

In Memoriam



Our friend and colleague, Kristy Straits-Tröster, Ph.D. age 62, passed away peacefully on September 6, 2019, at Thompson Peak Medical Center, Scottsdale, AZ after a long and gallant battle with cancer. Alex, her husband of 31 years, and her niece, Madison, raised by Kristy and Alex since she was 11 years old, were at her side. Kristy was a founding member of the VISN 6 MIRECC who helped frame its mission and set it on a successful course.

John A. Fairbank, Ph.D.

Director, Mid-Atlantic (VISN 6) MIRECC

A Remembrance of Kristy Straits- Tröster, PhD by Harold Kudler

Kristy was born in Akron, Ohio but raised in Northern California. She received her doctorate in Clinical Psychology at the University of California – San Diego and San Diego State University. Kristy followed an eclectic career course and demonstrated a wonderful ability to adapt to new roles and succeed wonderfully in each of them. Just prior to joining the VISN 6 MIRECC, Kristy was working the VA National Center for Disease Prevention and Health Promotion. It was through her work at the National Center that she first heard of the launching of the MIRECC. Soon after, Kristy and I had our first meeting. The scene was the Duke Holiday Party at the University Club. I have a strong visual memory of standing there talking with Kristy while others darted around us in search of hors d'oeuvres. Kristy introduced herself to me and patiently explained to me (in the nicest way possible) that I should bring her into the new MIRECC as my partner in the Clinical Core which I was to lead. She was so bright, so full of wonderful ideas and so vivacious that I left the party convinced that she was absolutely right and looking forward to getting to work on the bold new ideas we had discussed that evening. You might say that it was collaboration at first sight!

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In Memoriam

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A Remembrance of Kristy Straits- Tröster, PhD

Kristy and I created a kind of manifesto for our new enterprise, a credo that we would never try to build anything until we had a clear understanding of what the Veterans and their families already wanted. This led to our multiyear effort to develop a comprehensive survey of OEF/OIF Veterans and their families regarding their health status, needs and preferences. In order to construct that, we first needed to run focus groups to inform the structure of the survey. Neither of us had ever done that so Kristy went out and got a book on how to run focus groups and Perry Whitted helped us contract with a highly experienced consulting group to get things going. Before long, Kristy and I were spending our evenings observing 6 focus groups (3 of male Veterans, 1 of female Veterans, 2 of family members) of users and non-users of VA services over the course of 2 weeks. As we watched (through a one-way mirror while munching on copious quantities of M&M's) we marveled at all we could learn by simply letting the groups talk among themselves in response to a few open-ended questions. The groups yielded invaluable insights into how members perceived their own well-being and that of their families, their attitudes about VA, how they made the choice of whether or not to pursue VA care and what obstacles they perceived in trying to access that care.

What we heard convinced us that we were correct that the MIRECC Clinical Core couldn't simply be just another clinic. Rather, it needed to be a translational research program capable of informing clinical services across VA and in community settings as well. In collaboration with Pat Calhoun, Jeannie Beckham, Everett Jones and a host of others, we eventually launched our survey of thousands of OEF/OIF Veterans which, in turn, has created a rich database which continues to be mined to this day. I also want to recognize Susan Watkins, Bruce Capehart and Gary Cunha who worked with Kristy and me in developing one of the first VA programs to focus on the families of deployed Veterans (something which VA Central Office considered so daring that they literally sent "minders" to keep tabs on us) and in developing "*The Face of the New Veteran*" orientation program for VA staff across the VISN

In 2005 Kristy was at the table of the first organizational meeting of what is now the North Carolina Governor's Work Group for Service Members, Veterans and their Families back in. She would be proud to know that the program she helped envision and run continues monthly to this day with leadership from top VA and state officials and attendance by 75 to 100 people in the room and over 5,000 remote attendees at every meeting.

