



Photo featuring Harvey A.P. Myers III, MD & Young Kim, MD

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If All the World's a Stage, How Did I End Up in Erikson Last Stage?



Martin Drell, MD

When John Schowalter, MD, asked if I might be the editor of the Owl Newsletter, it would have been easy to just say yes. This is my nature, especially when I'm asked to do things by friends and mentors. But then again, I have learned, somewhat painfully, to always respond to such requests with, "Let me think about it for a while." This gives me time to ambivalentate on the request and think through whether I really want something else to do. Aren't I trying to "listen to my body," which is telling me to slow down? Aren't I trying to modify my chronic case of workaholicness and, as Albert Ellis says, my equally virulent strain of "musterbation." Haven't I done enough for the Academy? Haven't I got enough to do as a Head and Program Director of a Southern child program beset by budget cutting/regulating bureaucrats complete with computers to do their bidding? Shouldn't the editor be a retired person and not a "new old person," as John Schowalter occasionally calls me?

As the devils of my worst nature piled onto one side of my psychic teeter totter, the angels of my better nature started a counter-defensive. "There's always more to do for the Academy." It's such a neat organization with the wonderful mission of helping kids to mature and develop. And of course, there's always time to do something interesting. What else would I do

instead? Watch TV? Sleep more? As the teeter totter tilted back, I countered with the realization that I "should" be spending more time with my grandchildren and that I need to do more scholarly activities. But do I really "have" to write a new article at this stage in my life? For what? To please the new RRC regulations? Is my writing an article (peer reviewed, then again of course) really going to assist my trainees and their modelling of behaviors? Well it might, and then again, there are a few articles I really want to write, especially about teaching therapy.

As the teeter totter flips sickeningly back and forth, my mind, if only as a distraction, starts thinking through what the Owl Newsletter could be. I immediately thought of Erik Erikson

You are invited and encouraged to submit articles on the following topic:

The Owl Newsletter would love to receive input on the best advice your mentor/supervisor ever gave you about being a child and adolescent psychiatrist.

Please send to mdrell@lsuhsc.edu.

and the last stage which I have inexplicably found myself in. I struggled to remember its defining dichotomy. I was sure it was "generativity vs. despair." I was embarrassed when I Googled Erikson just to make sure and found that I had gotten it wrong. It is "integrity vs. despair." I chuckled that I had remembered the despair part and had dragged the generativity part from the previous stage that I was obviously having



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trouble transitioning out of.

Regardless of my developmental miscue, I thought that it would be nice to have the Owl Newsletter focus on this stage of life and all of its facets. I thought that it could be like AARP – The Magazine, which I purposely don't receive or read. I found one in the waiting room. It featured a photo of ever young Sally Fields on the cover and included articles on Guts and Glory; Vets Recall their Fiercest Battles; Your Best Investments; National Parks at 100: Why We Love Them More Than Ever; Feel Great Now; Get Fit, Stay Sharp, Live Longer; 5 Reads for a Fresh Start; and Movies for Grown-ups. The idea of focusing on the ever expanding last stage seemed interesting. Just this week my resident had said that his generation was predicted to live until age 125. I wearily looked at him and mentioned sadly that I couldn't imagine what size my prostate would be at that age.

My next association was to a regular part of the Program Directors' Meeting that is for those Program Directors that have been Training Directors for years. It is called the "Lifers' Meeting." Being a Program Director for a third time in my career, I have begun attending. It involves good friends and acquaintances sitting around and talking about life in general and whatever they want to talk about specifically. We have talked about "the times," millennials, retirement, the joys of our field, training the next generation, what we are working on at the time, chronic illness, and various losses. We are truly a Band of Brothers (and Sisters).

Having come up with an idea on how to tackle the editorship, I told John that I would be the editor. I'm looking forward to this new project, but I truly need your assistance. The Owl Newsletter truly needs a band, if not an orchestra, to meet its promise. Please think about submitting articles on aspects of your life as an Owl. Tell us about your retirement and how it's going, your retirement plans, what you are doing that "fulfills your bliss," your experiences mentoring and being mentored, your reflections on the field, your favorite past and present movies, where you think the field is going, your favorite case, etc. The articles should average 1000-1200 words, but may be much less if it takes you less to say what you want to say. "Brevity is the soul of wit." The staff and I are available to edit pieces.

