

OKLAHOMA PSYCHIATRY

April, May, June 2020

VICTORY FOR MENTAL HEALTH PARITY

Lawmakers did something different this legislative session. They shared the opinion that Oklahomans suffering from mental health and substance abuse disorders needed help. This came with the passage of Senate Bill 1718, which Gov. Kevin Stitt signed, requiring health insurance coverage for mental illness be on par with what federal law mandates.

Oklahoma now joins Arizona, Colorado, Illinois, Tennessee, Connecticut, Rhode Island, New Jersey, Delaware, Indiana, West Virginia and Washington D.C. who also have insurance parity ensuring that all in-state health plans comply with a federal financial parity law signed in 2008 by former President George W. Bush. States which have partial parity laws in place include Wyoming, Texas, Minnesota, New York, Maine, Maryland and Virginia.

Lawmakers gave easy approval to Senate Bill 1718 as the Senate passed the bill by a vote of 44-1 and the House approved the measure 100-0. The new law will take effect November 1st.

WORKSHOP UPDATE

In the midst of the beginning of the Coronavirus pandemic we faced this past March, the free membership workshop, *"Increase in Adolescent and Physician Suicide: Hiccup or Trend?"* was postponed.

As soon as it is possible to have in-person gatherings of more than a few people including a dinner, this workshop will be rescheduled with a twist. Instead of one program, the workshop will be held in Tulsa hosted by the **Tulsa Psychiatric Association** and in Oklahoma City hosted by the **Central Oklahoma Psychiatric Society**. Watch for details! ❖

Under Senate Bill 1718, insurance companies that offer mental health or substance use disorder plans would have to report annually to the Insurance Commission annually on the process by which they determine the criteria for mental health benefits and the criteria for medical and surgical benefits. This will better allow Oklahoma enforcement to require mental health and substance use care to be covered at the same level as physical health care on plans authorized by the state. ❖

OPPA ELECTS NEW OFFICERS

In a normal year, the newly elected officers and councilors for the *Oklahoma Psychiatric Physicians Association* would have assumed leadership during the annual meeting luncheon. Instead, it was at the Zoom virtual Executive Council meeting held March 28th.

Welcome to **Jason Beaman, DO**, President, Tulsa; **Shannon Thomas, DO**, Vice President, Oklahoma City; **Britta Ostermeyer, MD**, Secretary, Oklahoma City and **Tessa Manning, MD**, Treasurer, Tulsa; **Harold Ginzburg, MD**, APA Delegate, Norman and **Shree Vinekar, MD**, APA Delegate, Oklahoma City.

Councilors-at-Large include **J. Bryan Cates, DO**, Tulsa; **Robyn Cowperthwaite, MD**, Oklahoma City; **Vijaya Ekambaram, MD**, Oklahoma City; **Hashib Faruque, MD**, Oklahoma City; **Courtney Nixon, MD**, Oklahoma City; **Jed Perdue, MD**, Oklahoma City; **Art Rousseau, MD**, Oklahoma City; **Lauren Schwartz, MD**, Oklahoma City; **Haiwang Tang, MD**, Oklahoma City and **Ashley Walker, MD**, Tulsa.

Congratulations! ❖

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Councilors
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Robyn Cowperthwaite, MD
Vijaya Ekambaram, MD
Hashib Faruque, MD
Courtney Nixon, MD
Jed Perdue, MD
Art Rousseau, MD
Lauren Schwartz, MD
Haiwang Tang, MD
Ashley Walker, MD

APA CONDEMNS RACISM CALLS FOR END TO RACIAL INEQUALITY IN US

The *American Psychiatric Association* (APA) recently issued the following statements in response to demonstrations across the nation in response to police brutality and the institutional racism that is being brought to the forefront.

"The unrest playing out in cities across America is a reaction to the racism that has scarred this country for centuries and never been properly addressed," said **APA President Jeffrey Geller, M.D., M.P.H.** "The demonstrations are a result of racism against Black people that has gone unchecked—and at times has been fostered by leaders of this country. APA will not stand for racism against Black Americans. The horrific death of George Floyd has affected the mental well-being of everyone who has witnessed this senseless tragedy. When Americans are already suffering under the emotional toll of COVID-19, this blatant act of police brutality threatens to undermine the sense of stability of so many Americans."

