychiatric Society Legislative Council, I have worked on bills that impact our profession. The position that we take on bills must reflect our members’ viewpoints and we must strongly advocate for those viewpoints to the legislature. I will use my experience in this role to convey your priorities to the Board.

I will work across organizations to ensure that psychiatry’s priorities are well represented: As an individual with dual training in internal medicine and psychiatry, I am accustomed to working with physicians who are not trained in psychiatry. As an Alternate Delegate to the American Medical Association, I have learned to work with our colleagues in the House of Medicine to ensure that the voice of psychiatry is heard. If elected to the Board, I will use the relationships I have built for the betterment of our patients and profession.

Having worked as a residency training director, I have a deep understanding of the challenges faced by our young colleagues in psychiatry as they grapple with issues that threaten their patients and profession. I will use this experience to mentor our younger members as we look to the future.
Tell us about your most important achievement.

Receiving the award for courage in leadership from residents for exposing negative treatment of female physicians.

Where does the profession of psychiatry need to be in five years?

Ensuring that we instill in our young colleagues the importance of establishing and maintaining physician-led psychiatric care.

Tell us something about yourself that most people don’t know.

I love reading spy novels and watching spy movies!
CANDIDATES FOR
EARLY CAREER PSYCHIATRIST
(ECP) TRUSTEE
As a candidate, I am dedicated to advancing our field through advocacy, patient safety, and patient-centered approach to healthcare.

In today’s rapidly evolving medical landscape, characterized by online misinformation, AI utilization, and increasing corporatization, we must ensure that ethical values and patient-centered policies remain at the forefront. I am committed to mobilizing the next generation of psychiatrists to actively shape healthcare progress and policy initiatives, with a primary focus on patient safety and improved outcomes.

I firmly believe that every patient deserves physician-led care by residency-trained psychiatrists. Initiatives that diminish the role of physicians disproportionately impact underserved communities with healthcare disparities. My personal experience during the COVID-19 pandemic was a stark example of this, where I, as a dual-board-certified physician, was replaced by a minimally trained mid-level provider as a cost-cutting measure, a “business decision” jeopardizing patient safety.

Over the past three years, I have worked diligently to unite ECPs in advocating for our profession at both local and federal levels. If elected, my goal is to empower our ECP workforce at the grassroots level to tackle challenges such as scope-creep and promote transparency and appropriate training. I will tirelessly work for the allocation of resources from the APA to support these essential efforts.

As an International Medical Graduate, I bring a diverse range of experiences, enriching my understanding of medicine and people. Currently, I provide care to vulnerable children in underserved Chicago neighborhoods, which fuels my commitment to enhancing diversity in our workforce.

As my clinical experience grows, so have my leadership skills. In addition to the Illinois Psychiatric Society, I actively hold leadership positions within the American Academy of Child and Adolescent Psychiatry, the Illinois Council of Child and Adolescent Psychiatry, and the Indo-American Psychiatric Association.

Together, we can drive meaningful change, and I humbly request your support.
I received the 2022 “Member of the Year” award from the Illinois Psychiatric Society, the APA’s district branch. This honor recognizes my unwavering commitment to patient care, education, community engagement, and advocacy. As the youngest recipient of this accolade, I am deeply humbled and proud.

My journey began in an impoverished one-room home in India, where I overcame adversities through dedication and earned a full scholarship to medical school, graduating as valedictorian.

Despite losing my dominant arm at the age of 8 — I pursued my dream to be a doctor. I immigrated to the US in 2012. Couch-surfing along the way, I found mentorship and support from APA members, allowing me to overcome hardships and follow my dream, of being a compassionate physician.

In this evolving medical landscape, marked by technological advancements and the AI revolution, it’s imperative for expert physicians to lead the way in shaping the future of psychiatry.

Psychiatry is on the brink of significant transformation, and we must actively contribute to enhancing access while ensuring patient equity and safety. I envision psychiatry becoming more patient-centric, prioritizing the doctor-patient relationship, and psychiatrists actively influencing mental health policy at local and federal levels.

As scientific progress propels research and clinical practice, our field should take the lead in elevating patient outcomes, both on an individual and systemic level.

I firmly believe that through APA, we have the potential to become a global leader and provide crucial support to allied organizations in the realm of mental healthcare.

I am the first international medical graduate to be honored with the Resident Scholar Fellowship by the American Academy of Child and Adolescent Psychiatry. This unique opportunity allowed me to spend a summer in Washington, D.C., as a Congressional Intern on Capitol Hill. Meeting Senators and members of Congress, and visiting the White House and the Speaker’s office at the U.S. Capitol was an enriching experience.