Please also send in your comments on the newsletter and ideas for improvement. It is still a fairly new creation that has room to develop.

As I close my first editor's column, I would like to thank Carol and Dick Gross, MD, who were the previous editors and have helped steward and improve the Newsletter. They have mentored me and helped co-edited this issue. Even better, they have graciously promised that they will help me in the future. To their surprise, I will certainly take them up on their offer.

Martin Drell, MD



Wrap-Up from the Editors



Carol & Dick Gross, MD

I am retiring AGAIN. How many times can one retire??? Carol and I are leaving our editorship of the Owl Newsletter in the more than exceedingly competent hands of Marty Drell, MD. We have been your editors for close to three years. It has been a challenge, and it has been great fun to talk with fellow Life Members, old friends, those who wrote the wonderful articles and reminiscences that you have been reading. We thank all of you from the bottom of our hearts. We have been most appreciative of all of your submissions. We cannot thank Rob Grant enough for his help in putting the Newsletter together four times a year. We thank Samantha Phillips at AACAP for her assistance. Marty, as your new editor, has some wonderful ideas for future issues; he far exceeds us in his creative powers, and we are sure that you will appreciate them.

I retired from my private practice fifteen years ago (except for one patient). I continued to teach medical students at George Washington University Medical School, Walter Reed

National Military Medical Center, and Children's Hospital where I taught School Consultation to child fellows. I am now retiring from them. State and Federal Controlled Substances Licenses come due for renewal this summer. NO more! Retired!! So many retirements; finally, we are trying to sell our home of 44 years. We will move into an apartment... no more weeds, no more deer, and no more stairs! However, I will become co-chair of the Life Members Committee with Cynthia Pfeffer, MD, and will continue with the Members Benefits and History and Archives Committees.

We (Carol and Dick) thank all of you for contributing, for helping, AND, especially, for reading the Owl Newsletter. It has been a pleasure to serve you! We wish Marty good luck as your new editor.

See you in New York in October,

Carol & Dick Gross, MD



In the Beginning



John Schowalter, MD

In the beginning, there was no “OWLS,” and there were no Owls.

It all began with a chat in a bar with my friend, David Herzog, MD, at the 2007 AACAP

Meeting in Boston. I told him I thought AACAP

should have some specific activities that the older folk, now designated “Life Members” for dues purposes, should be able to do and want to do. Having been a residency training director for 27 years, my personal wishes involved getting together for 1) aiding child and adolescent psychiatry (CAP) recruitment and 2) our personal pleasure by keeping in better touch with our old friends who we now saw less because we were all traveling less.

David was chair of AACAP’s Development Committee, and he later shared my thoughts during a Development conference call. As is their duty, they all immediately thought MONEY! I was later asked to join the committee.

The first Life Member Dinner was at the 2008 AACAP Meeting in Chicago. It was a loud, enjoyable success, and that word got around. So, the number of diners almost doubled in Honolulu in 2009. In 2010, AACAP’s Development Committee suggested that they have a Life Member Subcommittee. I heartedly agreed and was appointed chair.

Our new group quickly formed a consensus that in addition to the current “drinking, eating, and gabbing about old times” Life Member Dinner, we should raise money to aid medical students and general psychiatry residents to learn more about CAP. To provide financial aid through travel grants for them to attend AACAP Annual Meetings seemed the most effective avenue to meet this goal.

I passed this decision on to Development staff, and AACAP’s Life Member Fund was established. An email request then went out to those Life Members who had email. As an aside, communication can be difficult with a group ranging in age up to the low 100s, and that includes many who do not use email regularly or at all. Nonetheless, most Owls have a passion for bringing bright young people into the field they love so much that they have remained AACAP members for decades after their retirement. In fact, enough money came immediately into the Fund that two residents received travel grants to attend our 2010 meeting in NYC. This success in raising money to provide travel grants made our subcommittee feel that this new entity was truly off of the ground, and we wanted to soar. This urge led us to adopt, as do athletic teams, a more “cool” moniker than the sessile old name of “Life Member Group.” A dozen or so names, many far out and funky, were first proposed through the Life Member Online Community Website. This list was whittled down first by the subcommittee, and then a “live” vote by those who attended our 2010 Dinner. The three



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survivors were put onto an email ballot. “Owls” won big time, and we were ready to fly.

