

INDO-AMERICAN PSYCHIATRIC ASSOCIATION NEWSLETTER



January 2025

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IAPA President's Message: Tarak Vasavada, MD

Dear Fellow IAPA Members,

Welcome to 2025! As I look forward to the following critical six months, I reflect on what my team has achieved over the past 18 months. Reality is settling in, and I am confident this will end well. We have launched new projects and will continue to advocate for them.

My newsletter creators, Drs. Vanita Sahasranaman and Kaushal Shah have worked diligently to enhance its appeal. In this edition, we are fortunate to have Dr. Viswanathan share his unique and enlightening perspective on psychiatry's past, present, and future. He emphasizes lifestyle psychiatry and the role of APA and IAPA young members in shaping the future.

This serves as a reminder of our new initiative: We invite U.S. and Canadian-based psychiatric residents and fellows to write an article, thought piece, commentary, or research abstract. We will publish selected articles in the educational corner and present awards to the top three writers. We have chosen Dr. Sahil Kapoor's article for this newsletter to express his views.

The IAPA Awards nominations are in. We have received outstanding entries from distinguished academicians and brilliant MIT scholars. Dr. Karuna Poddar is working behind the scenes to organize the entire process. We rank the applicants using a grid. Each committee member will send their blinded results to Dr. Poddar, who will calculate the final scores. Within a couple of weeks, we will announce the names of the IAPA award winners.

The relationship between IAPA, APA, and IPS (Indian Psychiatric Society) is significant. Dr. Rathi, the current IPS president, has invited Dr. Viswanathan and me to conduct a CME session on mental health updates at ANCIPS 2025 in Hyderabad. Several of our members have submitted their abstracts. At the 2025 APA meeting in Los Angeles, Dr. Viswanathan invited IAPA and IPS to participate in a joint presentation, and we plan to ask the British Indian Psychiatric Association (BIPA) to collaborate with us by incorporating lifestyle medicine perspectives from their practices and country.

We are thrilled to welcome new members to the IAPA. Please encourage your colleagues to join us.

We are currently in the planning stages for the IAPA annual scientific and banquet meeting at the APA annual meeting in Los Angeles. Dr. Tanuja Gandhi, Rohit Chandra, and Vanita Sahasranaman have finalized the topics. The IAPA annual meeting contract for the Alexandria Ballroom has been signed. More details will be available in the news section.

Save the date: Saturday, May 17th, 2025.

I thank the IAPA board for their guidance and wisdom. I am grateful to have Bhagirathy Sahasranaman, Tanuja Gandhi, Sachin Mehta, and Rohit Chandra on my Executive Committee. My EEC members are always eager to tackle any challenges.

Sincerely,

Tarak Vasavada, MD

President IAPA 2023-25

president@myiapa.org

Dr. Ramaswamy Viswanathan, APA President's Interview with the IAPA Newsletter Editor



Newsletter Editor Dr. Sahasranaman interviewed Dr. Ramaswamy Viswanathan, president of the American Psychiatric Association, at the 2024 September fall meeting. Here is the full interview.

1. What inspired you to choose this year's APA "Lifestyle for Positive Mental and Physical Health" theme?

I lost my father when I was 2 years old, and he was only 42. He died of a sudden heart attack. The difficulties of growing up without a father in that society in those times and the fact that I did not have any memory of my father always troubled me. That started my interest in protecting one's health and longevity, so I was always interested in exercise and nutrition. When I went to medical school, I began noticing that many modern-day diseases are due to lifestyle factors. The data show that 80% of expenditures in the US are in treating diseases attributable to lifestyle. So I felt that one can help people a lot by focusing on lifestyle as an adjunct to other treatments. I am also interested in positive functioning mentally and physically, and lifestyle can do that.