The APA calls upon authorities in Minneapolis to prosecute the officer who caused George Floyd's death, as well as the other officers involved, to the fullest extent allowed by law. Justice in this case will be just one step in the healing process of this country. The APA Board of Trustees has a long history of condemning police brutality, including two policy statements passed in 2018, [condemning racism](#) and [police brutality](#).

"The civil unrest taking place in America is a call to action to all Americans to address the longstanding racial inequalities facing the Black community," said **APA CEO and Medical Director Saul Levin, M.D., M.P.A.** "Centuries of systemic and institutional racism toward Black Americans has led to decreased access to health care and multiple adverse health outcomes—as recently seen during the COVID-19 pandemic—in addition to anxiety and lower life-expectancy. We need to fight racial inequalities and discrimination that are life-threatening to so many Black Americans. APA stands with the Black Community and all those opposed to racism to protect and improve the lives of the those who have experienced discrimination and the associated trauma."

The APA believes that all forms of racism and racial discrimination affect mental health and well-being and negatively impact the nation as a whole. We must fight racism in all its forms, embracing multiculturalism, diversity, and greater inclusion. The APA stresses that anyone who is suffering trauma because of the death of George Floyd, or the civil unrest ongoing in America or health inequalities, to seek psychiatric treatment. Our members are standing by to help. ❖

Editor's Note: See **THEY'RE NOT TOO YOUNG TO TALK ABOUT RACE** poster on the final page of this newsletter.

IN MY OPINION

Editor's Note: *There is a list serve for members of the Assembly of the APA. This opinion piece was written by Shree Vinekar, M.D. one of two Assembly representatives from Oklahoma. Dr. Harold Ginzburg is the other representative.*

Dear Friends and All Concerned Psychiatrists,

I immensely appreciate this opportunity to participate in an open free uninhibited discussion about racism. I thank those of you who initiated it and especially Jessica Isom, M.D., M.P.H., (*Area 1 ECP Dep Rep, Massachusetts Psychiatric Society Councilor*) for a scholarly review of the subject with links and references. Though knowledge is important as Jessica and others stated, it is the visceral response of disgust for this phenomenon of social evil that needs to be openly expressed by all of us and especially we as an organization, the oldest and the largest medical organization in U S.

To this end, I thank Vasilis Pozios (*Vasilis K. Pozios, MD, DFAPA, Michigan Psychiatric Society Representative to the Assembly, APA Council on Communications Liaison to the Assembly*) for bringing to light the statements made by Dr. Jeffrey Geller (*current President of the APA*) and Dr. Saul Levin (*CEO and Medical Director of the APA*) condemning racism in all forms. It is intriguing to me that such attitudes are so widespread and are so well-tolerated as a way of being "civilized and polite" (*that means not talking or doing anything about it*) for decades and centuries, nay not even talking about it without fear of becoming a *persona non grata*.

BY SHREE VINEKAR, MD

I do not know how many of the participants in this discussion are of what race or what ethnic origin or their background. **Condemning racism in all forms must be a unanimous** decision of the Assembly, Board of Trustees and in fact all the members of APA.

My mentor who came to this country in the mid-1940's and was a research associate in NIMH in the mid-1950's was not given access to a public restroom on the Delaware Beach, on the Atlantic Ocean, in the state of Delaware. It shows that racism is against the "colored" and that largely includes the African Americans but is not limited to them.

An Indian grandfather who came to assist his son and daughter-in-law as a babysitter was tackled and put down by the police while taking an innocent morning walk making him a quadriplegic. There was a shameful statement that he was mistaken to be black. So, it is obvious that any nonwhite, with a non-white name or non-white color can be roughened with undue and unwarranted hostility and atrocity. So, we all Indians, too, stand together with the African Americans as the historical victims of racism for centuries since the "White Man" landed on the Indian subcontinent. I am ashamed to tell you all that. Even 20 years after attaining independence of India there were swimming pools and clubs, etc. in India that were open only to whites. This kind of racism, therefore, must be understood as a global phenomenon and not limited to the U.S.

SEE IN MY OPINION ON PAGE 7

HOW WE CAN SUPPORT OUR BLACK COLLEAGUES

by **Maureen Sayres Van Niel, MD**

Chair of the MUR Committee of the APA Assembly

Dear Friends,

As most of you know, the Minority/Under-Represented (MUR) Committee of our organization and Assembly is charged with *“advocating for minority mental health issues, etc.”* Our nation faces a plethora of painful crises in minority communities, including the Asian-American, LatinX, LGBTQ, Jewish, Native American, Muslim, immigrant, and women’s communities. While we intend to address all these important MUR issues this year, recent events compel us to address now the longstanding issue of violence and unequal treatment directed against our Black community.