2011 was a very seminal year. In March, the first Life Member e-News came out, and in July, our subcommittee had its first conference call. Our success in raising money surpassed 2010 by almost 40%, and a total of 15 travel grants were given to medical students and residents to attend the AACAP Meeting in Toronto. AACAP in Toronto also saluted our rapid take-off by presenting us with its prestigious Catchers in the Rye Award: “In recognition of the Life Members’ Impressive Transformation.” This Award was particularly nostalgic for me. “Catchers in the Rye” was the title of my 1989 Presidential Address, and our award also contained the quote by J.D. Salinger with which he began his book of the same title and with which I had begun my Address. All this success led the subcommittee to request being promoted from being a Development Committee subcommittee to a full, free-standing AACAP Committee. This was approved, and I was appointed chair.

It was impossible in 2012 to match our growth curve in 2011, but our Owl Fund continued to grow apace, as did our number of travel grants to the Annual Meeting in San Francisco. As I wrote afterwards about that meeting’s mentoring opportunities and Owl Dinner conversations: “The Owls felt as though we had helped create a new generation of grandchildren who had the good intentions to want to help children just as we did, but to do

it better. From the heartfelt spoken and written thanks we received from these students and residents, we older Owls were also allowed to run our sunsets backwards and again share their sunrises!”

In 2013, the generosity of the Owls continued to grow. As the number of travel grants grew, so did the number of Owls who had conversations with them at the Life Member Dinner, taught them in the mentoring programs, and read their intelligent and thankful essays in the Owl Newsletter. Likewise, Owl donations rose as well. Contact with the grantees tends to do this. I hoped that this marvelous escalator would never stop.

It kept climbing in 2014, and Cynthia Pfeffer, MD, was appointed co-chair. AACAP’s Life Member Fund had begun in 2010, and two residents received travel grants. By mid-2014, almost \$200,000 had been raised, and 32 grants (17 residents and 15 medical students) were supported to attend AACAP’s 61st Annual Meeting held in San Diego. The Owl Fund had now supported a total of 100 competitive travel grants to some of the brightest trainees in American Medicine. The Owl mentoring experience took an unprecedented (and somewhat embarrassing) leap in San Diego. Owl committee member Perry Bach, MD, teamed up with a New York Medical College psychiatry resident, Aaron Roberto, MD, and it was a monster success. Perry’s approach was to have nationally known faculty sit in a large room filled with circles of



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chairs. Trainees would sit where they liked and ask any questions they wanted. During the 90 minutes, it was their choice to either stay in one place or move to other circles. Aaron knew many trainees and enjoyed networking with social media. He used his contacts to strongly encourage attending the Owl mentoring program. Actually, he was too successful. More than 130 medical students and resident attendees arrived. This was more than double the number expected. Not only was the room overcrowded but so was the long hallway outside. Aaron also gave a two-minute talk at the Owl Dinner. He concluded: "Through our amazing mentoring experiences with you, the Life Members, we will undoubtedly be prepared to pass on the torch to future generations of CAPs. My colleagues and I are inspired, touched, and moved beyond words." Obviously, the Owl escalator was still climbing.

2015 was another year of great accomplishment for the Owls. AACAP's Meeting in San Antonio was a huge success in every way. The Owls' fervor to bring bright medical students and general psychiatry residents to learn at our meeting was greater and more generous than ever. Amazingly, 40 travel grants (19 medical students and 21 residents) were financed, compared to the previous all-time high of 32 grants in 2014. We had now supported 140 trainees since those first two in 2010! Owl educational and social activities also expanded in San Antonio. For example, although not directly

connected to mentoring, Doug Kramer, MD, MS, has in recent years chaired the very popular "Life Member Wisdom Clinical Perspectives," which features national leaders' discussions of clinical knowledge. Perhaps needless to say, there was also a reprise of Perry Bach and Aaron Roberto's super-popular "Meet Life Member Mentors." This year there were even more mentors and mentees, but we were given a huge room so all were accommodated. Likewise, the Owl Dinner was larger, noisier, and more fun than ever. At the Dinner, I mentioned that I had decided that 2016 was the time for me to step down from my role as co-chair of the Life Member Committee. The plan, already approved by AACAP President Gregory K. Fritz, MD, is that I will be replaced by Dick Gross, MD, who has been a tireless supporter of the Owls' early life and marvelous growth. For example, up until the current issue, he and his wife, Carol, have edited this Newsletter. In addition, because of his many acquaintances, Dick is the main man in arranging the seating plan for Owl Dinners. Believe me, this is a thankless job, but Dick never refuses it. Thank you, Dick.