2. What do you view as some of the most important issues facing psychiatrists today?

The number one issue is not having enough time to spend with patients unless you are in private practice and can regulate your own time, and are willing to accept proportionately less reimbursement when you spend more time if you accept the patient's insurance. The other thing is when you are dealing with third-party insurers, which most psychiatrists do, considerable time is spent on non-patient-interaction activities, such as a lot of paperwork, making appeals, and asking for prior authorizations for prescriptions. Our systems require us to take many courses and fill and submit numerous forms. Thus, there is much third-party intrusion and burden on practicing psychiatrists.

3. What advice do you have for psychiatrists-in-training and early career psychiatrists as they embark on their journey into the field of psychiatry?

I think networking is very important for two reasons: One is there are many things that people don't know about, and no institution can offer very good knowledge in everything. There is a lot of expertise available outside the institution. Even within institutions, if you network, you can learn more. One can also learn by observing others. When you are interacting with others, you can ask yourself, "What are they doing that I can emulate?". Similarly, when there is a negative experience, you can look at what is negative. The other thing is, there are a lot of opportunities that, unless you are prepared to take advantage of, can be lost. It is important to be vigilant about taking advantage of opportunities. It is important to be involved in organized psychiatry for the reasons I mentioned. You can also be effective on a much larger scale and that gives you a sense of fulfillment.

4. How do you envision the future of psychiatry?

I think technology, including AI, that is augmented intelligence —is going to impact on everything we do in the world, including psychiatry, and we need to adapt to it. Any tool has positive and negative effects, and we need to take advantage of the positive effects and at the organizational level, take steps to minimize the negative impact. There will be more and more self-help in mental health, which I think is a good thing — people have to take agency and responsibility for their own health. But in many cases, this has to happen under professional guidance, psychiatrists have to guide patients through technology and literature, and in many cases, self-help has to be an adjunct to professional interventions. We as psychiatrists have to take a holistic perspective of the person in improving mental and physical health, and appreciate that lifestyle plays a major role in addition to other kinds of treatments.

5. As APA President, what initiatives do you feel are important to support the well-being of psychiatry trainees and early career psychiatrists?

The number one issue is the financial burden which many face. I think the APA has to advocate for, as we are already doing, reducing the financial burden on people early in their careers by deferring interest payments and giving loan forgiveness for working in certain settings. Also, we have to give people career guidance, because money is only one of several things people need to look for in a job — the work has to fit their personality, lifestyle, and interests.. APA and district branches can advice on negotiating for one's first job. The other thing is bringing people together, giving them more networking and socializing opportunities, and mentorship.

6. What are APA's priorities for advancing diversity, equity, and inclusion within psychiatry?

The APA has already done a lot, and there are opportunities within the organization to address structural racism. The APA Division on Diversity and Health Equity and Council on Minority Mental Health and Health Disparities are charged with how the APA can work on DEI [Diversity, Equity, and Inclusion] issues in terms of fighting discrimination, and providing mentoring and leadership opportunities, as well as providing opportunities for involvement in governance, district branches, and with other organizations.

Attention: Residents, Fellow, and ECP

IAPA invites you to Submit your Poster

The IAPA plans to have an in-person Poster session/Competition on May 17th at the IAPA annual meeting. The details are as follows.

Instructions

Each US-based Psychiatry Resident, fellow, or ECP physician who is two years post-graduation can submit two abstracts as presenting authors. The authors must be members of IAPA at the time of the submission. Each individual may submit up to two abstracts as the presenting author. Only one presenting author per abstract is allowed.

A committee will review abstract submissions, and the authors of the selected abstracts will be informed by February 16th, 2025. The IAPA committee's decisions are final.

We request submissions in **two separate Microsoft Word files** that should be sent in one email. The **first file** should include the Title, Authors' names (underline the presenting author), University/Hospital affiliation, Phone number, and Email address.

The second blinded file should contain an abstract with the following subheadings: Title, Introduction/Background, Methods, Results, and Conclusion.

The abstract should be at most 350 words.

Please use Times New Roman in 11 sizes with 1.5 spacing. The subheading should be bolded. Residents or Fellows already in training in an accredited United States program are eligible to submit. Submissions should be sent to President@myiapa.org and IAPAnewsletter@gmail.com.

