



**Ashley N. Lawler, MD**

**Education:** University of Miami Miller School of Medicine MD 2014, University of Florida BA English Literature 2009

**Training:** 6/2014-current: Harvard Longwood Psychiatry Residency Training Program (HLP RTP); 2014-2015: Co-Chief Resident of Beth Israel Deaconess Inpatient Unit

**Professional Activities:** 6/2014-current: HLP RTP Research Track, working in Dr. Keshavan's lab studying effects of physical exercise on cognition in psychotic disorders; started an exercise group on the BIDMC inpatient unit; 2016: published a review article on new drug developments in psychosis; 2016-current: Assistant Editor at Harvard Review of Psychiatry

**Personal Statement:** It is an honor to be nominated for the resident member of the MPS. From my first introduction to psychiatry as a medical student on an inpatient unit, I have felt strongly compelled to advocate for our sickest patients. It is unfortunate that for these patients, the disease process itself can impede with their ability to self-advocate. I believe that in addition to treating these patients individually, it is our responsibility to advocate for them as a whole in a highly complex system that may otherwise not best serve them and their families.

My own advocacy has taken different forms over the years during my training. As a medical student in Miami, I ran the mental health station at our community health fairs, throughout eight underserved areas of South Florida and the Keys. I then worked with medical school faculty to continue care with these patients via phone check-ins, providing information on shelters, drug rehabilitation services, and local psychiatric services.

Within the context of residency, I have become personally invested in the management of medication side effects that further burden our patients' quality of life. I started a twice-weekly exercise group on our inpatient unit, and am working on research focused on physical exercise and working memory co-training in psychotic disorders.

If elected, I hope to continue patient advocacy, in an expanded and more direct way. I think that residents and fellows are in a unique position to identify weak spots in our current system, and believe that I could be a strong liaison between my colleagues and the MPS.