

# Oklahoma Psychiatry

OKLAHOMA PSYCHIATRIC PHYSICIANS ASSOCIATION

January, February, March 2022

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## OPPA Issues Position Statement on Conversion Therapy

Oklahoma House Bill 2973 was brought to the attention of the Oklahoma Psychiatric Physicians Association (OPPA). Due to the harmful, prejudiced nature of the bill and the overwhelming opposition immediately voiced by many of our members, we are compelled to release a Position Statement against this measure. This bill allows for the pursuit of counseling for the purpose of “*sexual orientation change efforts*” and “*gender dysphoria resolution efforts.*” otherwise known as conversion therapy, and seeks to reduce or eliminate “*unwanted same-sex attractions, behaviors, identity, sexual or gender-identity expressions, or unwanted gender dysphoria.*”

According to the bill, parents or legal guardians may obtain such therapy for their children under eighteen (18) years of age without interference from the state or any political subdivision thereof. It further states that addressing unwanted sexual attraction is “*an emergency*” and therefore, “*immediately necessary for the preservation of the public peace, health or safety.*”

In 1998 and again in 2018, the APA Board of Trustees issued position statements that oppose any psychiatric treatment such as conversion therapy based on the assumption that diverse sexual orientations and gender identities constitute mental disorders. Instead, the APA cites a strong body of research in favor of psychotherapies which affirm individuals’ sexual orientations and gender identities.

*(continued on page 2)*

*The overwhelming scientific evidence against the use of conversion therapies leads the OPPOA to conclude that upholding a bill of this nature could lead directly to the severe harm, suffering, and psychological detriment of our citizens, including children.*

## Event Calendar

### May 7 (Zoom/Virtual)

Executive Council Meeting (10:00 a.m.)

General Membership Meeting (11:00 a.m.)

*(Awards/Installation of Officers)*

### June 2 (Zoom Webinar—Free to OPPOA, COPS, and TPA Members)

Central Oklahoma Psychiatric Society (COPS) and the Tulsa Psychiatric Association (TPA) CME Event (7:00-9:00 p.m.)

### September 30-October 1 OPPOA Annual CME Conference

*(Location to be determined)*



## OPPA Position Statement on Conversion Therapy (continued from Page 1)

This stance is shared by the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, the American Medical Association, the American Psychological Association, the American Counseling Association, and the National Association of Social Workers, among others. A report by Cornell University looked at 47 peer-reviewed studies and concluded "that there is no credible evidence that sexual orientation can be changed through therapeutic intervention." Additionally, harms caused by "conversion therapies" are well-documented and include increased rates of depression, anxiety, social isolation, suicide attempts, and substance use. These therapies and related efforts may also encourage societal prejudice and family rejection, as well as undermine self-esteem, connectedness and caring – all important protective factors against suicidal ideation and attempts.

Internationally, The Pan American Health Organization, a regional office of the World Health Organization, issued a statement in May of 2012, "These supposed conversion therapies constitute a violation of the ethical principles of health care and violate human

rights that are protected by international and regional agreements." The organization also noted that reparative therapies "lack medical justification and represent a serious threat to the health and well-being of affected people."

The overwhelming scientific evidence against the use of conversion therapies leads the OPPIA to conclude that upholding a bill of this nature could lead directly to the severe harm, suffering and psychological detriment of our citizens, including children. It is the responsibility of the state of Oklahoma to share the interest of the OPPIA in protecting the physical and psychological well-being of all citizens. It is our expectation that the legislatures of the State of Oklahoma will recognize that this bill is in direct violation of human rights and dignity. As psychiatrists and residents of Oklahoma, we cannot favor a bill that is in direct conflict with national and international research and international policies regarding these unscientific, ineffective, and harmful approaches to mental health care. We strongly oppose this bill that is also in direct conflict with our primary responsibility for the safe care of the patients of Oklahoma. ❖

## APA IN THE NEWS

### Half A Million Refugees From Ukraine Appear To Have Mental Health Issues

[Reuters](#) (3/22, ) reports, "About half a million refugees from Ukraine who have fled to Poland need support for mental health disorders, and 30,000 have severe mental health problems," a representative for the World Health Organization in Poland said on March 22. "Ukrainian refugees arriving in Poland are suffering from a range of health problems...but the main need is for support due to trauma," Paloma Cuchi, WHO representative in Poland, told a briefing in Geneva.