2025 APA Elections

<https://www.psychiatry.org/membership/awards-leadership-opportunities/elections>

Please register at the [APA election community page](#) and keep updated regarding APA elections. It is a new initiative this year.

Important Dates and Candidates:

Voting Polls Open	January 2, 2025
Voting Polls Close	January 31, 2025, at 11:59 p.m. ET
Election Results Announcement	By February 17, 2025
Leadership Transition	May 20, 2025

President-Elect	<u>Rahn Bailey, M.D.</u> <u>Mark Rapaport, M.D.</u> <u>Harsh K. Trivedi, M.D., M.B.A.</u>
Secretary	<u>Gabrielle Shapiro, M.D.</u> <u>Eric Williams, M.D.</u>
Minority/Underrepresented Representative (M/UR) Trustee	<u>Mansoor Malik, M.D., M.B.A.</u> <u>Kamalika Roy, M.D., M.C.R.</u>
Area 3 Trustee	<u>Kenneth Certa, M.D.</u> <u>Mandar Jadhav, M.D.</u>
Area 6 Trustee	<u>Lawrence Malak, M.D.</u> <u>Adam Nelson, M.D.</u>
Resident-Fellow Member Trustee-Elect (RFMTE)	<u>Craig Perry, M.D.</u> <u>Tariq Salem, M.D.</u>

APA National Election (Jan 2-31): Messages From the Candidates

President-Elect Candidates

[Rahn Bailey, M.D.](#)

As a dedicated member, I pledge to amplify the mission of the APA with an active voice. I would move our organization forward as a national and international leader in psychiatric education, research, and patient care. Most importantly, we must remain true to our goal of serving those in greatest need.

[Mark Rapaport, M.D.](#)

The APA is fortunate to have 3 outstanding candidates for the office of President-elect. We have different life experiences and platforms. I believe now is the time for the APA to make a concerted long-term commitment to eliminating prejudice and attaining true parity for our patients and ourselves. Please vote!

[Harsh K. Trivedi, M.D., M.B.A.](#)

I'm grateful to the APA for advancing my career – there's no better opportunity to pay it forward than serving as President-Elect. I have hands-on experience leading top organizations, lobbying on Capitol Hill, and impacting our profession for the better. Together, let's create endless possibilities for you and your patients.

Secretary Candidates

[Gabrielle Shapiro, M.D.](#)

Please vote to re-elect Gabrielle Shapiro as Secretary of the APA Board of Trustees. A dedicated advocate, I'll address burnout, work-life balance, administrative burdens, reimbursement parity, and scope of practice. Committed to mentorship, care access, and fair practices, I'll champion policies that support you, our profession, and our patients.

[Eric Williams, M.D.](#)

I believe our members, as the backbone of our organization, and our patients, though our members, should have their voices heard. I pledge to listen and bring the kudos, concerns, and ideas to the Board of Trustees. I hope you will trust me with your vote for Secretary. Happy Holidays!

M/UR Trustee Candidates

[Mansoor Malik, M.D., M.B.A.](#)

Colleagues, with the changing political climate, we need vigorous APA advocacy against anti-science agenda, social injustice, mass deportations, rollback of ACA, climate change denial and restriction of reproductive/LGBT healthcare rights. Please sign the petitions to protect [healthcare](#) and [non-profits](#). Please visit my candidate portal and vote for me.

Happy Holidays!

[Kamalika Roy, M.D., M.C.R.](#)

Please vote to re-elect Kamalika Roy to reinforce the voices of minoritized psychiatrists and patients in APA's advocacy, strengthen collaborative efforts to implement safer scope-of-practice safeguarding our ECPs, and uphold equal opportunities for women physicians and our patients' reproductive rights. Please visit [the Bio](#) and ballot booklet.