Systemic racism and its lethal guardians in this country have always had annihilatory control over the lives and souls of Black Americans. We know that because we have observed that in full view for the 25-100 years we have been living in the United States. If that is not a topic to be addressed by this organization and most particularly by its minority committee, then we are losing the battle for the soul of our work as mediators of health.

Our Black psychiatry colleagues at the APA have faced living with racism, excessive force and murders by law enforcement, profiling, gun violence, correctional and judicial system injustice, increased maternal and infant mortality, widespread health disparities including with COVID and on and on and at some point have become “symptomatic” with rage, hopelessness, daily fear, exhaustion, leading finally at times to pure sorrow and weeping. The level of stress on Black Americans at this time is beyond comprehension to us. To consider this social scourge outside of the purview of our practice of psychiatry would be a grave mistake.

As non-Black members of the Assembly, we will never be fully able to understand what our Black colleagues have always lived with. But we should all care deeply about this problem so we ask: How far can we go to make use of our power and privilege to make lasting change instead of just experiencing transient concern?

When I spoke with Black members, they have shared **three ways** in which we can be of help to make lasting change.

The **first** way is that if we hope to be clear and present allies for them, we can learn to avoid our own problematic behaviors and statements with regard to race. To that end, here is a link to an excellent scaffolded reference sheet created by Black community members that will enlighten us. As Assembly representatives, we can also work with our own District Branches and Area Councils to encourage them to provide programming on these topics.

<https://docs.google.com/document/d/1PrAq4iBNb4nVlCtsLcNIW8zjaOXBLkWayL8EaPlh0bc/mobilebasic> [docs.google.com]

The **second** way is that we need to examine the actions of our own community of members and employees at the APA before we are quick to judge our society.

In the words of one member:

“I think it is important that work is done to ensure that our Black members are supported. This includes making us aware that our non-Black members are genuinely concerned for our well-being. The reality is that as Black psychiatrists we are processing through this re-experienced trauma while continuing to show up to work every single day to do what we were trained and love to do. We watch the news, have difficult conversations with our children, cry, deal with the racial tensions in our day-to-day (not just the past week) then take a shower and get back to work as a psychiatrist – sitting with and containing all of our patients’ trauma (related or unrelated). It’s exhausting. There should be a call to action for the APA and its leadership to recognize this difficulty/hardship for members of our own community. There should be a call to action for all Assembly members to champion the needs of black psychiatrists and our communities and a restatement of the Assembly’s commitment to make racial and health equity priorities within our own organization. The APA is not immune to any of the racial issues that play out in our country. As an organization we still have a lot work to do.”

If our psychiatric organization is strong in fabric, it should be a place where we support one another and share ideas about how to survive and improve the circumstances in our lives and our careers as psychiatrists. As always, as we as physicians go about working for change, we must realize that because of our ingrained reflex to care for others and the Hippocratic oath we have taken, we must be careful to heed the warning signs if we are reaching our limits and seek rest and perhaps help from others when we need it.

The **third** way is to express our anti-racism solidarity by using our own resources to lift up and donate to some causes and organizations in the Black community which are proved assets in the struggle to overcome injustices. They need funds to do their work. Here is a list of 10 ideas for great organizations you could donate to or join now, once, or hopefully in an ongoing way.

1. To contribute to the George Floyd family’s well-being and future: <https://www.gofundme.com/f/georgefloyd> [gofundme.com]
2. To contribute to the bail of protesters who were arrested: Bail funds are likely in every state as well.

National Bail Fund

https://secure.actblue.com/donate/bail_funds_george_floyd [secure.actblue.com]

Minnesota Freedom Fund

<https://minnesotafreedomfund.org/> [minnesotafreedomfund.org]

SEE SUPPORT OUR BLACK COLLEAGUES ON PAGE 5

2020 OKLAHOMA LEGISLATIVE UPDATE

The 57th Oklahoma Legislature officially adjourned sine die **Friday, May 29th**, The *House of Medicine* faced many obstacles this year.

It is important to thank the **Oklahoma State Medical Association, Oklahoma Osteopathic Association** and the **Oklahoma Patients Coalition** for their expertise and support this session. The *Oklahoma Psychiatric Physicians Association* is grateful for their leadership and commitment to all Oklahoma physicians. The following is information on a few of the many bills passed, vetoed or dead this session.