So, as I write this in the first half of 2016, most of the year still lies ahead. Past AACAP President Marty Drell, MD, has accepted the editorship of this Newsletter, and Dick Gross will take my position as committee co-chair at some time before the end of AACAP's Annual Meeting in New York. Given this strong leadership of Cynthia and Dick, I know that the Owls are in great hands!



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I will remain on the Committee for another year, and I will continue my enthusiastic support of the Owls' tradition of donating very generously to the Owl Fund. We already have many examples of how this opportunity for trainees to participate in the learning of the latest child and adolescent psychiatry knowledge plus the pleasures of attending the fabulous Owl Dinner has been very successful in recruiting stars into our field.

In conclusion, I definitely realize that New York is always the most popular and the most expensive venue for our Annual Meeting, so I beg you to please donate even more generously than usual to AACAP's Life Member Fund.

I promise I will.

Good health and peace to all,

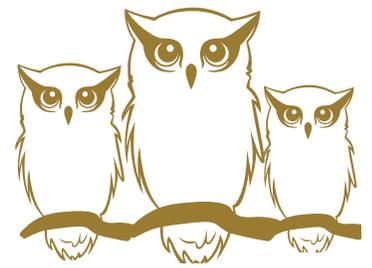
A handwritten signature in black ink that reads "John".

AACAP Owls in San Sebastian, Spain!





What's What with Mentoring?



Perry Bach, MD

One nice aspect of being a Life Member is that we can serve as mentors. Whether our idea of an ideal mentor is Telemachus' Mentor (actually Athena) or 800-year-old Yoda, young people look for experienced people from whom they can learn. Who do you recall as your mentors? Most of us can name several people. Some of us were lucky to have them in elementary and high school; others had them in college and medical school. Since we've chosen child and adolescent psychiatry as our primary field, I think most of us will mention one or more child and adolescent psychiatrists. We usually think of the mentors we've had over long periods of time, but we can also think of the impact on us from brief interactions with thought-provoking and experienced people who were leaders in our field.

AACAP's Annual Meetings have always provided some of the best opportunities for medical students and psychiatry residents to interact with older members who have had a variety of career experiences – in private practice, academia, research, community mental health programs, consultation, etc. When we started our careers, attendance at each meeting was between 200 and 800, providing many opportunities for us to meet senior people. Now, with over 3500 attendees,

it is more difficult for students and residents to meet and talk with Life Members informally.

However, there are at least three different opportunities to serve as mentors for medical students and residents at AACAP's Annual Meetings. A fourth opportunity is available throughout the year.

1. The Committee on Medical Students and Residents sponsors two sessions during the meeting where groups of 10-12 medical students and residents meet in small groups with mentors, sharing ideas and advice on career development, balancing personal and professional life, networking, research, and getting involved in advocacy initiatives. (To participate in these, contact Anneke Archer at training@aacap.org.)
2. For the third year in a row, the Life Member Committee, in cooperation with the Membership Committee and the Committee on Medical Students and Residents, will again sponsor the "Medical Students and Residents: Meet Life Member Mentors" session. We invite students, residents, and Life Members to get together without any presentations or formal program, just to talk, ask and answer questions, and get to know each other. We asked Life Members who were on the Committee to attend and invited several other Life Members who had different career trajectories so the students and residents might meet and talk with people who had a broad range of experiences. To ensure that we have



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enough Life Members present to serve as mentors for the students, we are again designating about twenty Life Members (almost all of whom participated in the last two years) to be the Life Member Mentors for this event in the fall. Co-chairs of the event are Child Psychiatric Fellow Aaron Roberto, MD, and myself.