I have a passion for travel and photography, having explored 28 states in the U.S. My photography journey led me to share captivating photos with meaningful write-ups on social media pages. These images garnered attention from local newspapers, and one of my photographs was chosen as the official Christmas Card for the city of Naperville, IL.
“Show me what you can do; don’t tell me what you can do.” John Wooden. I am running for this position due to my passion for leadership, advocacy, minority mental health, research, education, and collaboration. As a Maxwell Leadership coach, I believe that leadership is about one life influencing another.

Since my residency, I have been interested in social justice, and understanding disparities in healthcare particularly with the LGBTQ+ community. What began as a curiosity, and a thirst for knowledge about this marginalized population has now transitioned into piloting a transgender mental health initiative in Pakistan. During my training, I participated in committees at New York State Psychiatric Association and worked with many inspiring leaders. Being an APA Diversity Fellow, I joined the Council on Medical Education and Lifelong Learning to address racial discrimination against physicians, brainstorm strategies to overcome workforce shortage and issues related to Continued Medical Education and Recertification.

As part of the APA membership committee, I have advocated for increasing engagement among graduating trainees by adding more membership values during this critical transition period. As a PAPANA (Pakistani American Psychiatrist Association of North America) President, I collaborated with the Indo-American Psychiatric Association (IAPA) to celebrate the first South Asian Mental Health Day. I empowered and encouraged our inspiring women to lead the organization in executive and other important committees. To improve capacity building, we wrote child psychiatry guidelines for practitioners in Pakistan and offered online certification courses. I raised donations to build the first autism center in my state and was invited by the Honorable President of Pakistan, to pilot a mental health help line and other innovative projects such as a collaborative care model, and workforce development.

I trust that my experiences in various leadership positions makes me a well-rounded candidate to run for this position.
**Tell us about your most important achievement.**

Being a Maxwell Leadership Coach (2022), I believe in doing the right things for the right reasons. When I faced adversity, the motivation to break through who I am as a leader was founded on the discipline to keep growing out of my comfort zone. This could sink me or lift me up to be an influence beyond my title or position. “People don’t care how much you know until they know how much you care.”

Going beyond any dream I ever had, continues to be my focus, and the drive that pushes the fire of tenacity within me to lead in a way that feels authentically aligned, but more importantly even reaching past those lines to see just how much farther I can reach.

**Where does the profession of psychiatry need to be in five years?**

The profession of psychiatry must strive to spearhead the evolution of society and mental health care. Enhancing our leadership skills to influence policy making, insurance coverage, public and global mental health initiatives, is crucial for change. Integrative psychiatry, placing stronger emphasis on prevention, early intervention, and community-based initiatives contributes to a resilient, well-rounded system seeking to understand the functioning behind the behaviors, not simply labelling the behaviors. In doing so we foster the whole person perspective, promote human dignity, and reaffirm our moral commitment to serving our patients.

Increased accessibility should be a priority, utilizing telehealth, and innovative technology such as AI assisted diagnostics for treatment planning to bridge care gaps. Embracing diversity, equity, and inclusion is crucial, ensuring culturally sensitive approaches and representation.

**Tell us something about yourself that most people don’t know.**

Working as a waiter in my dad’s restaurant in Pakistan, I witnessed the toll of neglecting self-care on his health, teaching me to establish boundaries, prioritize self-care, and embrace education; values my dad couldn’t fully appreciate. In 2019 at the young age of 58, his unexpected passing prompted me to overcome guilt, actualizing the seed he planted to boldly seize opportunities to learn and grow together, and reminds me that sometimes it’s not about us, it’s about the people we serve.

Grateful for the nomination, I urge you to step into your greatness humbly excelling in your passion, prioritizing your path, while supporting loved ones and colleagues. As advocates for patients and their families, especially in marginalized communities, we sow the seeds of lasting change.
I am seeking your vote to serve as Area 1 Trustee to advocate for improved access to the highest quality psychiatric care to meet the treatment needs of our population.

I believe firmly that every person, regardless of their ability to pay, deserves effective treatment for their mental illness. I will advocate for actual parity of reimbursement from third party payors. To do this, we need to ensure that, when a payor carves out the mental health benefit, referral networks are substantial and reimbursement for services is equivalent to other medical services. We also need to ensure that services provided by a physician are reimbursed at higher rates than for those provided by non-physicians. Beyond parity, I advocate for universal healthcare in the wealthiest nation on earth.