SCOPE OF PRACTICE

Senate Bill 1915 (David/Pfeiffer) – Legislative leaders from both the House and Senate insisted a Physician Assistant (PA) measure be heard this session. This being the case, negotiations on SB 1915 continued throughout the final week. The final version specifically states that PA's **cannot** "provide health care services independent of physician supervision." The language allows PA's to be considered "primary care providers" allowing them to direct bill for service provided under their "delegating physician" agreement. The measure also states, "at all times a physician assistant shall be considered an agent of the delegating physician." The language was reviewed by the Oklahoma Patients' Coalition (all Physician specialty societies) before being considered in the legislature. (Passed House 81-16; Passed Senate 43-1) **Signed by Governor. EFFECTIVE August 27, 2020.**

Senate Bill 801 (Rosino/McEntire) – Requires that nurse anesthetists administer anesthesia and certain controlled substances *in collaboration with, not under the supervision of,* a physician. The negotiated definition of the term "collaboration" was agreed upon by the Oklahoma Society of Anesthesiologists and the Oklahoma Association of Nurse Anesthetists. (Passed Senate 44-0; Passed House 100-0) **Signed by Governor. EFFECTIVE November 1, 2020.**

House Bill 3862 (Martinez/Rosino) – Allows optometrists to dispense certain drugs and drug samples. (Passed House 72-1; Passed Senate 31-12) **Signed by Governor. EFFECTIVE November 1, 2020.**

House Bill 2194 (Randlemary/Pemberton) – This bill was left over from last session. It expands the definition of "physician" to include psychologists, therapists or counselor. It again was stopped in committee and not heard.

LIABILITY LIMITS

Senate Bill 300 (Daniels/O'Donnell) COVID-19 Public Health Emergency Limited Liability Act. This measure places immunity from civil liability for a physician, other health care provider or health care facility resulting from an act or omission occurring when arranging or providing services for the treatment of a person with a suspected or confirmed diagnosis of COVID-19.

Limits will not be in place if the act or omission was the result of gross negligence or willful or wanton misconduct. The provisions go into effect immediately upon being signed into law and will be in effect until **October 31, 2020**, or until such time as the Governor affirmatively concludes the health emergency declarations, whichever is later. (Passed House 95-2; Passed Senate 38-9) **Signed by Governor. EFFECTIVE May 12, 2020.**

BUDGET

Senate Bill 1922 (Thompson/Wallace) – The legislature passed the FY2021 budget which went to Governor's desk the week of May 22nd. Under the **budget agreement**, most of the \$1.4 billion in less revenue compared to the current budget is filled by using reserve funds, cutting one-time spending, temporarily redirecting non-appropriated money into the budget, and agency appropriation reductions of 4% or less in most cases. The Oklahoma Health Care Authority budget is not cut in this agreement. (Passed Senate 36-11; Passed House 77-23) **VETOED** by the Governor. The **Legislature veto override** (Passed Senate 35-11; Passed House 79-20) Budget becomes law over the objections of the Governor.

PUBLIC HEALTH

Senate Bill 1423 (McCortney/Wallace) – Raises the age to purchase tobacco products from 18 to 21. This would mirror federal law and allow enforcement to be conducted at a state and local level. (Passed Senate 28-19; Passed House 79-20) **Signed by Governor. EFFECTIVE May 19, 2020.**

GENERAL GOVERNMENT

House Bill 4064 (McCall/McCortney) – Consolidates the Department of Mental Health and Substance Abuse Services into the Health Care Authority, transferring related powers, duties, responsibilities, and authority. (Passed House with Title off 61-28; to Senate calendar; **not heard; Dead pursuant to Rules**)

Senate Bill 1870 (Murdock/McEntire) – Dissolves Commissioner of Mental Health and Substance Abuse Services. (Passed Senate with Title off 31-14; to House Calendar; **not heard; Dead pursuant to Rules**)

MEDICAID EXPANSION

Governor Kevin Stitt has set **June 30, 2020**, the same as Oklahoma's Primary Election, as the date on which Oklahoman's will vote on **State Question 802**. If passed, this State Question would initiate full Medicaid Expansion in Oklahoma as present in the federal Affordable Care Act (ACA). OSMA supports the acceptance of additional federal dollars redirected back to the state which are dedicated to expanding access to Medicaid health care services to Oklahoman's in need. ❖

BENJAMIN RUSH AWARDS ANNOUNCED

Due to the postponement of the annual CME conference in March, the *Oklahoma Psychiatric Physicians Association* was not able to publicly recognize the **Benjamin Rush Award** recipients this year. Now in its 53rd year, these awards are named for the father of American Psychiatry, Benjamin Rush, M.D., and recognizes the outstanding students in the field of psychiatry in the graduating class at the University of Oklahoma College of Medicine in Tulsa and in Oklahoma City.