[ABC News](#) (3/22, Kondoleon) reports research indicates that "firsthand exposure to traumatic events, such as the Ukraine war, can have lasting effects, including PTSD, anxiety, depression and relapse of alcohol abuse." The American Psychiatric Association has estimated that the "prevalence of acute stress disorder ranges from 13%-50% depending on the type of event exposed to and about half of those individuals with acute stress disorder develop PTSD." According to Craig Katz, MD, a clinical professor of psychiatry, medical education, system design and global health at the Icahn School of Medicine at Mount Sinai, "the risk of developing lasting effects of acute stress disorder increases depending on the extent of exposure to a traumatic event, prior trauma that was not well addressed previously, a history of psychiatric disorders and not having social support."

### Systematic Review Examines Association Between Physical Activity, MDD Risk



According to [HealthDay](#) (4/13, ), a 15-study systematic review and meta-analysis encompassing some 191,000 participants indicates that exercise may "make a difference in major depressive disorder [MDD]." The review found "an association between physical activity and depression risk," with researchers positing that "almost 12% of cases of depression could have been prevented with a certain amount of exercise." The [findings](#) were published online April 13 in JAMA Psychiatry.

## Editorial Corner

Harold M. Ginzburg, MD, JD, MPH

There is a specialty in psychiatry known as industrial and organizational psychiatry. There is a larger and more visible specialty in psychology known as industrial and organizational psychology. These clinicians specialize in the scientific study of human behavior in organizations and the workplace. Their goal is to identify and provide solutions to problems in the work environment for those in the workplace.

There is another set of subspecialties called disability psychiatry or disability psychology. The focus of this group of clinicians is on addressing the mental health needs of those who are unable and, in some cases, unwilling to enter the work force. A psychiatry or psychological disability may be defined as **a persistent psychological or psychiatric disorder, emotional or mental illness that adversely affects the engagement in productive activities including employment and educational performance.** So, what am I, as a clinical psychiatrist? Do I help those working to stay employed or do I work to increase the productivity and quality of life of those not in the work force, or both?

The answer may be straightforward to many but not to the general population. Data, presented below, from the U.S. Bureau of Labor Statistics, is widely published and discussed in the media. The data in the media, however, is selective. Media data focus on the overall unemployment rates and often include rates by race, sex and age. More subtle and, as it were, further down the page are the two numbers that should be of concern to clinical psychiatrists. The overall rate of labor participation and the rate of those seeking but who are unable to find employment. The overall participation rate does not explain why almost 40% of those who might be in the ranks of the employed do not attempt to seek employment nor does it identify why those seeking work are unable to find work.

What percentage of these two groups are suffering from a significant mental illness and of that group, what percent have economic disincentives to return to the work force? Disability insurance from Social Security, the Department of Veterans Affairs, and long-term disability insurance policies contribute to supporting these individuals, a positive, and decreasing their motivation, a negative, to enter or re-enter the work force. In our clinical practice, how often do we encourage individuals to give up their financial support and security of third-party payors to and become economically self-sufficient?

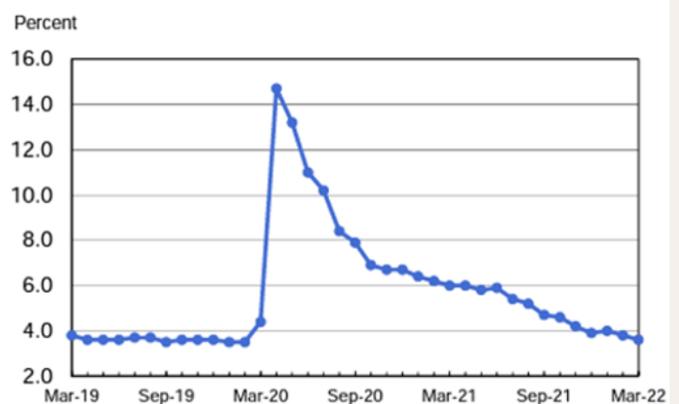
The data from the U.S. Bureau of Labor Statistics, for last month, are presented for your review and consideration. It would seem that most of us, in organizational third-party payment clinical practice, are involved in disability psychiatry with only a small percentage of our patients in the work force, or ever seeming to enter or re-enter the work force. Only a small percentage of my patients present with problems related to maintaining their employment. Many want to document so as to ensure their disability pensions, from whatever source, continue. While industrial and organizational psychology is a significant component of psychology, it appears less so in the field of psychiatry. How do we expand our treatment approaches to place entering or returning

to the work force as a significant positive mental health objective?