I also believe that psychiatrists must lead efforts to expand access by leveraging our expertise in collaboration with other physicians and healthcare practitioners to deliver care when access to a psychiatrist is limited. We must rethink models of healthcare delivery to reach more people with innovative approaches using technology and partnerships. We must also address the structural issue of insufficient residency slots to expand the pipeline of psychiatrists. As our population grows, we cannot hope to close the access gap without restricting our role further and further to that of psychopharmacology consultants to healthcare systems.

I also believe that psychiatrists need to play an expanded role in developing policies that address – and ideally prevent – the social determinants of poor mental health. As the leading voice for mental health. We need to clearly articulate how the perils faced by most of society – poverty, toxic exposures, violence – trigger a cascade of deleterious effects on our health and wellbeing. The economic forces against most families create the greatest barrier to mental health and access to care.
Tell us about your most important achievement.

My most important achievement has nothing to do with my role as a physician. I am proudest of the people that my children have become as adults. Both have a highly developed sense of justice and advocacy for disenfranchised people and for the creation of a world that will sustain humanity by addressing inequities that lead to violence and destruction of the planet. In a distant second, I am proudest of the work I have contributed to suicide prevention. I have sought to promote the best practices for the evaluation and management of people at risk for suicide through my work on the VA-DoD Clinical Practice Guideline for Evaluation and Management of Persons at Risk for Suicide.

Where does the profession of psychiatry need to be in five years?

Psychiatry must lead innovations and shift our focus toward primary prevention and expanding access to effective treatment to those with the least means. We need to advocate for primary prevention strategies like enriched early childhood programs, school lunches, and health literacy with a focus on wellness, resilience, and conflict resolution. We also need to address the scourge of gun violence that pervades our society. We have a significant role to play to identify the risk factors the predispose to violence toward others as well as suicide. We need to serve as the trusted voice that can speak frankly about the personality and social factors that lead to gun violence and address the complexities around the tautology that gun violence is perpetrated by the mentally ill.

Tell us something about yourself that most people don’t know.

I view our profession as the philosophers of medicine. In my own personal journey, I reflect on the dynamic forces that led to my choice to serve in the United States Army. Through my experience in combat, I have developed a very nuanced understanding of geopolitical conflict and the responsibility we bear as a society whenever we fail to resolve conflict and cynically embrace violence for political goals. This burden weighs most heavily on the individual soldier who must reconcile oversimplistic ideals such as patriotism with the complexity of killing people. I chose to serve in combat to provide access to psychiatric care to soldiers despite my firmly held belief that our Nation’s war in Iraq was unjust. This is a stain on my conscience.
Adaptability
To ensure our continued survival and relevance, I believe the American Psychiatric Association must become more adaptable in terms of anticipating and reacting to the ever-changing challenges facing our organization.

If our current structure, spending, and Bylaws are no longer sustainable, then we need to take an honest 360 look at what needs to change.

Business as usual is unfortunately no longer viable from a financial and strategic standpoint.

Transparency
The BOT can do better in disseminating information to the membership in a timely manner. As a Trustee, I pledge to endorse full transparency regarding Board decisions as possible. This enhanced openness will increase the understanding of all members as to the rationale and necessity of Board actions.

Advocacy
In the next five years, our profession needs to be in a more secure position in terms of parity, workforce, and scope of practice.

The Board of Trustees plays a critical role in all these domains.

As an Association, we must continue our efforts to end the discriminatory treatment of our patients. Specifically, many health insurance providers still impose burdensome preauthorization, carve-outs, and nebulous level of care criteria for mental illness and substance use disorders. These marginalizing practices notably contribute to the growing crisis of access to care and prolonged Emergency Department stays for our most critically ill patients.

It is vital that our Association supports all psychiatrists in their everyday professional lives. Maintenance of board certification being required for medical licensure, hospital credentialing, and insurance empaneling is doing nothing but exacerbating the alarming loss of practicing psychiatrists. This relentless hemorrhaging of psychiatrists further detracts from the provision of competent patient care.

Lastly if elected, I will be an ardent voice on the Board of Trustees in combating the ever-expanding encroachment on our scope of practice by non-physicians.
Tell us about your most important achievement.

My most important achievement is optimizing the medical care of all the patients that I take care of. Many of my patients are forgotten and abandoned by society such as the homeless, veterans, those with chronic persistent mental illness, or otherwise disenfranchised individuals.