Honored this year are **Jonathan Nahmias**, University of Oklahoma College of Medicine, Tulsa campus and **Emily Boyer**, University of Oklahoma College of Medicine, Oklahoma City campus. Each were mailed a certificate and a \$250 check.

Jonathan Nahmias performed exceptionally well and with enthusiasm during his third-year clerkship. He knew the criteria, established good therapeutic alliance with patients, and did a good job obtaining information from patients.

Jonathan is well-motivated and a hard-working medical student. He has impressed our attending faculty with his knowledge base, clinical skills, attitude, and diligence.

He received his Doctor of Medicine degree in May from the University of Oklahoma College of Medicine-Tulsa and has accepted a general residency psychiatry position at Duke University Medical Center in North Carolina. The Department of Psychiatry faculty feels that he will be an excellent physician and are delighted to give him this award.

Emily Boyer has gone above and beyond her medical student role to help others. Emily's Psychiatry elective site supervisors said it was obvious that psychiatry is the specialty that she is most passionate about. She went above and beyond to look beneath the surface and think critically about complex patients. Her presentations were cogent and concise and she has an outstanding fund of medical knowledge. Emily is above her current level of training.

Emily is pleasant, has an engaging personality and is a true team player. She also wrote an article that was accepted by the *Psychiatric Times*. It was professionally researched, reflective and professionally written. Her Psychiatry Clerkship site supervisors noted she had great communication skills and enthusiasm for learning. She is hardworking, enthusiastic, and focused. We believe Emily represents all the qualities embodied by the Benjamin Rush Award. She has accepted a general psychiatry residency position at the University of Oklahoma Health Sciences Center so will be staying in Oklahoma City.

When the first award was presented, **Dr. Jay Shurley**, Oklahoma District Branch President, said in part, "*Capacity for, and talent in the unique skills required by the practice of psychiatry, is a special gift not evenly distributed among the population of our future physicians and not possessed in equal measure by them. Whether the student chooses eventually to pursue specialization in this field, is of course, his personal decision to make. But this award indicates that such a choice would be widely open to him.*" ❖

SUPPORT OUR BLACK COLLEAGUES

CONTINUED FROM PAGE 3

Colin Kaepernick's Know Your Rights Legal Initiative:

<https://www.knowyourrightscamp.com/legal>

3. To contribute to an organization that works to build Black political power by initiating their national voter registration drive and supporting the Black agenda 2020:

Black Futures Lab: <https://blackfutureslab.org/>

4. To contribute to an organization looking at data- and research- informed policy solutions that communities can put in place to end police violence: Campaign Zero:

<https://www.joincampaignzero.org/solutions#solutionsoverview>

5. To contribute to a Black, Queer, and Trans led organization committed to dismantling systems of oppression and violence, and shifting the public narrative to create long term change:

Black Visions: <https://www.blackvisionsmn.org/>

6. To support criminal justice and education reform for minorities: Equal Justice Initiative: <https://eji.org>

7. To contribute to a nonprofit media organization in Minnesota which is working on exposing the root causes of dynamic social and economic injustice and environmental issues:

Unicorn Riot: <https://unicornriot.ninja/>

8. To contribute to Black Women's justice and health initiatives: Black Women's Justice Institute: <https://www.nbwji.org/>

Black Women's Maternal Health:

<https://www.nationalpartnership.org/our-work/health/reports/black-womens-maternal-health.html>

9. To contribute to Barack Obama's My Brother's Keeper Initiative to build lifetime support for Black men and boys:

<https://www.obama.org/mbka/>

10. To contribute to an organization that works for environmental and climate justice NAACP Environmental and Climate Justice Program:

<https://www.naacp.org/environmental-climate-justice-about/>

Thank you for your having taken the time to read this. Let's make a resounding difference beyond our initial outrage. ❖



Here are highlights from the approved minutes of the OPPA Executive Council meeting held via Zoom Conferencing on August 8, 2019 in Oklahoma City at the office of Dr. Art Rousseau and in Tulsa at the OSU Center for Health Sciences.