Perhaps our biggest joint undertaking was our *Painting a Moving Train* series which we created and co-taught in partnership with the Citizen Soldier Support Program and all 9 North Carolina Area Health Education Centers (AHEC). We presented over 50 live day-long programs designed to raise the military cultural and clinical competence of community providers over the course of 5 years. Then we were awarded the first national grant from National AHEC enabling us to first train trainers across all 50 states and train a total of 20,000 clinicians coast-to-coast. During this project, Kristy distinguished herself as a national champion for Women Veterans and military families and children.

Every time that Kristy and I faced a challenge (and we faced quite a few) we would sit together in front of a computer and, in her words, "bang out" a document that would answer whatever need we were trying to meet. Perhaps our boldest move was to develop a presentation for one of the national VA Mental Health Conferences that called for a new "Public Mental Health" approach to deployment stress and PTSD. Kristy loved to be ahead of the curve and to lead by example. At the heart of our successful partnership over the years was Kristy's ability to help me articulate big ideas which she would then frame as testable hypotheses. And, of course, Kristy had a wonderful talent for developing datasets and for brilliant analysis of that data in order to address those hypotheses.

Kristy's circle of collaboration extended far beyond her work with me. In her "spare time", she helped frame and develop Coaching Into Care, ran the Durham site of a multi-center trial of Family Group Therapy for Veterans with TBI, and helped a series of junior faculty and fellows launch their careers. She also served as a clinician in the OEF/OIF Clinic.

When Kristy's husband, Alex, was recruited to bring his outstanding neuroscientific skills to Phoenix, Arizona, she left the MIRECC and transferred to the Carl T. Hayden Veterans' Administration Medical Center in Phoenix. There, as Section Chief of Health Psychology, she established the Primary Care-Mental Health Integration Program and was instrumental in the creation of the fellowship training program in Clinical Psychology. When she retired due to her illness, the fellowship training program in Health Psychology was named in Kristy's honor.

I've been keeping a card which Kristy handmade on my desk. She sent it to me in February after it became clear that her cancer was progressing rapidly. In it she fondly remembered "...with pride all that we accomplished for military veterans and families." The best way to honor Kristy's memory is to continue doing just that. And that mission is in very good hands thanks to everyone at the VISN 6 MIRECC. I know that she was proud to have been a founder of our program and a friend and partner to so many of us.

Transitions

Dr. Seamus Bhatt-Mackin has been named **Director** of the **Program for Clinical Group Work** under the MIRECC Clinical Core. This program aligns with his principal interests and work, which center around improving VA's "group work".



One type of group work is therapy for patients. Examples include DBT skills groups, CBT groups, Inpatient groups, single session After-Care groups. Another type is workgroups for clinicians. For example, treatment teams and psychotherapy consultation groups. Dr. Bhatt-Mackin provides training to psychiatrists, social workers, psychologists and other clinicians who do group work to help them improve skills and knowledge as there is minimal formal teaching in most training programs. His efforts

are helping clinicians meet the requirements to become a Certified Group Psychotherapist. His 2 day workshop provides the required 12 hours of didactics. He is working on establishing ongoing consultation to help provide the required 75 hours of supervision. He is also collaborating with the VA National Evidence Based Psychotherapy Program supporting their evaluation of group psychotherapies. Dr. Bhatt-Mackin is a Staff Psychiatrist, Individual Psychotherapist, Group Therapist and Clinician Educator in the OEF/OIF/OND Clinic at Durham VA. He is also an Associate Program Director for the Duke Psychiatry Residency Training Program.