Area 3 Trustee Candidates

[Kenneth Certa, M.D.](#)

I believe I know the APA and the issues well. Medicine is changing fast, as society demands better access; physicians face more insurance company/government control,

practice constraints, and lesser-trained individuals delivering care. How does APA position itself: advocacy? unionization? Lots to consider. Please vote Certa Area 3 trustee.

[Mandar Jadhav, M.D.](#)

Dear colleague, I request your vote so I may represent your priorities on the Board. I would share fresh perspectives on our profession, having trained in the new millennium, and having worked alongside a wide coalition of stakeholders to improve our nation's mental health system. Ask me anything on [LinkedIn](#).

Area 6 Trustee Candidates

[Lawrence Malak, M.D.](#)

I am honored to ask for your vote for Area 6 Trustee. I bring years of dedication to education and serving the underserved. If elected, I will prioritize increasing access to quality care, supporting our profession, and fostering open communication with all members. Together, we can further the APA's mission.

[Adam Nelson, M.D.](#)

This holiday season, think about how APA can better serve your needs and the needs of our members, our profession, and our patients in the coming year. Please vote for me as your Area 6 Trustee, and lets discuss ways I can help bring your ideas to fruition.

Member Corner

Jagannathan Srinivasaraghavan, MD (Dr. Ashok Van)

Dr. Van is a Professor Emeritus of Psychiatry at Southern Illinois University School of Medicine & a practicing forensic psychiatrist. He is a Distinguished Life Fellow of the American Psychiatric Association & a Senior Fellow of the International Academy of Law & Mental Health. He has served twice as Vice President of the American Academy of Psychiatry & the Law. He is a Member at Large of the WPA Section on Forensic Psychiatry & Secretary of the WPA Section on Quality Assurance. Dr. Van has served in leadership positions in Veterans Affairs, Navy, State & other settings. He was the Past President of the Indo-American Psychiatric Association. Before 1973, the American Association of Psychiatrists of Indian Origin (The old name of IAPA) had three Chapters: New York, Connecticut & Virginia. Dr. Van started the fourth Chapter in February 1993 in Chicago & for the first anniversary, invited the APA President. In 1994, he became Treasurer of the organization. During Ramaswamy Viswanathan's IAPA Presidency, Dr. Van was the Secretary & initiated multiple Chapters, resulting in the IAPA becoming a national organization. Dr. Van served three years as



President of IAPA from 2000-03. He has lectured in more than 40 countries. He has received numerous awards, including the APA George Tarjan Award for outstanding mentoring of International Medical Graduates & Bruno Lima Award for Disaster relief efforts in Sri Lanka following the tsunami and providing mental health services in Christmas Island of Australia following a refugee boat disaster with multiple casualties. He also received an international Service Award from the sponsored Indo-Australian Psychiatric Association & Red Apple Service Award from the American Academy of Psychiatry & the Law. He has presented and participated in 13 ANCIPS meetings & has contributed to imparting knowledge. He was the first Asian American to be nominated for President-Elect of the APA; though unsuccessful, he paved the way for the second Indian American to lead the APA. Dr. Van is a passionate traveler who has visited all UN countries & been to both North & South Poles & is ranked #10 on the [Most Traveled People list](#).

[Read my Interview with Dr. Van from the 2021 PRMS blog here.](#)

Education Corner

Stigmas Faced by the Psychiatric Population: Inside and Outside of the Hospital

This is a new IAPA project. We invite all US Based IAPA MIT members (residents and fellows) to submit an article, and the chosen article will be presented in the newsletter.

By Sahil Kapoor, MD

Dr. Kapoor is a Psychiatry resident at the Baptist Health-University of Arkansas for Medical Sciences (BH-UAMS), December 2024.



"What mental health truly needs is more sunlight, more honesty, and more unapologetic conversation," states Glenn Close, whose words remain highly relevant today. This quote highlights the essential objectives and direction in the realm of mental health. Unfortunately, vulnerable populations continue to confront significant inequalities and stigma in various environments. The existence of such stigmas in society can be attributed to multiple factors, including a lack of understanding of mental health issues, stereotypical portrayals in the media, and specific cultural influences. There could also be some cultural and societal norms playing into the role of some past experiences, such as institutionalization and mistreatment, and sometimes social, economic, and political factors contribute to stigma.