Treasurer's Report (Dr. Britta Ostermeyer) – Dr. Ostermeyer presented the second quarter *Operations Budget report for 2019*. She noted the organization was in good shape as membership dues income is 60% of budget and since the APA sends the dues notices in September, the third and fourth quarters are normally our largest membership income. The raffle at the annual meeting raised almost \$814 for the Resident Fund. Dr. Ostermeyer thanked Dr. Geis for this idea to raise money for the residents.

Executive Director – Mrs. Mixon announced she has set her soft retirement date as **July 1, 2021**. She has spoken to Ricardo Juarez, APA District Branch Director, and found the breakdown for all executive director positions is about 1/3 association management companies; 1/3 part of the state medical association or a residency training program; and 1/3 employed directly by the district branch.

Dr. Rousseau also announced that he is "riding her coattails" and set his retirement for July 2022. He will continue to be involved with the OPPA, but Council needs to think about a replacement for his Legislative activities. Council thanked Dr. Rousseau for his countless hours of dedicated service.

After much discussion and review of the Executive Director job summary Mrs. Mixon distributed, Dr. Rousseau moved to have Mrs. Mixon review the job summary and make any necessary changes since it was written in 2008 and bring it to the next Council meeting for discussion. Dr. Ostermeyer second.

Zoom Video Conferencing – Mrs. Mixon announced the subscription to Zoom Conferencing was approved by 60% of Council. The cost is \$12.49 per month if paid a year in advance (\$149.90 per year). This Executive Council meeting is the first use of this new system which the APA is now using exclusively. The conference rooms in their new building have the Zoom conference capabilities.

WordPress Website Training – Mrs. Mixon announced she has enrolled in a two-part website development training program at the Moore-Norman Vo-Tech Center. This training will allow her to create a new website for the OPPA which is more user friendly and easily updated. Other district branches are also moving to the WordPress format.

APA Expedited Grant – Mrs. Mixon announced, for the ninth year, the OPPA has received an APA Expedited Grant for the program, *"Increase in Adolescent and Physician Suicides: Hiccup or Trend? 360° View, Challenges and Discussion."* This workshop will be held on the Friday before the annual CME spring conference in March 2020. This program will include a half-day workshop and evening dinner interactive symposium.

It will be free to all OPPA members. Non-members and other healthcare professionals would be charged a CME fee to attend. The approved APA Expedited grant amount received was \$2,778.

2018 Taxes Filed – Mrs. Mixon reported the 2018 tax reports have been filed and the OPPA finances have been reviewed by Benchmark Tax Associates.

Child Psychiatry (Dr. Brent Bell) – Dr. Bell reported he and Dr. Sara Coffey are co-chairing a child psychiatry psychopharmacology workgroup. They recently participated in a conference call with Texas who has many Medicaid payors as most other states are limited such as Oklahoma with one payor. The guidelines are now under review by legal. Once approved they will be made available to all psychiatrists and primary care physicians.

Continuing Education (Dr. Shree Vinekar) – Dr. Vinekar thanked Dr. Beaman for working on finding a new venue for the annual CME conference in Tulsa. The Tandy Center on the campus of the OSU Center for Health Sciences is available on Friday and Saturday, March 27-28, 2020. Dr. Bell ask if we were interested in the RAPP Center in 2021. Council agreed to host the 2021 CME Conference at St. Anthony Hospital in Oklahoma City.

Delegate (Dr. Shree Vinekar) – Dr. Vinekar reported the action papers are in process and Maintenance of Certification will rest as is for two years.

Membership – Since the last meeting, the OPPA has gained seven new members; eight members have reinstated their memberships and one has transferred to Virginia. Dr. Willis Holloway has advanced to Life Member; Drs. Ana Maria Gutierrez and Rebecca Susan Daily have advanced to Distinguished Life Fellow and Dr. Deanna Storts has advanced to Life Member.

Resident Program Directors – Dr. Ashley Walker reported the OU-TU School of Community Medicine is off to a good start and could increase the class size from five to six in the next year. Dr. Beaman reported the OSU Tulsa program is doing well and began its 4th year residents. The program now has its full compliment of 20 residents. The ACGME site visit went well with no serious concerns identified. The first Addiction Psychiatry fellow was matched. Two fellows can be taken each year. Dr. Ostermeyer reported OU Oklahoma City also had a good match.

