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President's Column: New Year, New Opportunities
by Patrick Kelly, MD

As we turn our calendars to 2026, we face the familiar rituals of a new year: resolutions, predictions, and the promise of a fresh start. Yet I suspect many of us feel a different weight this January. The landscape of American healthcare shifted beneath our feet in the closing weeks of December. The announcement from the Department of Health and Human Services to cut millions in grant funding to the American Academy of Pediatrics—funding dedicated to SIDS prevention, autism detection, and adolescent mental health—was a stark reminder that the ground rules are changing for our profession and our patients across the age spectrum, including a population previously thought universally protected on both sides of the political aisle: children.

For those of us who have dedicated our careers to the mental health of young people, this moment carries particular weight. We have long operated under the assumption that certain commitments transcend politics—that the wellbeing of children, the integrity of preventive care, and the value of early intervention represent shared ground upon which policy disagreements might be set aside. That assumption now requires reexamination. We are entering an era in which established medical science may face headwinds we have not seen in decades, in which the expertise of professional organizations may be dismissed rather than consulted, and in which advocacy for vulnerable populations may be framed as ideological rather than humanitarian.

But therein lies our “new opportunity.”

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50% Clinical Year-Long Clinical Placement

Fellows will spend half of their time in a year-long clinical placement within a Los Angeles County Department of Mental Health clinical site. They will gain hands-on experience within a large, urban public mental health system and receive supervision from LAC DMH clinical leaders, combined with mentorship from UCLA fellowship faculty members.

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- Didactics led by faculty and non-physician community partners
- Experiential learning in the community;
- Mentorship
- Leadership project to enhance the patient care of their clinical site

For more information and to apply, please visit our website at <https://publicpsychiatryfellowship.semel.ucla.edu/>

Be Part of Something Transformative.

Built on the longstanding academic-community partnership between UCLA and the Los Angeles County Department of Mental Health, our 1-year fellowship equips early-career psychiatrists with clinical, leadership, and advocacy skills needed to make a lasting impact in public service.

How to Apply

- Cover letter (max 1 page) describing your interests in the fellowship and how the program relates to your goals
- Curriculum Vitae

Questions? Contact us at UCLAPublicPsychiatry@mednet.ucla.edu



GLP-1 Agonists and Dual GLP-1 Agonists for Serious Mental Illness: A Call for Equitable Access

by Galya Rees, MD

For individuals like G who live with serious mental illness, second-generation antipsychotic medications are often lifesaving. These medications prevent relapse, reduce suicide risk, and preserve the ability to function in community settings. Yet, as we all know too well, the same medications typically impose a profound metabolic burden. Iatrogenic weight gain, insulin resistance, dyslipidemia, and cardiovascular risk are not side effects at the margins; they are central contributors to the 15-25-year reduction in life expectancy faced by people with serious mental illness (SMI).

Antipsychotic-induced weight gain is one of the most distressing and treatment-limiting adverse effects. It is a major driver of medication nonadherence, relapse, hospitalization, and premature mortality. For many patients, it is not simply a quality-of-life issue; it is an existential barrier to remaining on the very medications that keep them functioning.

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Psychiatrists

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Mind the Gap: Reexamining Our Approaches to Disordered Eating

by Julia Seiberling, MD

If you were scrolling through social media in the 2010s, you likely came across the term body positivity. While the origins of this movement are found in the activist efforts of the Fat Acceptance Movement in the 1960s, its emergence online began in 2011 before nestling in the mainstream social media, fashion, and entertainment landscape around 2014. Unfortunately, like many of the social progressive gains seen in the 2010s, we are living through a cultural backlash with the pendulum swinging backward. In no small part aided by the advent of GLP-1 medications, the fashion, beauty, and entertainment landscapes now showcase a resurgence of the beauty standards that dominated the 90s and early aughts.^[ii] Once again, the thin body ideal reigns supreme while eating disorder prevalence is on the rise.

