My Life as a Regional Medical Officer/Psychiatrist (RMO/P) in the Foreign Service

Marty Drell inveigled me to write a two-part article about my experiences as a Regional Medical Officer/Psychiatrist (RMO/P) with the U.S. Department of State (DoS). (As you know, Dr. Drell is a hard man to say no to, so I reluctantly agreed, knowing that once again I would have to face the terror of writer’s block.) I would have to face the terror of writer’s block.)

In this first article, I will describe my 8 years as a RMO/P with the DoS. As an RMO/P, I was a commissioned Foreign Service Officer (FSO), and thus I was simultaneously both a psychiatrist and a diplomat. (This is perhaps best subsumed under the heading of “The Most Unusual Job I Ever Had.”) In the second article, I will discuss the phenomenon of Third Culture Kids (TCKs): i.e., children raised in a culture other than their parents for a significant part of their developmental years. Being a TCK, whether the child of a diplomat, international businessman, or military officer, has enormous ramifications for the development of personal identity. In a fast-changing, globalized world, many young people have unique hybrid identities. Clinicians have reported that TCKs often seem to experience “acculturation stress” when they return to the United States to attend college after many years overseas because mainstream American culture is largely unknown to them.

Of course, my interest in the Foreign Service (FS) was rooted in my youth. Burdick and Lederer’s political novel *The Ugly American* had a great impact on me in the early 1960s. It depicted the gross failures of the U.S. diplomatic corps in a fictional Southeast Asian country, called Sarkhan. I came-of-age when John F. Kennedy, the creator of the Peace Corps, was president. His inspiring rhetoric called upon Americans to engage energetically with the peoples of the world, emphasizing that America’s fortunes were inextricably tied to our role as leader of the free world. I was an undergraduate at Georgetown University from 1962-1966, but I didn’t study in the School of Foreign Service, though it was an attractive option. The siren call of medicine was simply too strong. My father and paternal grandfather were both physicians and that ultimately determined my career choice.

I had a twenty-four-year academic career at the University of Wisconsin. For 14 years, I was Director of the Division of Child and Adolescent Psychiatry. Finally, at age 57, I was ready for a change and eager to join the FS, knowing that State had had a small psychiatric corps of officers since the 1970s. Like any major life change, my decision was overdetermined. On one level, I started to hear the “clock ticking” as I aged, knowing that there is only so much time to fulfill one’s aspirations. And frankly, I had a classic case of academic burn-out that I could not figure out how to reverse. My job had become a burden with an ever-increasing workload and ever-diminishing resources. (Sound familiar!) Another factor: The 9/11 attack spurred my interest in national service. I had been exempted from military service during the Vietnam era, and I had always felt slightly guilty about that. The FS represented an

“Diplomacy is the Art of Letting Someone Else Have Your Way”
Daniele Vare, Italian Diplomat and Novelist
opportunity, somehow, to make amends. Fortunately, my wife, Edie, is an enthusiastic traveler. She wholeheartedly signed onto the FS adventure which would have been impossible without her companionship and support.

Let me provide a little background on the DoS and the FS. DoS is a vast cabinet level agency headquartered in Washington, DC. It has an annual budget of $47 billion. There are 13,000 commissioned FSOs, of which about 25 are psychiatrists. (There are also 11,000 civil servants which hold down the administrative fort in Washington.) State is a centrifugal, far-flung enterprise with FSOs deployed to 270 diplomatic missions in 180 countries. Remarkably, about 95 percent of the FSOs are posted overseas at any one time, with only five percent in Washington. The de-centered nature of the workforce makes administering DoS competently an extremely daunting proposition. (I heard tales, hopefully apocryphal, of Washington having lost track of the whereabouts of an individual FSO for weeks at a time--is he in Ulan Bator [Mongolia]? Or Bishek [Kyrgyzstan]? Or Luanda [Angola]?) How does the FS interdigitate with DoS? Basically, the FS is the diplomatic corps of DoS consisting of commissioned, professional officers who formulate and implement the foreign policy of the United States.

I officially joined the FS on June 24, 2002. That afternoon in the company of 100 new FS inductees, I raised my right hand and swore to “protect and defend the Constitution of the United States from all enemies, foreign and domestic.” (Please note that I did not swear fealty to the President of the United States.) The swearing-in ceremony was followed by six weeks of orientation in Washington. During that time, I was told about the all-important WAPO (Washington Post) Test: Before you make any sort of tough decision at DoS--whether policy, administrative, or even a controversial clinical one--would you feel comfortable seeing its report in the pages of the Post. In August 2002, my wife and I boarded a plane for our first posting in Pretoria, South Africa. We really had only the vaguest idea of what we were getting into, but like all neophytes, we had pluck.

During my tenure as a RMO/P, I was posted for 2 years to Pretoria, followed by 4 years in Mexico City, and finally two years in Washington as Deputy Director of Mental Health Services. By then, I was 65-years-old, and mandatory retirement (in that sense the FS is like the military) from the FS awaited me. (Incidentally, my foreign tours were much more rewarding than my time in Washington. An adage heard in the FS is that you are a diplomat overseas, but just another bureaucrat in DC. It couldn’t be truer.)