Honors & Awards

Sleep problems like insomnia and sleep apnea are rapidly increasing among our nation's service members. VA needs to be ready to address the sleep needs of Veterans. To date, there are fewer than 300 certified Behavioral Sleep Medicine providers worldwide. Only a few of these specialists are employed in VA. The Durham VA's Psychology Postdoctoral Fellowship Program was recently honored for the quality of the training they provide. The Society of Behavioral Sleep Medicine has accredited their fellowship in Behavioral Sleep Medicine. This training program is proud to be the first VA institution to obtain this accreditation. Dr. Melanie Leggett is Director of the newly accredited program. The goal of accreditation is to develop strong Behavioral Sleep Medicine training. This leads to competent practice in the specialty area of Behavioral Sleep Medicine. Graduates of accredited programs are eligible to take the Diplomate in Behavioral Sleep Medicine examination administered by the Board of Behavioral Sleep Medicine. The Durham VA post-doctoral training program looks forward to training future generations of these specialists.

In the News!

Dr. Nate Kimbrel (MIRECC Clinical Core Co-Director) was recently invited to take part in a congressional briefing. The event was sponsored by the American Psychological Association and the Friends of VA. The topic of the briefing was *The Science of Veteran Suicide*.

Dr. Kimbrel's presentation was *Using Big Data and Precision Medicine to Assess and Manage Suicide Risk in Veterans*. The goal of this exciting new project is to use cutting edge approaches to improve the understanding, treatment, and prevention of suicide in Veterans. Planned approaches include artificial intelligence, advanced genomic analysis, scalable data analytics, and secure, high-performance computing. This huge project is co-led by Drs. Jean Beckham (MIRECC Research Core Co-Director), David Oslin, Philip Harvey, and Benjamin McMahon. There are also numerous other co-investigators at the VA and the Department of Energy.



Honors & Awards

Dr. Sarah Martindale (MIRECC Faculty, Salisbury site) has accepted an invitation to serve on the Editorial Board of the journal *Rehabilitation Psychology*.

New Leadership Activities

Dr. Holly Miskey (MIRECC Fellowship Co-Director, Salisbury site) has accepted an invitation to serve as Co-Chair on the International Neuropsychological Society's *February 2022 Meeting Program Committee*.

Dr. Stephanie Wells (MIRECC Faculty, Durham site) has accepted an invitation to serve as a member of the International Society for Traumatic Stress Studies' *Public Information and Education Selection Task Force*.

Invited Lectures

Dr. James (Trey) Bateman (MIRECC Faculty, Salisbury site) presented *Lewy Body Dementias* as part of the Salisbury VAMC Mental Health Grand Rounds on October 17, 2019.

Dr. Eric Elbogen (Associate Director, MIRECC Health Services Research Lab) presented *Psychosocial Rehabilitation, Protective Factors, and Risk of Suicide and Violence in Veterans* as part of the Durham VA PSR Seminar Series on October 16, 2019.

New Grants

Site Co-PIs: Drs. Sarah Martindale and Jared Rowland (MIRECC Faculty, Salisbury site), **Long-Term Impact of Military-Relevant Brain Injury Consortium** Funded by: DoD and VA

Visit our web site for more resources
<http://www.mirecc.va.gov/visn6>

Focus on the VISN

Welcome to New MIRECC Researcher

Stephanie Wells, PhD, completed her MS and PhD in Clinical Psychology at the San Diego State University/University of California San Diego's Joint Doctoral Program in Clinical Psychology and her internship at the Durham VA Health Care System in 2019. She is currently working in the Traumatic Stress and Health Research Laboratory as a Research Psychologist under the primary mentorship of Dr. Eric Dedert.



Stephanie's research interests are broadly within traumatic stress and posttraumatic stress disorder (PTSD) treatment outcome research. Stephanie's research has focused on the impact of evidence-based PTSD treatments, such as cognitive processing therapy and prolonged exposure therapy, on PTSD and co-occurring conditions, such as dysregulated anger and sexual dysfunction, as well as their impact on functioning and quality of life. Additionally, her work has also focused on increasing access to and engagement in PTSD treatments through novel delivery methods, such as telehealth and home-based care.