Stigmas within Healthcare Institutions

In healthcare environments, biases among providers can perpetuate stigma, often stemming from inadequate training that leads to labeling individuals with mental health disorders. This focus on symptom management, rather than adopting a holistic approach, further reinforces stigma. Additionally, institutional barriers, such as hospital policies, management practices, and the surrounding environment, can contribute to this issue.¹ Furthermore, the lack of proper physician-to-physician interaction and handoffs can also contribute to the stigma within the hospital setting.

I still remember my first day as an intern. The Medicine team, before treating a patient for medical issues, had the notion of their psychiatric history. Consciously or subconsciously, we all go through similar things within or around us that should not be avoided but worked upon. Other medical teams prefer not to evaluate patients in the Psychiatric unit and were only accessible after multiple attempts to reach them until proper education. How would you feel if a loved one faced stigma for their treatment options because of their mental health?

Stigmas are a chain of thoughts, like a communicable disease, that spreads from individual to individual, and those resistant to it remain unaffected. Some with healthy genetics (unbiased and having their own opinion) are also unaffected. As Naomi Osaka said, "It's O.K. to not be O.K., and it's O.K. to talk about it," and we should teach the world to follow it, but subconsciously, people keep their mental health diagnosis in mind. Famous people have said famous quotes, such as Bill Clinton, "Mental illness is nothing to be ashamed of, but stigma and bias shame us all," but it takes a nonjudgemental approach to treating patients.

Negative Impact of Stigma on Mental Health

Outside the hospital, people with psychiatric illnesses often face social exclusion and isolation, sometimes affecting their education and employment due to the stigmas faced within their society. Media also have played a role in perpetuating stigmas, and there is a need to change public attitudes and to have proper laws and policies to decrease the existence of mental health stigmas in society.² Self-stigma comes from within an individual; they may think they are flawed, thus preventing them from seeking help. Stigma discourages help-seeking behaviors from the population suffering from any mental health disorder. It's a cycle that further leads to delayed treatment, exacerbation of symptoms, social isolation, worsening mental health, low self-esteem due to internalized stigma, low self-worth, and thus adverse treatment outcomes and recovery.³ The media is full of news and reports from individuals suffering from mental health leading to self-harm and suicide. "Oh, I am glad I don't have any psychiatric condition. Otherwise, I would have been labeled too," a statement by my friend who could see the stigmas faced by people with mental health disorders.

Stigmas also negatively impact people who take care of their family or friends suffering from any kind of mental health disorder.⁴ Individuals fear that they will be judged for not providing proper care, in turn leading to social isolation, reluctance to seek mental health

care, and also limited efforts to take responsibility for anyone suffering from a mental health disorder. This leads to further propagation of mental health disorders with increased severity in society.

As grown-ups, we are possibly equally responsible for perpetuating the stigma by using psychiatric symptoms as insults. This is the time we ought to be more discreet and sensitive with words and actions and help engender empathy and understanding in people with mental health disabilities. Stigmas revolve around us; we often hear certain words such as “mental,” “psychotic,” “bipolar,” and “borderline” when people describe an individual to label them, but we never know what an individual might be going through or what their mental health is.