COPS – The next meeting is scheduled for October 3rd. Speaking will be Dr. Rachel Dalthorp on *Ketamine Enantiomers: Efficacy, Mechanism of Action and Clinical Implications* and Dr. Gabe Cuka on *Correctional Psychiatry 2019*.

TPA – The next meeting is scheduled for September 19th. Speaking will be Dr. Jason Beaman of *Project Blue Streets*, Tulsa's protocol for medical clearance of psychiatric patients.

Meeting adjourned. ❖

OPPA MEMBERSHIP UPDATE

JANUARY 2020 - JUNE 2020

Welcome New Members

Nicholas Musso, DO, Resident Fellow, Tulsa
David Allen Beck, MD, Fellow, Tulsa (*transfer from Missouri*)

Reinstatements: Welcome Back!

Melanie Barrett, MD, General Member, Edmond (*2019 drop*)
Jana Bingman, MD, General Member, Tulsa (*2017 drop*)

Goodbye and Good Luck: Transfer from Oklahoma

Maheen Abbasi, MD, Resident Fellow (*to New York*)
Eudy Bosley, MD, Resident Fellow (*to Arkansas*)
Nandni Gupta, MD, General Member (*to Arizona*)
John Knox, DO, Resident Fellow (*to Colorado/Fellowship*)
Bharathi Raidoo, MD, General Member (*to North Carolina*)
Jahangir Ghaznavi, MD, Life Fellow (*to California*)
Mark Medlin, MD, General Member (*to Florida*)

Professional Advancements: Congratulations!

Britta Ostermeyer, MD, to Distinguished Fellow, Oklahoma City
Samuel Martin, MD, to Fellow, Jenks

Membership Expiration: Non-payment of 2020 Dues

Tayyaba Ali, MD, General Member, Edmond
Masood Ahmad, MD, General Member, Tulsa
Ifran Ahmed, MD, Resident Fellow, Oklahoma City

IN MY OPINION CONTINUED FROM PAGE 2

The statements made by Dr. Geller and Dr. Levin (*originally from South Africa*) are quite forceful. **APA denounces (openly condemns) Racism. (Period) Of course, in all forms, against anyone, anywhere and everywhere.** This needs to be our next step. All APA members will need to eradicate racism as much as possible from within themselves and around themselves to walk the talk. This evil has done more damage than COVID-19 over the centuries.

In the '60s when I came to the US the blacks were afraid to talk about racism. The whites who stood with them were called White niggers. APA was probably worried that the white members will be lumped together under that unspeakable epithet.

Times have changed. When I came to Oklahoma, I learned my chairman Jolly West, MD walked hand in hand with the blacks in front of the State Capitol demonstrating against racism. Psychiatrists like Jolly had the courage to openly denounce racism. He appointed Chester (Chet) Pierce, MD as full professor in the Department of Psychiatry when the blacks were being discriminated against. Needless to say, Chet was an eminently qualified and talented super intellectual psychiatrist who later became Professor at Harvard from where he retired.

We are not rediscovering racism. We do not know all about it, but we know it is evil and needs to end. Thank you and with best regards. ❖

Peter Armendariz, MD, General Member, Lawton
Irina Baranskaya, MD, General Member, Edmond
Hunter Caskey, MD, Resident Fellow, Norman
Rosemarie Caskey, MD, Resident Fellow, Norman
Jordan Cates, MD, General Member, Oklahoma City
Stephen Cates, DO, Resident Fellow, Broken Arrow
Tessa Chesher, DO, General Member, Tulsa
Michael Dunlap, DO, Resident Fellow, Tulsa
Judy Forshee, MD, General Member, Norman
Mark Fossey, MD, Life Member, Tulsa
Jeffery Jenkins, MD, General Member, Stillwell
Heather Jones, DO, Resident Fellow, Muskogee
Lauri Kearns, MD, Life Member, Norman
Madhusudan Koduri, MD, Fellow, Tulsa
Andrew Liew, MD, General Member, Tulsa
Birinder Mann, MD, Resident Fellow, Oklahoma City
Hema Mekala, MD, Resident Fellow, Norman
Lawren Merideth, MD, General Member, Norman
Joseph Michie, MD, Resident Fellow, Tulsa
Seth Migdalski, MD, Resident Fellow, Tulsa
Lori Miller, DO, General Member, Tulsa
Parostu Rohanni, MD, Resident Fellow, Oklahoma City
Hazem Sokkar, MD, General Member, Tulsa
Camisa Stewart, MD, General Member, Oklahoma City
Brady Vincent, DO, Resident Fellow, Broken Arrow

Membership Resignations

Charles Dukes, MD, Fellow, Oklahoma City ❖

APA NEWS & NOTES FOR DB/SAs



Have Ethical Questions Regarding COVID-19?