Her previous research has also utilized mixed-methods to understand veterans' reasons for prematurely dropping out of PTSD treatments in order to identify strategies to increase therapy engagement and completion. She is excited to continue to study how to improve PTSD treatments and how to utilize other novel delivery formats to increase access to and engagement in care. In her free time, Stephanie enjoys water sports, fitness, making ice cream, and spending time with her loved ones.

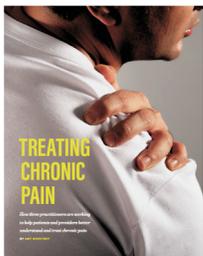
Belated Welcome to a 2nd Year MIRECC Fellow

Jeffrey Glenn, PhD, is 2nd-year Psychology Fellow at our Durham site. He received his doctorate in clinical psychology from the University of Virginia in 2018 and completed his clinical internship at Central Regional Hospital in Butner, NC. He continues his research in the Traumatic Stress and Health Lab, under the mentorship of Drs. Patrick Calhoun, Nathan Kimbrel, and Jean Beckham, and his clinical work in the PTSD Clinic. Jeff's primary research interests center on suicide and disorders, such as PTSD, that confer increased risk. His specific focus is on using novel technological and data science approaches to enhance the assessment, prevention, and treatment of individuals at risk of suicide and other self-destructive behaviors. He is excited to continue his work as a MIRECC fellow with the goal of improving mental health services and care for veterans. In his spare time, Jeff enjoys spending time with his wife, Charlene, and their 7-month-old son, George.



In the News!

Dr. Naylor's work on chronic pain management was featured in the Fall issue of the American Psychological Association's magazine *Good Practice!*



Treating Chronic Pain by Amy Novotney
Embracing a Biopsychosocial Approach

As a health psychologist, Naylor is fascinated by the mix of biology, psychology and social issues behind chronic pain—and the many different ways health-care providers can treat it.

link to full issue:

<https://www.apaservices.org/practice/good-practice/fall-2019.pdf>

Invited Lectures

Dr. Nate Kimbrel (MIRECC Clinical Core Co-Director) recently presented *Using Big Data and Precision Medicine to Assess and Manage Suicide Risk in Veterans* as part of a congressional briefing sponsored by the American Psychological Association and the Friends of VA on *The Science of Veteran Suicide*.

New Personnel

Leonard DeShield, Jr is the new Communication Specialist for MIRECC Education. His primary duties are to support and strengthen our dissemination and outreach efforts, particularly our website and newsletter.

MIRECC Personnel Honor National Suicide Prevention Month

Durham VA site



Richmond VA site



Salisbury VA site



Conferences

ACG*2019 San Antonio, Texas October 25-30, 2019

The Premier GI Clinical Meeting & Postgraduate Course
American College of Gastroenterology (ACG)
October 25 - 30, 2019, San Antonio, TX

Oral Presentation:

Pawa S, Banerjee P, Kothari S, D'Souza S, Martindale SL, Gaidos J, Oxentenko A, Burke C. *Are all endoscopic-related musculoskeletal injuries created equal?: A survey-based study of ACG gastroenterologists.*

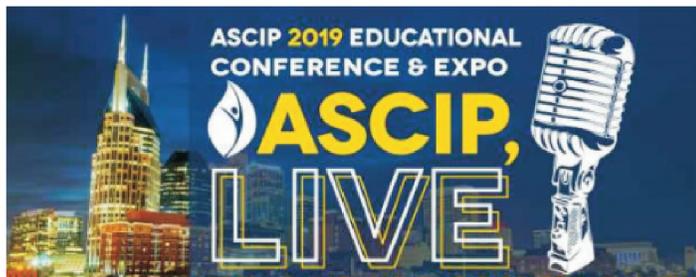
Poster Presentation:

Kimbrel NA, Dillon KH, Glenn JJ, DeBeer BB, Morissette SB, Meyer EC. *A longitudinal test of the indirect effect of combat exposure on veterans' risk for suicidal ideation.*