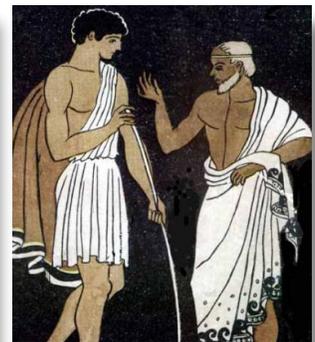
3. The New Research Poster sessions are one type of program we usually don't think of as a mentoring opportunity. Plan on spending some time there, meeting and talking with students and residents about their research. It will not only provide you with more information about what is happening now, you will also be able to ask questions and perhaps introduce new ideas and concepts to the researchers based on your own clinical and research experience.

4. Finally, throughout the year, there is an opportunity to participate in the AACAP Mentorship Network. More information can be found on AACAP's Mentorship Network webpage (http://www.aacap.org/aacap/medical_students_and_residents/Residents_and_Fellows/Research/Find_a_Mentor.aspx).

As I wrote this article, I realized that my own concepts of mentors and mentoring were rather simplistic – I've grouped a wide range of them together as if they were all the same. Telemachus' Mentor gave very specific advice for specific situations. Yoda's mentoring consisted of presenting challenges which his mentees had to figure out how to overcome,

usually without giving suggestions or guidance. In child and adolescent psychiatry, our mentors taught us diagnostic and therapeutic skills and then supervised us on how to use them in clinical practice after our formal training ended. The goal of the "Meet Life Mentors" session at AACAP's Annual Meeting is to introduce students and residents to senior child and adolescent psychiatrists who are leaders in the field and give them the opportunity to ask questions. Some students have remained in contact with mentors they met and arranged special rotations with them. Personally, I like the idea that there are many types of mentoring, and Life Members are able to use the training and experiences they've had over their lifetimes to provide whatever is useful.

If you have any questions or thoughts about mentoring, please contact perrybbach@gmail.com.





Lou Gehrig, Niko Tinbergen, and Ethology: A natural model for CAP

AACAP's 63rd Annual Meeting

Tuesday, October 25

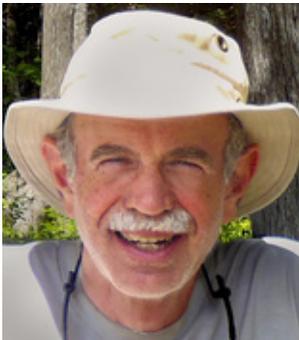
4:30 pm – 6:00 pm (open) Medical Students and Residents: Meet Life Member Mentors

Thursday, October 27

2:00 pm – 5:00 pm (open) Clinical Perspectives 26: Life Members Wisdom: Clinical Perspectives on Integrated Care, Health, Resilience, and the Future of Child and Adolescent Psychiatry

6:30 pm – 9:00 pm (ticket) Life Members Reception and Dinner

Join us at the Princeton Club for this exclusive event for Life Members to enjoy the company of friends and colleagues while mentoring our young award winners as they start their careers in child and adolescent psychiatry.



Douglas Kramer, MD, MS

LUCKIEST MAN ON THE FACE OF THE EARTH – As a discussant in a symposium on treating military families at AACAP's Annual Meeting in San Antonio in 2015, I had the opportunity to show a

photograph and comment, "I'm not Lou Gehrig, but I know just how he felt." Of course, I was referring to Gehrig's final appearance at Yankee Stadium in 1939 when he said, "Yet today I consider myself the luckiest man on the face of the earth." Most faces in the audience were totally blank. I decided not to explain the reference.

I feel the same way about my life as a physician and my career in child, adolescent, and family

psychiatry. I needed to be a physician before deciding how to spend my life in medicine. Random House defines a physician as "a person who is skilled in the art of healing."

BECOMING A PHYSICIAN – My apprenticeship in becoming a physician took four years and included diverse experiences: 1) three months treating patients at a Moravian missionary hospital on the Moskito Coast of Nicaragua, 2) six weeks working at a one-physician clinic in the Appalachian region of eastern Kentucky, 3) serving as a Naval Flight Surgeon in the Aleutians, 4) serving as medical consultant for the Aleutian village of Atka, 5) working as an ER physician full and part-time for four and a half years, and most importantly, 6) my straight surgical internship. The only thing I cared about in each endeavor was being a good clinician.