My patients are my True North. Everything that I or my teams do on their behalf is always framed within the question of “Is this what is best for the patient?” My efforts in this regard are not limited to patient care but include longitudinal teaching of medical students/residents as well as local and national advocacy within the Massachusetts Psychiatric Society and American Psychiatric Association.

Where does the profession of psychiatry need to be in five years?

Our profession needs to be in a more secure position in terms of parity, workforce, and scope of practice. The Board of Trustees plays a critical role in all these areas. It is vital that our Association supports all psychiatrists in their everyday professional lives. Maintenance of board certification being required for medical licensure, hospital credentialling, and insurance empaneling is doing nothing but exacerbating the alarming loss of practicing psychiatrists. This relentless hemorrhaging of psychiatrists further detracts from the provision of competent patient care. Lastly if elected, I will be an ardent voice on the Board of Trustees in combating the ever-expanding encroachment on our scope of practice by non-physicians.

Tell us something about yourself that most people don’t know.

As the son of immigrants, Portuguese was my first language. My parents enrolled me in school a year early as I rapidly outstripped the capacity of signs seen around the city and Sesame Street to teach me English. It was fulfilling for my family to learn English together.

My personal experience with English as a second language is the impetus behind my efforts ensuring that medical interpreters are always used with our patients that have limited English proficiency.
CANDIDATES FOR

AREA 4 TRUSTEE
As a social worker, I worked with families challenged by poverty, abuse, housing and food insecurity, and health disparities. They were in survival mode. I was unaware that these issues were known as social determinants of health, or efforts to speak on their behalf was advocacy. Yet, it was advocacy for them that led me to medical school. Medical school was difficult as I lacked mentors and lost my rock, my father. I found myself in the same survival mode as my former clients. It was not until residency at Mayo Clinic that I had the resources and opportunities to thrive through mentorship. At Mayo Clinic, I gained skills to advocate for underserved patients.

A naturally avoidant person, I enjoyed caucusing, providing testimony, and word-smithing resolutions. When applying for academic promotion, I was asked to provide a list of authored resolutions. The request caused me to pause because I had never compiled such a list. For each policy or position statement, I focused on improving patient outcomes, not garnering credit. I compiled the list then returned to work.

My life’s work is advocating for underserved populations, including minoritized and rural communities and those involved with criminal justice systems. These activities have sustained me. It is not an exaggeration to say that my career in corrections would have been impossible without my engagement in organized medicine.

Recently, the APA has sought to remove barriers to achieve health equity and end systemic racism within the APA and psychiatric treatment. External influences and internal challenges risk the sustainability and progression of these efforts. It is my earnest desire to influence the APA’s future strategies to maintain these gains by performing outreach to communities like my adopted rural home and to seek efforts to end the status of correctional facilities as America’s largest mental health providers.
Tell us about your most important achievement.

As a child, I recall healing dolls maimed by an older brother. I dreamed of being a doctor. However, my dream was deferred after becoming a mother at 17, marrying at 18, and leaving an abusive relationship at 20 with three children in tow. Against the odds, I graduated from the University of Chicago then pursued a career as a social worker to support my family. Medicine was my second career.

I never viewed my achievements as occurring despite being a teenage mother but motivated by motherhood. I am proud of my career but my most important achievement is ensuring that my children graduated from college, my eldest son, an Army veteran, earned a law degree, and my daughter became a master’s level social worker.

Where does the profession of psychiatry need to be in five years?

In five years, the APA and APAF, psychiatry must led efforts to increase awareness and understanding among both the public and within the House of Medicine that mental health is health, the criminalization of severe mental illness is unethical and unacceptable, preventive mental health care saves lives and preserves function, and physician led teams are the gold standard for achieving the best patient outcomes. Now and five years and beyond, it is essential that the APA prioritize educating the public and our patients to integrate preventive health into the practice of psychiatry, improve health care access and outcomes, and draft model legislation and policies that prioritize parity, equity and high quality mental health care.

Tell us something about yourself that most people don’t know.

Most people do not know that I aspired to be a physician and a dancer. From age five, I studied ballet. I dreamt of performing with Debbie Allen. I could hear her say, “...And right here’s where you start paying in sweat.” Every weekend without fail, I’d choreograph new dance routines. The reality is that I lacked the talent to become a professional dancer; however, there are moments when the right beat hits my soul, my feet begin to tap, and soon I’m dancing. Nowadays, it’s not Debbie Allen’s voice that pops up in my head but my embarrassed children saying, “She’s dancing again.” And that’s okay because, now and then it feels good to dance like no one, especially judgmental children, are watching.
APA is not just a professional organization. It is a community - our community. Like any other human organism, it is ever evolving. How our community evolves is directly influenced by the people we choose to lead it.