Mann AJ, Glenn JJ, Dillon KH, DeBeer BB, Meyer EC, Morissette SB, Calhoun PS, Beckham JC, Kimbrel NA. *Anger and nonsuicidal self-injury (NSSI): Findings from an ecological momentary assessment (EMA) study of veterans with NSSI disorder.*



International Association of Suicide Prevention (IASP)
30th World Congress, September 17 - 21, 2019
Derry-Londonderry, Northern Ireland



Academy of Spinal Cord Injury Professionals
September 1 - 4, 2019, Nashville, TN

Oral Presentation:

McDonald SD, Tan JS, Pickett TC, Beckham JC, Cifu DX. *Novel measure of health problem interference in preferred activities.*



The Science of Behavioral Sleep Medicine and its impact on Population Health

Society of Behavioral Sleep Medicine (SBSM)
First Annual Meeting
September 12 - 15, 2019, Birmingham, AL

Poster Presentation:

Leggett MK, De Pesa N, Ulmer CS, Swinkels C. *Impact of a Novel Group Intake Approach on Wait Times in a U.S. Veterans Health Administration Behavioral Sleep Medicine Clinic.*

Leggett MK, De Pesa N, Ulmer CS, Swinkels C. *Completing Group Intake in a U.S. Veterans Health Administration Behavioral Sleep Medicine Clinic.*



VA/DoD Suicide Prevention Conference
August 26 - 29, 2019, Nashville, TN

Dr. Jessica Walker (PST Training Program Coordinator for the National EBP Training Program within OMHSP/VISN 6 MIRECC) and VISN 6 colleagues Drs. John Hall and Nancy Furst made this presentation. They spoke to an audience of over 100 VA and DoD staff about the importance of understanding LGBT populations, VA care and health disparities. Most importantly, the team discussed what factors increase or decrease suicide risk in LGBT Veterans and proposed a model of LGBT affirming healthcare, specifically outlining ways to address (1) engagement and registration, (2) the environment, (3) leadership and policies, and (4) direct patient care.

Oral Education Presentation:

Walker J, Furst N, Hall J, Howarth E, Smith K. *Suicide Risk in Lesbian, Gay, Bisexual and Transgender Veterans: Practical Strategies to Improve Care*

Drs. Hall, First & Walker



Journal Articles

Adkisson K, Cunningham KC, Dedert EA, Dennis MF, Calhoun PS, Elbogen EB, Beckham JC, Kimbrel NA. *Cannabis Use Disorder and Post-Deployment Suicide Attempts in Iraq/Afghanistan-Era Veterans.* Archives of Suicide Research. 2019 Oct-Dec;23(4):678-687.

Elbogen EB, Molloy K, Wagner HR, Kimbrel NA, Beckham JC, Van Male L, Leinbach J, Bradford DW. *Psychosocial protective factors and suicidal ideation: Results from a national longitudinal study of veterans.* Journal of Affective Disorders. 2020; 260: 703-709.

Highlights:

- Suicide is a significant problem for a subset of veterans.
- Identifying psychosocial protective factors may help these veterans.
- Meeting basic needs and resilience were related to lower suicidal ideation.
- Total number of protective factors predicted lower odds of suicidal ideation.
- Psychosocial rehabilitation may be a promising approach for suicide prevention.

Glenn JJ, Chow PI, Teachman BA. *How badly will I feel if you don't like me? Social anxiety and the prediction of future affect.* Journal of Social and Clinical Psychology. 38(3): 245-275.

The current study investigated whether high and low socially anxious individuals would show differences in affective forecasting accuracy (i.e., the prediction of emotional states in response to future events) to positive versus negative social evaluation. High (n=94) and low (n=98) socially anxious participants gave a speech and were randomly assigned to receive a positive or negative evaluation. For affective forecasts made proximally (moments before the speech), those low in social anxiety overpredicted their affect to a greater extent to a negative evaluation versus a positive evaluation. In contrast, those high in social anxiety overpredicted their affect to positive and negative evaluations comparably, and failed to adjust their prediction for a future hypothetical negative evaluation - in effect, not learning from their prior forecasting error. Results suggest that affective forecasting biases deserve further study as a maintaining factor for social anxiety symptoms.