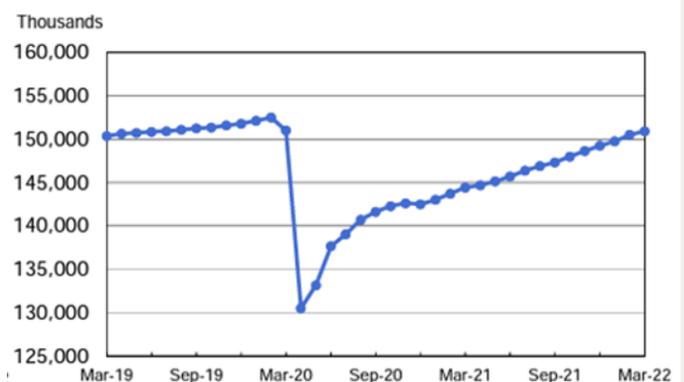
On April 1, 2022, the U. S. Bureau of Labor Statistics reported the total nonfarm payroll employment. Employment rose by 431,000 in March 2022, and the unemployment rate declined to 3.6 percent.

The Bureau of Labor Statistics, each month, publishes the employment situation. The March 2022 data indicate that the unemployment rate, for the nation, declined to 3.6 percent. The 'COVID' spike is clearly identifiable in each of the two tables below.

**Chart 1. Unemployment rate, seasonally adjusted, March 2019 – March 2022**



**Chart 2. Nonfarm payroll employment, seasonally adjusted, March 2019 – March 2022**



Major worker groups have different unemployment rates with Whites (3.2 percent), Blacks (6.2 percent), Asians (2.8 percent) and Hispanics (4.2 percent) showing little change over the past month. For adult men the rate is 3.4, and only teenagers reach a rate of 10 percent. The long-term unemployed (defined as those jobless for more than 27 weeks or six months) decreased to 1.4 million.

For psychiatrists, the more important numbers are those of individuals not in the work force who are reported to want employment, about 5.7 million individuals and **the actual labor participation rate which was presented at 62.4 percent.** Can we make a contribution to increasing the labor force participation?❖



## WATCH YOUR EMAIL FOR 2022-2023 OFFICER BALLOTING



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## What's New at the APA

APA released the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR). DSM-5-TR includes the fully revised text and references of the DSM-5, as well as updated diagnostic criteria and ICD-10-CM insurance codes. It features a new disorder, Prolonged Grief Disorder, as well as codes for suicidal behavior and non-suicidal self-injury. The DSM-5-TR will continue to be updated online via the same process used for the DSM-5 since 2013. [Read more about the DSM-5-TR here.](#)

APA is part of a full nationwide preparedness campaign aimed at easing the transition from the current National Suicide Hotline to the new 988 crisis hotline. APA and other members of the CEO Alliance for Mental Health will push for the adoption of a roadmap for mental health crisis response before the launch of the 988 hotline on July 16<sup>th</sup>. You can [read more about 988 and the preparedness roadmap from the CEO Alliance for Mental Health here.](#)

As pandemic restrictions are being lifted in many localities, a majority of Americans report their mood remaining stable and adopting better habits, according to the latest *Healthy Minds Monthly* published by APA and Morning Consult. Some people have adopted unhealthy habits however, with 1 in 5 respondents reporting an increase in smoking or drinking. You can [read more about America's changing habits as pandemic restrictions are lifted here](#), and [read the results in Spanish here.](#) ❖

## DEI Task Force Update

*Tessa Manning, MD, Chair*

The newly formed OPPA DEI Task Force has attracted a number of motivated volunteers who have had several very productive virtual meetings. Thus far, the group has developed a proposed mission statement and related short- and long-term goals. These will be presented to the OPPA Executive Council for discussion during the next quarterly meeting on May 7, 2022. Members interested in joining the Task Force can contact Lynn Montgomery at [oklapsychiatry@gmail.com](mailto:oklapsychiatry@gmail.com) or Tessa Manning, MD at [Tessa-manning@ouhsc.edu](mailto:Tessa-manning@ouhsc.edu). The next scheduled DEI Task Force meeting will be held virtually on May 28, 2022 at 10AM.