I learned three important lessons – the three H's



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– during this apprenticeship that have sustained me ever since: 1) the *honor* that it is to participate in the essence of our patients' existence, 2) *humility* with respect to the small part physicians actually play in the final outcome, and 3) the inherent *healing* capacity of the human body and mind. Interestingly, I learned most of this through my relationship with surgeons. Eight years ago I wrote, "Albert G. Mackay, MD, with both his hands and his eyes, taught me to respect the inherent healing capacity of the human body," referring to the wise older surgeon at Vermont where I interned. (Dr. Mackey was only 65 at the time.)

RE-DISCOVERING ETHOLOGY – Pondering my future in medicine while in the Aleutian Islands, (1973-75), I recalled that I had enjoyed psychiatry in medical school. I also recalled that one class in college had defined my college career. The class was, "Plant and Animal Behavior," a one-semester course taught by Robert Haubrich, PhD, at Denison University in Granville, Ohio. By teaching *plant behavior*, Bob was a half-century ahead of his time.

Thus, I chose psychiatry for my specialty training "as a way to get back to ethology." The decision led to subsequent mentorship relationships with Bill McKinney, Jack Hailman, Glen Woolfenden, Carl Whitaker, Gregory Bateson, and Niko Tinbergen. Ethology, or the study of animal behavior in its natural environment, was the scientific underpinning for my entire psychiatric career.

I then chose child, adolescent, and family psychiatry for subspecialty training. I wanted to emphasize developmental considerations in my clinical and scholarly work. Development, or *ontogeny* in biological circles, is one of the four "ethological determinants" described in 1951 by Niko Tinbergen. Other than in pediatrics, and for nine months with obstetric patients, a developmental perspective is unique in medicine, an entirely different dimension than found anywhere else in clinical science.

Niko Tinbergen was one of three ethologists, including Konrad Lorenz and Karl von Frisch, who shared the Nobel Prize for Physiology or Medicine in 1973. I had the opportunity in 1978 to present a Grand Rounds with Niko Tinbergen. He referred to me as a "scientist" that day, the only human being ever to so speculate. Patti and I visited socially with Niko and his wife during his Distinguished Lectureship week in Madison. He and I then engaged in an almost decade-long correspondence. He was so unassuming, and I was so young (33-43) and inexperienced that I didn't realize at the time that corresponding in this way with a Nobel Laureate was extraordinary. On the other hand, we gave to our son born during that period the name Nicholas for his middle name, and his third son now has Nicholas for a first name – maybe I wasn't so unaware? I believe we thought about using *Nikolaas*, the Dutch spelling, but opted instead for the English language version.

EMERGENCE OF THE SCIENCE OF ETHOLOGY – Out of



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evolutionary biology and comparative anatomy in the early 20th century emerged the study of animal behavior known as *ethology*. The etymology is the Greek *ethos*, meaning “character.” Ethology is a field science. The behavior that matters most is behavior occurring in the natural habitat versus in a laboratory. In his classic book (1951), *The Study of Instinct*, Tinbergen posed the central question of all ethological studies, “Why does the animal behave as it does?”

The four ways of understanding behavior, of answering the central question, were and are a natural fit for child psychiatry in my opinion: 1) *control* or *physiology*, 2) *ontogeny* or *development*, 3) *function* or *natural selection*, and 4) *evolution* or *genetic and other cross-generational mechanisms of inheritance*. Tinbergen believed, as a biologist, that a complete answer to the question required answering all four components. In other words, an answer to any one component is an incomplete answer. Control and ontogeny refer to the individual. Function and evolution refer to the species. Of course, behavior may be motor, cognitive, affective, emotional, or psychological.

CONTROL, or *physiology*, refers to the mechanisms of a behavior. Control is a major focus of psychiatric research and interventions, especially psychopharmacologic ones, as well as for most of medicine. However, such therapies as CBT and mindfulness have also been shown to modulate neurophysiology.

ONTOGENY, or *development*, is obvious for child psychiatrists in terms of our interest in, “Why does the *child* behave as it does?” With advances in our understanding of gene x environment interaction (GxE) and epigenetics, this is now obvious. Less obvious but emerging in importance is the field of non-linear brain dynamics; I think of this as *brain x environment interaction* (BxE), a description with which I believe my friend Walter J. Freeman (1927-2016) would have agreed. Walter demonstrated that the brain as a whole encodes experience that can be displayed in what resembles a topographical map – reproducible computer-generated images from complex electroneurophysiological data. The pattern associated with each experience is stable until new learning occurs. A basic explanation with excellent figures is in his February 1991 *Scientific American* article, “The Physiology of Perception.”