Rakesh G, Morey RA, Zannas AS, Malik Z, Marx CE, Clausen AN, Kritzer MD, Szabo ST. *Resilience as a translational endpoint in the treatment of PTSD.* Molecular Psychiatry. 2019; 24(9): 1268-1283.

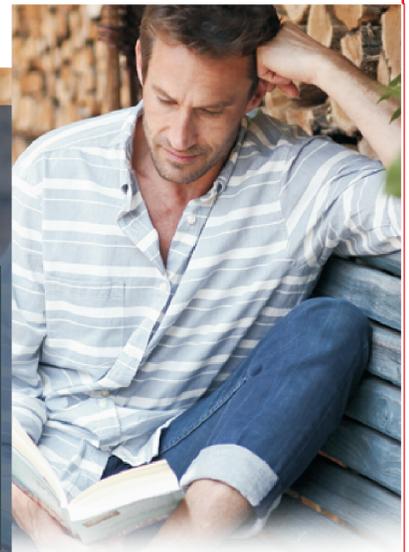
Resilience is a neurobiological entity that shapes an individual's response to trauma. Resilience has been implicated as the principal mediator in the development of mental illness following exposure to trauma. Although animal models have traditionally defined resilience as molecular and behavioral changes in stress responsive circuits following trauma, this concept needs to be further clarified for both research and clinical use. Here, we analyze the construct of resilience from a translational perspective and review optimal measurement methods and models. We also seek to distinguish between resilience, stress vulnerability, and posttraumatic growth. We propose that resilience can be quantified as a multifactorial determinant of physiological parameters, epigenetic modulators, and neurobiological candidate markers. This multifactorial definition can determine PTSD risk before and after trauma exposure. From this perspective, we propose the use of an 'R Factor' analogous to Spearman's g factor for intelligence to denote these multifactorial determinants. In addition, we also propose a novel concept called 'resilience reserve', analogous to Stern's cognitive reserve, to summarize the sum total of physiological processes that protect and compensate for the effect of trauma. We propose the development and application of challenge tasks to measure 'resilience reserve' and guide the assessment and monitoring of 'R Factor' as a biomarker for PTSD.

Sai KKS, Hurley RA, Dodda M, Taber KH. *Positron Emission Tomography: Updates on Imaging of Addiction.* Journal of Neuropsychiatry and Clinical Neuroscience. 2019 Fall; 31 (4): A6-288.

http://www.mentalhealth.va.gov/self_help.asp

Resources to Empower Veterans Mental Health

Self-help materials can provide valuable education and support for Veterans who may be facing mental health challenges, their friends, and family members. There are a wide variety of self-help materials available and it can sometimes be difficult to select the most useful. VA has assembled a list of reviewer-recommended materials that may be helpful in finding the right option for you. For help in finding these materials, please click the "How to Use" tab.



Resource Topics: General Mental Health, Depression & Anxiety, PTSD, Substance Abuse

Online Life Skills Training for Veterans

There are several **free and anonymous** on-line education and life coaching programs that use interactive exercises and video demonstrations to teach skills for overcoming life challenges. <http://www.veterantraining.va.gov/>

Anger Management



This course is based on training that was developed for Veterans and has been successfully used by Veterans & Service Members around the world.

Moving Forward



Moving Forward teaches Problem Solving skills to help you to better handle life's challenges.

Veteran Parenting



The biggest gap between you and your child may not be the physical distance. You can be right next door to your child and feel a thousand miles away.

Path to Better Sleep



If you are experiencing sleep problems you do not have to let it control your life. This course is designed to help you develop habits that promote a healthy pattern of sleep.