### Proposed Mission Statement:

- ◆ Develop programs and resources to bring awareness to and support the needs of evolving, diverse, and underserved patient populations in Oklahoma.
- ◆ Implement strategies to enrich a diverse representation of psychiatrists in Oklahoma and within the OPPA, to reflect the unique, cultural richness of our state.
- ◆ Provide an open forum to address issues related to diversity, equity, or inclusion that may arise from OPPA members or the community.
- ◆ Encourage the OPPA to foster connections across multiple medical sectors to end mental health inequities.

### Initial Short-term Goals:

- ◆ Review OPPA policies/bylaws/mission to ensure inclusive language
- ◆ Alert members to APA DEI events and opportunities such as residency fellowships.
- ◆ Provide the OPPA Executive Council with recommendations regarding the OPPA Exemplary Medical Student Award requirements in an effort to decrease the risk of bias and encourage selection of diverse candidates.
- ◆ Encourage OPPA educational programs to include content related to mental health inequities and other DEI topics.
- ◆ Partner with other OPPA committees (Membership, Legislative, CME) to help promote DEI Task Force mission.

### Long term goals:

- ◆ Collect data regarding the diversity of the current Oklahoma psychiatric workforce.
- ◆ Recruit OPPA members and leadership that better reflect marginalized or underrepresented populations in Oklahoma.
- ◆ Provide opinions regarding OPPA programs and position statements as they apply to DEI efforts.
- ◆ Partner with state/national organizations that are actively monitoring legislation that could affect the mental health or delivery of medical care to traditionally underrepresented and underserved groups.

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## Members Free Course of the Month: Climate Psychiatry: What Every Psychiatrist Should Know

Each month, APA Members receive **free access** to an on-demand CME course on popular topics. This past year, Mother Nature gave us a stark wakeup call — the COVID-19 pandemic. It has reminded us of our intimate connection with the natural world. Prior to this year, a pandemic seemed to be a remote possibility, but it was not so remote after all. Neither is ongoing climate change and climate change is far more deadly. The wildfires this year of Australia, the Amazon, and California, as well as the ever-mounting crises of extreme weather patterns, herald an abrupt change in climate. The impacts of the rising heat and extreme weather on physical health are critical to human health and this presentation aims to explain the mental health implications of climate change.

### Learning Objectives

- Identify the mental health implications of climate change and resulting need for services.
- Describe the trends in Acute Stress Disorder, PTSD, Major Depression, and suicide in populations which are affected by climate disruption.
- Identify the impacts of extreme heat for psychiatric patients.
- Identify the developmental, psychiatric, and cognitive impacts of air pollution.
- Describe eco-anxiety and ecological grief.

**Estimated Time to Complete:** 75 minutes • **Date:** April 1st, 2022—April 1st, 2025

The APA designates this enduring CME activity for a maximum of 1.25 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



## OPPA Working for You!

The **Oklahoma Psychiatric Physicians Association**, a district branch of the American Psychiatric Association, works hard to keep up with the role healthcare plays in the lives of every person fighting to maintain their physical and mental health, their means of employment to feed and nurture their family, and their personal safety and freedom from fear. At the core of every organization is membership—recruitment and retention.

### OPPA Membership Update January-March 2022

#### Welcome New Members!

Camacho, Natasha DO (Resident Fellow)  
 Gillan, Aisha DO (Resident Fellow)  
 Harvey, John MD (Resident Fellow)  
 Kowol, Mary-Anne MD (*transfer from Wisconsin*)  
 Li, Fan DO (Resident Fellow)  
 Richardson, Matthew MD (GM) (*transfer from Utah*)  
 Shah, Kaushal MD (Resident Fellow)  
 Starkey, Erica DO (GM)

#### Reinstatements: Welcome Back!

Al-Botros, Adonis MD (GM)  
 Merideth, Alycea MD (GM)



**Working** through legislative advocacy this past session, we can continue the fight to protect your profession from scope of practice attacks and governmental encroachment on the practice of medicine.

**Connect** with your peers to increase knowledge, decrease isolation, and maintain relationships with colleagues working for issues benefiting Oklahomans.

**Learn** by participating in scientific webinars, seminars, and CME conferences from the comfort of your home or office.

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 AND INFORMATION



## Oklahoma Psychiatry

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**M. Lynn Montgomery, Director**

*Oklahoma Psychiatry is a publication of the Oklahoma Psychiatric Physicians Association. The Oklahoma Psychiatric Physicians Association, a district branch of the American Psychiatric Association, is a medical specialty society recognized world-wide specializing in the diagnosis and treatment of mental and emotional illnesses and substance abuse disorders.*

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