I am a Child & Adolescent, and Adult Psychiatrist. I am a foreign medical graduate who trained in and continue to practice in the Midwest. I am a former training director, who both taught and learned from my fellows. I remain an educator who is actively involved in medical student, resident, and fellowship education. I am a physician whose clinical work has included inpatient, outpatient, and community mental health centered care, who believes both psychopharmacology and psychotherapy are essential to healing. I am an administrative leader who believes in using quality improvement science to solve problems. I believe that teams that are aligned on mission, values, and purpose will work best together. I am an engaged member of APA who believes we can only get better by getting involved. I believe our people are our best asset.

We need to continue to build our community and sustain it. I believe we should foster a community that reflects our identity as physicians, clinicians, scientists, educators, lifelong learners, and advocates for our patients and our profession. We have a choice to invest in this. You as voting members can choose the leaders who will carry the torch of what you believe in.

As we welcome a new CEO and medical director to the organization, it is the responsibility of the board to make sure that their priorities and values are aligned to that of our membership community. If elected, I will strive to serve by making thoughtful decisions on your behalf, using my strengths and skills to represent the interests of Area 4.
Tell us about your most important achievement.

My most important professional achievement is the career I have built at Cincinnati Children’s Hospital Medical Center, where I have spent my entire career. Through the generosity of many teachers and mentors and leaders, I have been fortunate to have a job that supports me, challenges me intellectually and allows me to explore my interests. Even after more than 20 years of practice, I continue to evolve my practice. This is both an achievement and a gift.

Where does the profession of psychiatry need to be in five years?

Psychiatry needs to own our identities as physicians, psychotherapists, psychopharmacologists, neuroscientists who practice at all levels of care and in all practice settings. With our current mental health crisis, we need to have improved access to psychiatric care by expanding those practice settings to include partnerships with primary care using collaborative care models. We need to be adequately reimbursed for the services we provide in all these settings. We need to grow our workforce pipeline to practice in all these settings by advocating for loan repayment, and demonstrating all the ways that psychiatry as a career is fulfilling.

Tell us something about yourself that most people don’t know.

I am a bit of a hedonist. I love to travel – 6 continents, 29 countries – so far. I love to try new restaurants, cuisines from different cultures, wines and cocktails. Love to scuba dive. Love music of all kinds: rock, folk, jazz, alternative, rap, soul, funk, R&B, hip hop, salsa, country, bluegrass, opera, classical, Broadway musicals. In 2022, I saw 25 bands live in concert. Highlights from 2023 include Joni Mitchell, Taylor Swift, Brandi Carlile, Mavis Staples, Blondie, Buddy Guy, Brittany Howard, Pearl Jam. Work hard, play hard is kind of my motto.
CANDIDATES FOR

AREA 7 TRUSTEE
My platform is based on being a voice for the diverse membership of the APA. I am committed to the APA and passionate in representing the unique challenges within Area 7. In my role as an APA Trustee from 2021 to 2024, I have been committed to provide and be a conduit for deeper relationships that bring in other ways of knowing such as Indigenous knowledges which has built deeper relationships and understanding of the diversity of APA members.

My intent in seeking another term as Area 7 Trustee is to continue to be a voice for the marginalized and those who feel they are not heard, including Early Career Psychiatrists and Resident, Fellow Members. Being a part of the less than 1% of APA membership as an American Indian, I know what it feels like to feel invisible and have a sense of not belonging. I am Navajo (Diné) and grew up on the Navajo nation in Arizona.

The American Psychiatric Association is over 175 years old, and its founders perpetuated racist ideologies and practices but has made steps forward to make amends when the Board of Trustees and President submitted an apology to Black, Indigenous and People of Color in 2021.

The Circle Way practice is an Indigenous process that turns the hierarchy on its side and is utilized for creating a higher level of connection and belonging with the participants. As co-chair of SRAC, I led a Circle Way process for the APA Board of Trustees to elicit a deeper connection between one another that was not dependent on the western, hierarchical model. It was meaningful for many because it created an environment for holding the group through difficult conversations by focusing on the intention of discussing complicated issues of structural racism within the APA.
My greatest accomplishment is co-authoring the action paper on Inclusion of Territorial Acknowledgment in APA Meeting Programming which was passed by the APA Assembly in 2019. This has led to all APA meetings to begin with an Indigenous Land Acknowledgment at every APA meeting to raise awareness of the Indigenous homelands we gather on for meetings and to understand our role in building equity and inclusion.