DEPARTMENT OF MILITARY
AND VETERANS AFFAIRS

<http://www.milvets.nc.gov/resource-guide>

The **DMVA Resource Guide** is produced and published by the North Carolina Department of Military and Veterans Affairs to assist and educate veterans in learning about state and federal veteran benefits. The **2019 edition** is now available.

Provider Education

CBOC Mental Health Grand Rounds



The Diagnosis and Treatment of Nightmare Disorder in Adults

Wednesday November 13 from 9-10 am ET

Thursday November 14 from 12-1 pm ET

Register in TMS in advance to attend and receive credit

<https://www.mirecc.va.gov/visn16/cboc-mental-health-rounds.asp>

Dec 11 & 12 *Impact of Guns on Public Health Issues Related to Global Suicidal Ideation Risk in the US*

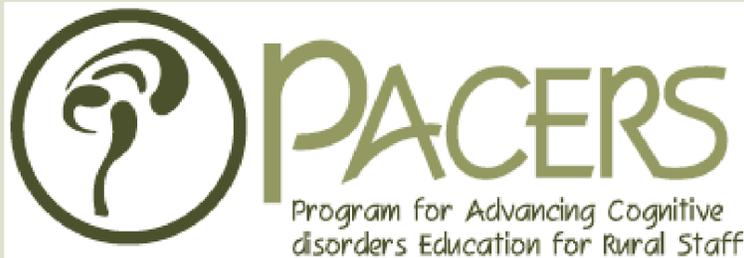
Jan 8 & 9 *Vet Centers*

Feb 12 & 13 *Ethics & Telehealth*

Mar 11 & 12 *Survivorship: Practical Tips for Facilitating Insight, Recovery, and Possible Growth*

April 8 & 9 *Ethics and Moral Injury*

check the website for previous webinars in this series available for credit in TMS



PACERS is an education program for health care staff in rural communities who care for Veterans with cognitive disorders and their caregivers. While this program targets rural health care staff, providers working in any setting can benefit from this information.

The PACERS online training curriculum includes six e-learning courses; each course is accredited for 1 hour of continuing education. There are also 5 videos that cover important topics related to cognitive impairment, including driving, self-neglect, challenging behaviors, Alzheimer's disease, and end-of-life.

<https://www.mirecc.va.gov/visn16/PACERS.asp>

VA Providers: Take courses using TMS links **Non- VA Providers:** Take courses using TRAIN links.

Course 1: Dementia and Delirium

Course 2: Identifying and Assessing for Dementia

Course 3: Treating Dementia - Case Studies

Course 4: Normal Cognitive Aging and Dementia Caregiving

Course 5: Addressing Decision Making and Safety in Dementia

Course 6: Dementia and Driving



BRIDGING MILITARY AND COMMUNITY SERVICE SYSTEMS

This workshop series was developed by MIRECC faculty in collaboration with Citizen Soldier Support Program (CSSP) and North Carolina Area Health Education Center (NC AHEC). The web-based versions of the courses are all free at: <http://www.aheconnect.com/citizensoldier>

1 - *Treating the Invisible Wounds of War (TTIWW)*

2 - *TTIWW - A Primary Care Approach*

3 - *TTIWW - Employee Assistance in the Civilian Workforce*

4 - *TTIWW - Issues of Women Returning from Combat*

5 - *TTIWW - Recognizing the Signs of mTBI during Routine Eye Examinations*

6 - *TTIWW - Understanding Military Family Issues*

7 - *TTIWW - Taking a Military History: Four Critical Questions*



Military Culture: Core Competencies for Healthcare Professionals

<http://deploymentpsych.org/military-culture>

Module 1: *Self-Assessment & Introduction to Military Ethos*

Module 3: *Stressors & Resources*

Module 2: *Military Organization & Roles*

Module 4: *Treatment, Resources & Tools*

NEW: *Military Culture and Spiritual Health*



www.mirecc.va.gov/visn6

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