

Our Mission

The Program in Global Mental Health Program at the Icahn School of Medicine at Mount Sinai enhances access to mental health care for people in East Harlem and around the world. Our program develops, trains, and educates ISMMS students, residents, and faculty to provide mental health services to those who need them most.

Telepsychiatry Project in Liberia: A Resident's Perspective

Michael MacIntyre, MD, PGY-4 at Mount Sinai Hospital

I have worked for the last two years with Alex Garphen, a mental health clinician (MHC) in the West African nation of Liberia, providing psychiatric telesupervision thanks to a pilot program started by the Program in Global Mental Health at the Icahn School of Medicine at Mount Sinai.

Given Liberia's psychiatrist shortage, the government has worked with the U.S. based Carter Center to train and license midlevel providers known as "mental health clinicians" who are able to provide psychiatric care to underserved areas throughout the country. Mount Sinai partnered with the Carter Center and the Ministry of Health to pair psychiatry residents with MHCs. Residents provide supervision on clinical, administrative, and personal issues related to practicing psychiatry.

A typical session starts after a day of seeing patients in clinic. Using VSee, a teleconferencing program, I connect with Alex. He frequently sits in a dark room since it is late at night. He often works around our busy schedules by meeting either late at night or during his lunch hour.

Alex is responsible for covering several different psychiatric clinical settings, including outpatient clinics, prison clinics, and emergency departments. He frequently practices in isolation with limited chances to interact with other providers.

Contrary to my expectations, supervision sessions center less around which medication to use and more around personal support. Largely modeled on my own supervision, we discuss the challenges of our work, including how to manage the resultant stress in our professional and personal lives. We explore the difficulty in managing patients who cannot come to appointments due to a variety of reasons, often simply lack of insight into their illnesses. We share struggles of tough family encounters and exchange tricks on how to engage family in the care of the patient. We talk about patients who cannot accept a diagnosis, issues surrounding medication refusal, and the frustrations of community stigma against the mentally ill.

This experience has stressed the importance of building a sense of community in mental health work. Peer consultation has long been considered a standard part of psychiatric practice in the United States. In my own clinical training, I have no less than four regular supervisors at a time and access to countless specialist consultants. This is not true everywhere. One Liberian MHC reported the program was challenging because it was their first-time discussing issues about patients with a doctor. However, in surveys of the program, MHCs frequently mention "personal support" as an important benefit.

Providing a sense of community for practitioners in low-income countries benefits everyone. I developed foundational skills in providing supervision, learned different approaches to patients, management of unique presentations of illness that I do not typically see in the United States, and acquired a better ability to understand psychiatric symptoms through a sociocultural lens. I helped to minimize feelings of isolation in a setting where providers have no one else to explore ideas or validate the effort and toll of working in mental health care. Today's internet connects the world more than ever, and innovative programs like telepsychiatry supervision can show providers from low-income countries that they are not alone.

Program Partnerships:

- Instituto Terapéutico y Psicológico para la Familia, Jarabacoa, Dominican Republic
- Grenada Ministry of Health
- HaitiChildren, Williamson, Haiti
- The Minds Foundation, in collaboration with GMERS Medical College and Sumandeep Vidyapeeth University, Gujarat, India
- The Aftermath of the Great East Japan Earthquake of 2011
- The Carter Center and the Ministry of Health, Monrovia, Liberia
- Belize Ministry of Health
- East Harlem Health Outreach Project
- Human Rights Work with Migrants, New York, New Jersey, and Texas

Check out our Program in Global Mental Health Website!

<https://icahn.mssm.edu/education/medical/md-program/global-mental-health>

- More information about each of our program partnerships
- News publications promoting the work of our faculty and residents
- Our publications archive
- Previous GMH newsletters

...and more!

Residents

Faculty

- Cindy Aaronson, PhD
- Amy Aloysi, MD, MPH
- Ben Angarita, MD
- Amy Cushing-Savvi, LCSW
- Steve Fayer, MD
- Rachel Fischer, MD
- Ludwing Florez-Salamanca, MD
- Vicki Gluhoski, PhD
- Gary Katzman, MD
- Jeffrey Kleinberg, PhD, MPH
- Daniella Loh, MD
- Glenn Martin, MD
- Milana Mor, MD
- Anna Rosen, MD
- Diana Samuel, MD
- Joshua Stein, MD
- James Squires, MD
- Elizabeth Visceglia, MD
- Hiwot Woldu, MD
- Robert Yanagisawa, MD

PGY-2

- Olivia Gibson, MD
- Anne Hart, MD
- Tomas Restrepo Palacio, MD
- Brice Reynolds, MD
- Adelle Schaefer, MD
- Ankur Upadhyay, MD

PGY-3

- Rachel Freydin, MD
- Richard Hempel, MD
- Marta Hoes, MD, JD
- Mark Kurzrok, MD, MPH
- Jacqueline Lewandowski, MD
- Erick Melendez, MD

PGY-4

- Zebib Abraham, MD
- Joy Choi, MD
- Daniel DeFrancisco, MD
- Michael MacIntyre, MD
- Rachel Wiedermann, MD

Detention Center Work in the U.S.

Joy Choi, MD, PGY-4 at Mount Sinai West/St/ Luke's

This winter, I traveled to San Antonio, Texas with Dr. Craig Katz and medical student Alaina Aristide for one week. During this week, we met with individuals from various organizations who are navigating the ever-changing immigration landscape in the U.S. We attended a panel on migration at the University of Texas San Antonio, performed asylum evaluations at the South Texas Detention Complex (Pearsall, TX), and saw a glimpse of the poor conditions in which the asylum seekers waited at the U.S.-Mexico border in hopes of crossing the bridge into the U.S.

During this action-packed week, we met with an immigration attorney, a pastor leading a non-profit organization and whose church was housing the asylum seekers, the young and old pouring their energy and resources into grass roots organizations, and numerous other volunteers. Behind the massive energy and passion these individuals exuded, I also sensed their fatigue and exhaustion. They were fighting against the ever stringent immigration policies and the public's fear and stigma. Many felt like they were isolated in their attempts to help the asylum seekers. I could not help but relate to their experiences, as I was just recovering from physician burnout. After a week, I flew out of Texas filled with hope but also concerns for these frontier warriors.

After a week in Texas, I spent three weeks in New Jersey visiting asylum seekers at various correctional facilities in Essex and Hudson Counties. I worked with several attorneys from American Friends Service Committee and Legal Services of New Jersey. I continued to experience frustrating moments in New Jersey. One place did not allow in-person interpreters in the medical room, and instead I interviewed the evaluatee in a room with glass walls. I recall being distracted by being able to see other clients, attorneys and officers in the surrounding rooms. One day, I showed up to the facility only to be told that the patient was taken off premise for the day. On two separate occasions, the attorneys had to call and re-confirm that I had received clearance to enter the facility. I wondered how the immigrants are supposed to manage this complex, inflexible system when I, a U.S. citizen with graduate level education, felt at times confused and powerless. While feeling dejected, I received e-mails from the immigration attorney in Texas that two of the asylum seekers, for whom I wrote affidavits, won their cases and were released from detention. We are in it for the long haul and these moments are so precious and sustain us through this journey. I know I will need them for certain, as I continue to advocate on behalf of this vulnerable population in my capacity as psychiatrist.



Photo taken while Dr. Choi was crossing the boarder between Mexico and the U.S.