The profession of psychiatry in five years needs to have centered itself in addressing and dismantling the climate crisis and reducing its carbon footprint; it needs to have a division of structural racism and have a diverse leadership and continue to be a leader in medicine. It needs to continue to center its strategic decisions within the four strategic pillars that guide us: Advancing Psychiatry; Diversity; Education and Supporting Research.

What most people don’t know about me is that I had a close mentorship and friendship with Dr. Karl Menninger, who befriended my parents and grandfather, who was a revered medicine man among the Navajo. He got me interested in psychiatry and opened my world view to see how psychiatry addressed multiple dimensions of a person, much like Navajo healing focuses on healing body, mind, and spirit.
CANDIDATES FOR
RESIDENT-FELLOW MEMBER
TRUSTEE-ELECT
CANDIDATE PLATFORM

As resident and fellow training changes to support integrated care settings and collaborative care models amid the largest investment in mental health since the 1960s, I vow to champion residents’ and fellows’ concerns while ensuring your voices are heard and respected in the decision-making process of the APA.

NICOLAS K. FLETCHER, M.D., M.H.S.A.
Tell us about your most important achievement.

My most significant achievement is threefold: being able to provide for and care for my family, becoming a physician, and being a leader in my community.

Where does the profession of psychiatry need to be in five years?

I believe the profession of psychiatry needs to be at the forefront of whole-person primary health services because mental health is physical health. Psychiatry should also be a leader in public health approaches to our current mental health emergency while eliminating barriers to the treatment of mental illness.

Tell us something about yourself that most people don’t know.

Something about me most people don’t know is that while I was born in the US, my family hails from the West Indies, and before starting elementary school in the US, I spent several years abroad. With that said, my love for Caribbean culture runs very deep.
Thank you for this opportunity for young psychiatrists to have a voice within the field. As a resident, I am looking forward to a long career ahead in psychiatry, and I am invested in a goal we all share to increase regular, equal access to mental health treatment as part of medical care. I have experience and passion working with marginalized populations I would bring to the APA as your RFMTE, as well as enthusiasm, commitment, and a desire to enact lasting change within the organization and nationwide.

To me, psychiatry is unique within healthcare in the mission to not just treat illness, but to go beyond and restore lives. We look at the whole picture, incorporating biopsychosocial factors into our formulations, and often also into our treatment goals. Unfortunately, success too often depends on factors outside our control, but I believe in the power of organizations like the APA to make our voices heard in advocating for our patients and field.

I am invested in the organizational potential of the APA. One of my main goals as RFMTE would be to foster a collegial environment where diverse perspectives can be heard and discussed in a productive, respectful manner. As a resident and fellow representative, I will be a resource and voice for my peers across the country. As an APA trustee, I will actively seek opportunities to increase patient access to care, trainee access to education, and physician access to resources to perform our professions to the best of our abilities.

Thank you for your time and consideration. It would be an honor to serve as your Resident-Fellow Member Trustee-Elect.
Throughout medical school, I served as President of our Asian Pacific American Medical Student Association chapter and helped pioneer community-based outreach and interventions targeting populations who do not regularly seek healthcare. Working on these initiatives opened my eyes early on to the huge need, even now, for continuing education on identifying mental illness and fighting against stigma, especially in underserved communities. It also trained me in identifying unaddressed problems, communicating a need, and navigating healthcare systems to direct resources where they are most needed — experience that will serve me as RFMTE developing policies and initiatives to further mental health awareness and treatment, both in patients and in healthcare/governmental leadership.

As mentioned above, I believe psychiatrists are uniquely empowered to “do right” by our patients, as we often have access to community resources not available elsewhere within healthcare. I am fortunate to have worked with wonderful social workers and case managers and have seen how addressing social needs can dramatically improve treatment outcomes. However, I recognize that this is a service not all patients benefit from.

I look forward to a future where recognition of mental health as a key component of well-being continues to grow in society and within medicine. I hope for institutional and legislative support to address access to services to ensure psychiatrists have the tools to ensure our patients are provided their best chance for long-term success.

I have been an avid skier since age 9 and recently began teaching my partner, a native Texan, to ski. Although it has been a test of patience, teamwork, and communication skills, I have developed a love for sharing knowledge. Seeing her conquer her first black diamond felt like a milestone achievement for the both of us. I hope to continue growing my passion for teaching in the future and hope to continue serving the APA to promote psychiatric education and research to provide high-quality care.