FUNCTION, or *natural selection*, is simply the selective advantage the behavior confers on the individuals of a species who manifest it. In the end, natural selection measures this advantage by differential reproduction, favoring those with the behavior in question. This is how biological fitness is measured. It is helpful in conceptualizing *function* to think of ethology as the behavioral analog of comparative anatomy. Attachment behavior is an easy example for child psychiatrists (and ethologists).

EVOLUTION, or *inheritance*, refers to the history

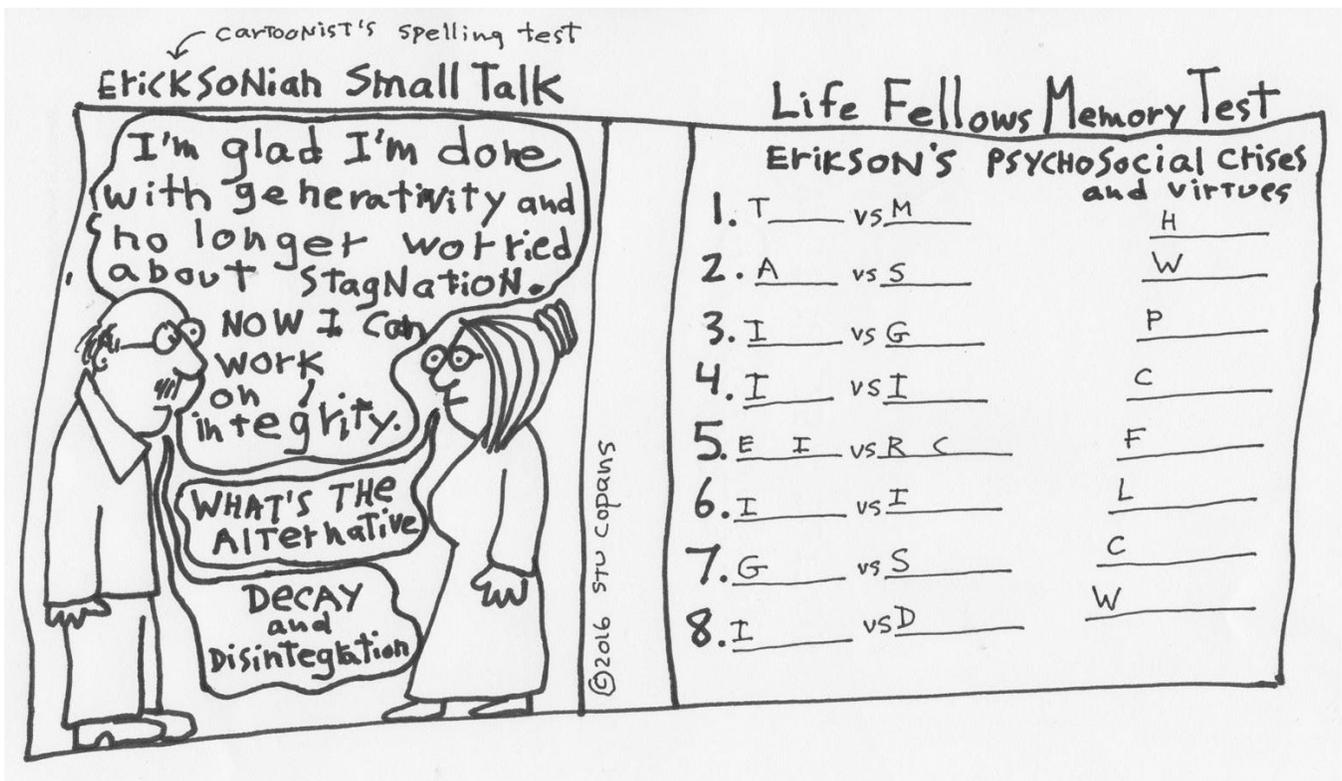


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of a behavior within a species. Mostly, we think of this in terms of genetics – the genetic changes from generation to generation, but there are non-genetic examples of inheritance, the most prominent of which is the modern version of the *inheritance of acquired characteristics* (epigenetics). In the classic study by Michael Meaney and colleagues at McGill, the presence or absence of licking, grooming, and arched-back nursing by mother rats in cross-fostering studies leads to specific and lasting phenotypical differences in pituitary physiology, general physiology, and ultimately the behavior of offspring, consistent with the phenotype of the foster mother, not the biological mother – inheritance without

genetics.