Stigmas within the Asian-Indian community

The roots of Psychiatry can be traced back to times mentioned in Indian mythology, but to date, mental health stigmas have been prevalent, like the soul within a body. Though there has been more acceptance and more awareness, the roots are too deep for someone to seek help in times of need. I still remember the echoes of my neighbor’s daughter, who was tied inside the house as she suffered from Schizophrenia. Society’s pressure and acceptance, more to prevail in the same society, prevented their parents from seeking mental help. Our cultural factors play a role, too; myths that prevail, like mental disorders, are due to supernatural power.⁵ The Asian Indians are one of the largest communities in the United States.⁶ Despite that, there are very few studies on their mental health and their utilization of mental health.⁷ There are many stressors, including but not limited to language barriers, culture, nuances of gender roles, family structure, and intergenerational tensions.⁸ The National Latino and Asian American Study reported that while 18% of the general U.S. population sought mental health services and resources, only 8.6% of Asian Americans did so. Asian Americans fear being thought of as weak or “crazy” for having a psychological disorder—perhaps more than any other group. Shame and embarrassment force many to struggle in silence and never seek help.⁹ Many people don’t seek mental health as they do not want to look weak. Overall, Asian Americans are 50% less likely to seek mental health services.¹⁰ To bridge that gap, we must start at the roots of acceptance among ourselves and understand that “Mental health is as important as Physical health.” What we see can be treated easily, thus raising the importance of treating mental health disorders. Though this is about the Asian community, understanding any community, their beliefs, reservations, and hindrances to seeking any help must be highlighted, explored, and acted upon with empathy and better understanding.

Public Health Education/Role of Psychiatrist

Stigmas we are trying to end begin within ourselves. Even though direct personal exposure to people with mental health conditions has been shown to dispel negative stereotypes and decrease stigma, treating a patient as a patient despite their medical or mental history should be our primary aim.² As we know, brain

development occurs at the initial stages of life, and there should be a defined curriculum at schools to ensure that mental health is taken as a priority.

It is important to incorporate mental health awareness into school education and let people know that psychiatric illnesses are as many disorders as diabetes or hypertension. Education must be imparted as early as possible to avoid bullying and trauma in young minds. The need of the hour is to provide accurate information, open with stories, spreading awareness and education throughout the world. There should be a policy of positive interaction with people with mental health to reduce the stigma within themselves. There should be advocacy for inclusive policies and laws that can help reduce stigma and provide proper training to healthcare providers in different sectors of healthcare to manage people with mental health issues through non-biased and holistic care. Treating individuals with mental health addresses the condition with understanding, empathy, and acceptance so individuals do not feel compelled to hide their condition.



References:

46th IAPA Annual Meeting on Saturday, May 17th



The IAPA annual meeting is planned to be organized in the Alexandria Ballroom. The function will be held this year on Saturday (Not Sunday). [The King Edwards Ballroom](#) at Alexandria Ballrooms is featured in numerous Hollywood films, music videos, and famous photo shoots. King Edward captures all the royal elements, featuring gold leaf ceilings, crystal chandeliers, a romantic fireplace, and tall windows that flood the room with natural light. Perched above the ballroom is an elegant balcony terrace with endless skylights, creating a magical setting. The ballroom is a 10-minute ride from the convention center.

The meeting will have two sessions. The afternoon session will include poster sessions, the Outstanding Academician Award winner lecture, and the scientific session. The evening banquet will be a gala for award winners, dignitaries, and guests. We will cater an Indian buffet dinner followed by Indian DJ music.

Please plan to attend. You can book a hotel in the nearby area. Some APA hotels are 10 minutes' walk from the venue. Watch out for more around March 2025.

Indo-American Psychiatric Association (IAPA) Announces Poster Competition for Resident/Fellow MIT Members

The Indo-American Psychiatric Association (IAPA) offers psychiatric residents and fellows an opportunity to contribute to our newsletter with recognition for the best write-up at our Annual Meeting.

What: Call for Indo-American Psychiatric Association (IAPA) Newsletter Write-Ups by IAPA Resident/Fellow Member-in-Training (MIT) Members. One selection will receive the IAPA President Special Recognition Award at the IAPA Annual Meeting in May. We may open it for US medical students if they are interested.

Eligibility:

Who: Psychiatric residents and fellows enrolled in training programs in the United States who are also IAPA Member-In-Training (MIT) members.

Requirements: Submit a viewpoint/commentary for publication online in our newsletter. Each submission will be reviewed, and IAPA reserves the right to make edits and corrections.