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Alternatives to Incarceration Committee Update - 2026

by Drs. Reba Bindra & Emily Wood

The Closure of Men's Central Jail: It Takes a Village

The SCPS Alternatives to Incarceration committee is dedicated to advocating for investment in community-based alternatives to incarceration such as mental health treatment, housing,



healthcare, and substance use treatment programs. The LA County jail system is the largest county carceral system in the country. In the first quarter of 2025, the jail had an average daily inmate population of 12,738 and it is estimated that almost 50% of inmates have a mental health related need. There is also a suggestion that up to 61% of the mental health population could potentially be diverted to community-based care. It has become the largest defacto mental health facility in the US.

The Men's Central Jail (MCJ) is one piece of the jail system. A quick internet search about it will be enough to lose your appetite...for days. Degrading and hazardous conditions, violence, and in-custody deaths. It opened in 1963 and designed for approximately 3400 inmates but it has been at max capacity or over capacity for many years. The deplorable conditions at MCJ have been an open secret for many years before the county formally acknowledged it. After years of pressure from advocates and the community, it was formalized.

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December Private Practice Committee Meeting Recap & Telehealth Controlled Substance Prescribing Rule Update *by Matt Goldenberg, DO*

On Tuesday, December 2, 2025, the SCPS Private Practice Committee held a Zoom Presentation with Important Updates from the California Medical Association (CMA) on two topics impacting Private Practice Psychiatrists. We discussed:

- 1) What Private Practice Psychiatrists Need to Know about The Data Exchange Rules for 2026
- 2) A 2026 Update on State and Federal Tele-Prescribing Rules

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Advocacy and Activism: a Synthesis on Praxis *by Austin Nguy, MD*

Last month, Dr. Goldenberg critically discussed a recent APA messaging by our president "Advocacy not activism." He eloquently explained that such a messaging is oftentimes

counterintuitive of the changes we want to see in organized psychiatry. He reviewed the difference between advocacy and activism and called upon psychiatrists to be the thought leaders of our mental health care system. Advocacy is a means in which people work within the internal structures to sort problems. However, activism often comes through an external lens where we initiate conversations about structural change.

I want to continue that conversation here. As a current psychiatry resident, I often feel quite overwhelmed and powerless when I am advocating for my patients. Working for the various healthcare systems and seeing day in and day out, the cycle of problems that really are upstream— housing insecurity, lack of education and literacy, occupational resources, and crippling drug addictions. I am learning medico-legal jargon and the various systemic and structural intricacies of our broken health care delivery. However residency training teaches you about how to operate the systems but we do not talk about how to change the system for the better.

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On Organizational Identity

by Emily Wood, MD, PhD

I've been thinking a lot lately about loyalty – where we place it, what we owe to institutions versus individuals, and how we navigate the tension between belonging and principle. These aren't just abstract philosophical questions. They're showing up in our field right now in ways that feel urgent and personal.

As psychiatrists, we spend our careers helping patients navigate conflicts between competing loyalties. A patient struggles between loyalty to family and their own wellbeing. Another wrestles with allegiance to a workplace culture that conflicts with their values. The literature on moral injury – originally developed in military contexts but increasingly applied to healthcare – describes the psychological distress that occurs when individuals are prevented from acting according to their ethical values due to institutional constraints. We recognize these as legitimate psychological dilemmas, not simple moral failings. Yet when it comes to our own professional organizations, we often avoid applying the same lens.

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SCPS Career Day - Photo Gallery

December 13, 2025

Our annual Career Day was held last month at Kaiser Permanente in West Los Angeles. We would like to thank our all of speakers, exhibitors and attendees for making this event happen. Special thanks to Galya Rees, MD, as well as our RFM Reps – Christopher Chamanadjian, MD, and Alexis Smith, MD + our DMUR Reps – Miles Reyes, MD and Austin Nguy, MD

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November Council Highlights

by Roderick Shaner

Meeting Date: November 13, 2025

Next Meeting: December 11, 2025, 7:00 PM (Zoom)

President's Report – Dr. Kelly

- **Remembering Dr. Soldinger:** Dr. Kelly invited attendees to share their memories of Dr. Stephen Soldinger and his distinguished record of service to SCPS, and Council voted to approved development by the Awards Committee of a distinguished service award in his name.
- **APA Strategic Plan Updates:** Members reviewed the new APA Strategic Plan, noting both its clear articulation of the organization's mission and goals and a hope for more detail regarding plans for organizational improvements in key areas recently cited by APA membership, especially those related to addressing evidence-based care and social issues.

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