ETHOLOGY: THE NATURAL MODEL FOR CHILD, ADOLESCENT, AND FAMILY PSYCHIATRY – Ethology and child psychiatry resemble each other in at least four ways: 1) both are interested in the organism in its natural environment, e.g., home, family, school, playground, etc.; 2) both are interested in species-specific behavior and change, developmental at the individual level and genetic at the species level; 3) both tend to be comprehensive rather than reductionistic; 4) both attempt to answer the central question, “Why does the animal/child behave as it does?” Child psychiatrists formulate hypotheses about the behavior of children,



Stuart Copans, MD



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adolescents, young adults, and families in order to provide scientifically-based diagnosis and treatment. A complete psychiatric formulation is really an ethological formulation.

CONCLUSION – It all seems like luck to me now. I can't explain how I met the right woman, had the privilege of membership in a loving family, found such great mentors, or noticed that ethology and child psychiatry might be a good combination. Gregory Bateson wasn't so sure: "You may find that any product you get out of the two together will have inbuilt double-binds and be as infertile as a mule." I am pretty sure that in being a physician, honor, humility, and healing matter. In marriage, family, and career, "I consider myself the luckiest man on the face of the earth."

Shortly before Dr. Drell requested an article about my experiences in ethology, I spoke to Walter Freeman, III, MD, the father of non-linear brain dynamics and several other transformative concepts in neuroscience. We both knew we were talking for the final time although I do not recall saying "goodbye." I do recall telling each other, "I love you." He spoke of the joy he had participating in AACAP's Annual Meeting Symposia in 2003, 2006, and 2012. Walter Freeman, a true friend of child, adolescent, and family psychiatry, died at home on April 24, 2016, at the age of 89.

A complete bibliography for this column and relevant articles are available on request. Comments to the author, Douglas A. Kramer, MD, MS, may be addressed to dakrame1@wisc.edu.

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Owls have demonstrated a remarkable and unwavering commitment to AACAP and wthe next generation of child and adolescent psychiatrists. They are mentors, advisors, donors, and friends. They are AACAP's legacy. Thank you to the following donors for their generous financial support of the mission of AACAP's Life Members Fund.

\$1,000 to \$2,499

The McDermott Family Charitable Fund

\$100 to \$499

Joan Caggiano*

in memory of Joel Ganz, MD

Brenda Dixon*

in memory of Joel Ganz, MD

Alan & Leslie Kerxton*

in memory of Joel Ganz, MD

Alan D. Megibow, MD

Joan Stern Narad, MD

William A. Sonis, MD

Up to \$99

Etta Bryant, MD

Alan Mark Ezagui, MHCA ♥

Boris Rubinstein, MD ♥

Karen Simat*

in memory of Joel Ganz, MD

Life Members Who are Members of the 1953 Society

Anonymous (1)

Joan E. Kinlan, MD

James C. Harris, MD & Catherine DeAngelis, MD, MPH¹

Dr. Michael Maloney & Dr. Marta Pisarska
Jack & Sally McDermott

(Dr. Jack McDermott, in memoriam)

Patricia A. McKnight, MD

Diane H. Schetky, MD

Diane K. Shrier, MD & Adam Louis Shrier,

D.Eng, JD

**From April 1, 2016, to June 30, 2016*

* Indicates a first-time donor to AACAP

° Indicates an honorarium donation

♥ Indicates a Hope Maker recurring monthly donation

¹ Indicates new 1953 Society member

Every effort was made to list names correctly. If you find an error, please accept our apologies, and contact the Development Department at development@aacap.org or 202.966.7300 ext. 130.

In Memoriam

Nelli Mitchell, MD

Herman Spater, MD

Jose Marrero, MD

Gaston Blom, MD

From April 2016 - July 2016



Throughout the Years...