Submission Requirements:

Deadlines (encouraged to submit as early as possible)

Quarter 2: February 7th, 2025

Quarter 3: March 15, 2025

Quarter 4: June 15, 2025 (Eligible for the award selection in years 25-26)

Manuscript Style:

Viewpoint/Commentary

Unpublished, Unplagiarized, single-spaced

Maximum words, including references: single-spaced 1,200

References: Up to 20 (AMA Style)

Cover Sheet: Listing contact information (full name, degree/s, residency program, email, phone, mailing address).

Judging Criteria:

- Timeliness of the topic

- Applicability to general psychiatry
- Clarity and coherence
- Evidence and support
- Impact and significance

Submission Instructions:

Email To: president@myiapa.org

IAPAnewsletter@gmail.com

IAPA Membership Information: <https://myiapa.org/membership-account/membership-levels/>

Please prepare your viewpoint/commentary according to the provided guidelines and submit it before the deadline for a chance to win this special recognition at the IAPA Annual Meeting in May 2025.

Upcoming Events

Interested in Attending the National Meetings? Save the Dates

[IAPA Annual Meeting: May 17th,2025, Alexandria Ballrooms, Los Angeles](#)

[APA Annual Meeting: May 17th-21st 2025. Los Angeles](#)

[ANCIPS: IPS Annual Meeting: January 22-25 Hyderabad, INDIA](#)

We thank IPS and President **Dr. Laxmikanth Rathi** for allowing many of our IAPA members to present at the meeting and hosting us.

IAPA Chapter Updates

Do you have any updates on your IAPA state or local chapter activities? If you want your state or local IAPA chapter activities featured in the IAPA newsletter, contact IAPA at IAPAnewsletter@gmail.com.

Chapter Support

IAPA leadership would be delighted to support chapter activities, revive existing chapters, and create new ones. If interested, contact the IAPA president or any EC/EEC members.

Access the Indian Psychiatric Society Journal

Click the link below to read the latest articles from the Indian Journal of Psychiatry. Content is free to explore and download.

<https://journals.lww.com/indianjpsychiatry/pages/currenttoc.aspx>

Access the *Indian Journal of Psychological Medicine*

The *Indian Journal of Psychological Medicine*, founded in 1978, is the official publication of the Indian Psychiatric Society, South Zonal Branch. It is published bi-monthly and has an open-access model. The journal undergoes a double-blind peer review process.

The journal publishes high-quality empirical original research and reviews articles about all psychiatric practices and research domains. The journal caters to mental health professionals and trainees, including psychiatrists, psychologists, psychiatric social workers, psychiatric nurses, academic psychiatrists (medical education), allied disciplines, and other medical professionals and paraprofessionals.

You can access the journal here. <https://journals.sagepub.com/home/szj>

If you are interested in writing an article, contact them at editor@ijpm.info

Are you interested in Contributing to the IAPA Newsletter? We need you!

We want to highlight the work of our IAPA members in the newsletter. If you would like to contribute, we invite you to send any article you have written, such as a clinical topic, poem, humor piece, or synopsis of your work. Please send it to us at iapanewsletter@gmail.com.

Become a Member of the IAPA!

The Indo-American Psychiatric Association continues to grow and contribute to education and advocacy in psychiatry. **We encourage everyone to become more involved in IAPA!**

Please visit myiapa.org for more information. If you or somebody you know are not a life member and would like to become one, please contact IAPA at president@myiapa.org

Thank you for being so supportive and part of the IAPA family!

We encourage our readers to join IAPA. Please spread the word among your colleagues to join our growing organization!

Live!

IAPA is now available on Instagram, LinkedIn, and Facebook.

Instagram:

<https://www.instagram.com/indoamericanpsychiatricassoc>

LinkedIn:

<https://www.linkedin.com/company/indo-american-psychiatric-association>

Facebook:

<https://www.facebook.com/myiapa>

Website:

www.myiapa.org

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IAPA thanks its Platinum sponsor, Professional Risk Management Services (PRMS), for its ongoing support and years of partnership.



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