APA's Ethics Committee invites members to seek advice on ethical dilemmas they face during the COVID-19 pandemic. Submit questions to apaethics@psych.org, and a committee member will respond to you directly. Learn more: <https://www.psychiatry.org/psychiatrists/practice/ethics>

Practice Management HelpLine

As an APA member, you have access to APA's Practice Management HelpLine to assist with your practice management needs. Help is available on how to manage the day-to-day operations of your practice in the midst of this pandemic, including telehealth, coding, documentation, reimbursement, contracting with managed care companies, Medicare, Medicaid, and more. Email practicemanagement@psych.org or call (800) 343-4671. ❖

Oklahoma Psychiatry

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The Oklahoma Psychiatric Physicians Association, a district branch of the American Psychiatric Association, is a medical specialty society recognized world-wide. Our member physicians specialize in the diagnosis and treatment of mental and emotional illnesses and substance abuse disorders.

Mark your calendars for the first-ever Webinar hosted by the **Oklahoma Psychiatric Physicians Association**. This webinar will encompass the program and faculty originally scheduled for the March 28th CME conference in Tulsa, but postponed due to the COVID-19 pandemic.



Save the Date

Saturday, July 18, 2020

Time to be announced

Confirmation regarding the full agenda and faculty, cost of the CME program and login information will be emailed to members and posted on the OPPA website in the near future.

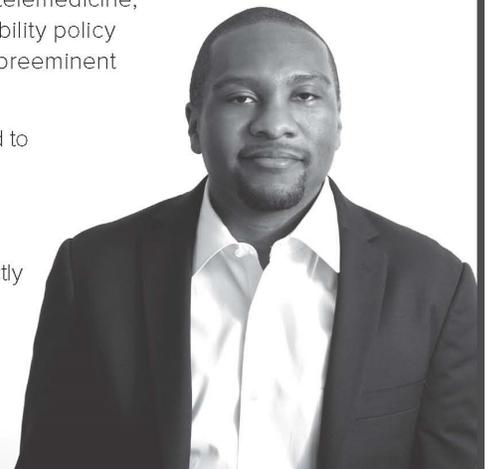
You may follow the blog at www.oklapsychiatry.org for updated information.

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They're not too young to talk about race!



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At birth, babies look equally at faces of all races. At 3 months, babies look more at faces that match the race of their caregivers. (Kelly et al. 2005)

Children as young as two years use race to reason about people's behaviors. (Hirschfeld, 2008)

By 30 months, most children use race to choose playmates. (Katz & Kofkin, 1997)

Expressions of racial prejudice often peak at ages 4 and 5. (Aboud, 2008)

By five, Black and Latinx children in research settings show no preference toward their own groups compared to Whites; White children at this age remain strongly biased in favor of whiteness. (Dunham et al, 2008)

By kindergarten, children show many of the same racial attitudes that adults in our culture hold—they have already learned to associate some groups with higher status than others. (Kinzler, 2016)

Explicit conversations with 5–7 year olds about interracial friendship can dramatically improve their racial attitudes in as little as a single week. (Bronson & Merryman, 2009)

Young children notice and think about race. Adults often worry that talking about race will encourage racial bias in children, but the opposite is true. **Silence about race reinforces racism** by letting children draw their own conclusions based on what they see. Teachers and families can play a powerful role in helping children of all ages develop positive attitudes about race and diversity and skills to promote a more just future—but only if we talk about it!

Do some learning of your own to get ready for conversations with children. Here are some good places to seek *information* and *training*:

- Teaching Tolerance — tolerance.org
- Raising Race Conscious Children — raceconscious.org
- Embrace Race — embracerace.org
- Teaching for Change — teachingforchange.org
- AORTA Cooperative — aorta.coop
- Fortify Community Health (CA) — fortifycommunityhealth@gmail.com
- Delaware Valley Assoc. for the Education of Young Children (PA) — dvaevc.org