What did I do as a RMO/P while posted overseas? My principal mission was to psychiatically support FSOs and their dependents whether at my home post or the outlying regional posts. I was given considerable freedom in shaping my clinical practice. I ended up doing about 60 percent child psychiatry and 40 percent general psychiatry. While in Pretoria, I also covered 14 outlying diplomatic posts (using Pretoria as my secure base) in Southern Africa--from Angola, in the far northwest corner of the region, to Mauritius, a small island nation far out in the
Indian Ocean, at the east end. I travelled every third or fourth week to visit an outlying post. This worked out surprisingly well for my wife and myself. For instance, when I travelled to the embassy in Gaborone, Botswana, Edie came along with me. After completing my clinical work at the embassy Health Unit (HU), we took five vacation days to visit the world-famous Okavango Delta, one of Africa’s greatest nature reserves for a safari. (If you are wondering, we paid for Edie’s travel, not the U.S. taxpayer.)

The professional work I did while at post might be described as “psychiatry lite” in comparison to a stateside practice. FSOs and family members with more severe manifestations of psychiatric disorders are not cleared to go overseas until they have been stabilized in Washington, DC. For children and teens, the most frequently seen disorders were attention-deficit/hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), learning disorders, adjustment disorders, depression and anxiety, parent-child relational problems, and high-functioning autism spectrum disorder (ASD). There were periodically crises when I had to step lively—like the evacuation of a depressed, suicidal teen from Pretoria back to Washington for secure inpatient care. A unique feature of my RMO/P role was the opportunity to consult with the international schools spread throughout my region. About nine percent of FS kids receive a special needs allowance from DoS so that parents can purchase professional services (e.g., speech therapy for a child with a language disorder) at post that would be roughly equivalent to those provided by their public-school district in Virginia or Wisconsin. Most international schools were eager for psychiatric input in relation to special needs youth as they had so little expertise available locally.

U.S. Embassies are by no means hermetically sealed from their host countries. I had many opportunities for contact with local people in South Africa and Mexico. For instance, one of my duties was to reach out to local psychiatrists at all the diplomatic posts I covered. I was looking for mental health providers with the skills and expertise to work successfully with FSOs and family members; the need was simply too great for me to handle all the clinical work myself. My connections with the local docs provided an entrée into the host cultures. Some of them remain friends today.

In retrospect, I realize that I had a curious relationship with the Foreign Service. I adapted, wittingly and unwittingly, by becoming a Sullivanian participant-observer. As a participant, I learned the customs, norms, and procedures of the FS, conducted my administrative and patient duties, and even managed to be promoted up the ranks. But I always held part of myself in reserve. I became a dedicated observer of FS life, a cultural anthropologist as it were. I attribute this to the fact that I did not join the FS until late middle-age when my identity, as a physician and psychiatrist, was firmly established. The majority of FSOs join in their twenties or early thirties when personal identity is much more pliable.

I made more than a few diplomatic blunders during my overseas tours. When my wife and I had settled comfortably in Pretoria, we threw a party at our house for a senior medical
officer, a colleague in the HU, who was departing post. I screwed up my courage and invited the Ambassador. In a moment of unguarded relaxation (incited by a little wine), I called him by his first name in public. Moments later, one of colleagues pulled me off to the side and sharply reprimanded me: “The Ambassador is never called by his first name in public, he is only addressed as Mr. Ambassador or Ambassador Smith.” I wanted to dig a hole in my living room floor and crawl into it. In my defense, I was a year into the FS and had never been instructed in matters of protocol. To invoke Donald Trump, “Who knew it was so complicated.”

Another faux pas occurred when I got the brilliant idea of concluding a visit to the diplomatic mission in Havana by attending an international meeting in Cuba on social aspects of psychiatry. This, of course, would likely mean professional interchanges with Cuban psychiatrists. I asked my superior in Mexico City permission to do so. Within a few minutes, the CIA Chief of Station joined the conversation. He vetoed the meeting for fear that as a FSO I would be targeted by the Cuban intelligence services. I was dumbfounded. Could I be duped or suborned by a clever enemy agent? Maybe. Nor did I understand then, at a visceral level, how utterly toxic (this was in the mid-2000s) the relationship between Washington and Havana was. As they say in Washington, I “ripped my trousers” on that one.

Paraphrasing Mark Twain, I have more stories to tell about life in the FS, some of them even true. (Beware. I may succumb to the urge to talk your ear off at the next Owls’ meeting.)

My time in the FS flew by. The most stressful part for my Edie and myself was four relocation moves in eight years. At the worst moments, the FS seemed like an overexciting roller coaster ride that would never end. When I retired at age 65, the return to Madison was rough. I really missed the “Big Stage” of Foreign Service life—living in a foreign land, constant travel, meeting all sorts of new and extraordinary people in the embassies and host countries, emergency duty in Haiti immediately after the 2010 earthquake, unique vacations, representing my country to the world, etc. I still manage to have an oar in the waters of that world as my youngest son is a FSO with the United States Agency for International Development in Yangon, Myanmar. Earlier this year, we flew to Myanmar and visited him and his family for two weeks. Our granddaughters, 6 and 4-years-of age, are well on their way to becoming Third Culture Kids, the topic of the next article in this two-part undertaking.

Finally, travel well and safely, as they say in the Foreign Service!

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