



MIRECC Matters

VISN5 MIRECC: Putting Recovery Into Practice

VOLUME 15, ISSUE 1

JANUARY, 2014

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Letter from the Director

Richard Goldberg, Ph.D.

For this edition of the MIRECC Matters, I wanted to provide some reflections on our MIRECC's fellowship training. The VISN 5 MIRECC recently submitted our self-study to support our pursuit of American Psychological Association accreditation for our post-doctoral fellowship program. We are very proud of our commitment to training and the success of fellowship graduates. I would like to acknowledge and tout the accomplishments of two in particular. Following completion of her pre-doctoral internship here in 2006, Amy Drapalski was a post-doctoral fellow with the MIRECC for a year and a half and has since become a successful VISN 5 MIRECC researcher and national trainer. She is currently Principle Investigator on a Health Services Research and Development Merit Award that is evaluating an innovative and recovery oriented intervention designed to reduce self-stigma among Veterans with serious mental illness. She also recently completed all required Just in Time requirements and is awaiting final word of approval for funding of a Rehabilitation Research and Development Merit (as co-PI, along with Deborah Perlick at the VISN 3 MIRECC) to evaluate a

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Letter from the Director

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multi-family group therapy intervention for Veterans with mild TBI. Amy is also currently working on a VISN 5 MIRECC funded pilot focused on the family planning and contraceptive needs of women Veterans with serious mental illness.

Jennifer Aakre completed here pre-doctoral internship here in 2010 and continued with us as a post-doc through 2012. During her tenure with us she has been awarded 2 MIRECC pilots; one looking at how to best use Cognitive Processing Therapy (CPT) with Veterans living with serious mental illness and co-occurring PTSD, and another looking at internalized stigma among Veterans with PTSD and a history of sexual trauma. Most recently Jennifer completed her Just In Time requirements and is awaiting final word of approval for funding of a 2-year Rehabilitation Research and Development SPiRE Award entitled "Reducing Internalized Stigma among Veterans with PTSD: A Pilot Trial."

Beyond their successes as researchers, both Amy and Jennifer have made important contributions to VACO training and policy initiatives. Amy, for example is a member of the VA National Reproductive Mental Health Steering Committee. Both Amy and Jennifer are national experts and trainers in Social Skills Training (SST) and have helped train several hundred VA providers as part of the VACO sponsored roll-out of this evidence based, recovery oriented practice. Amy and Jennifer also contribute to a wide range of local, VISN, and national level programming and training supported by the VISN 5 MIRECC clinical and education cores. Their work as researchers and educators have helped the VISN 5 MIRECC successfully put *Recovery Into Practice* in keeping with our mission.

Rapid Response Project: Mixed-Methods Evaluation of Smoking Cessation in VHA HIV Care

Seth Himelhoch, MD, MPH

People Living with HIV/AIDS smoke at nearly 3 times the rate of the general population. Although the majority of people living with HIV/AIDS are interested in receiving smoking cessation treatment, smoking cessation interventions may not be routinely offered in the HIV treatment setting. Recognizing these challenges, the Office of HIV, Hepatitis, and Public Health Pathogens Programs and the Tobacco & Health Policy and Program developed and recently disseminated the HIV Provider Smoking Cessation Handbook. Whether or not the dissemination of these materials has led to implementation efforts on the facility level is not known.

The HIV/Hepatitis C Quality Enhancement Research Initiative's (QUERI) major goal to provide better chronic disease management for people living with HIV/AIDS. The Substance Use Disorder (SUD) QUERI's major goal is addressing substance use as a complicating factor in the treatment HIV. In line with these goals, the aim of this proposal is to use an explanatory mixed-method approach that is informed by the revised Promoting Action on Research Implementation in Health Services (PARiHS) framework to evaluate clinician-, facility, and system-level barriers and facilitators associated with implementation of smoking cessation treatment within the HIV treatment setting.

We will recruit clinicians from geographically diverse HIV treatment centers within VA. Complementary quantitative and qualitative data sources will be used to provide a full picture of the mechanisms by which conceptual factors (i.e., context, evidence, facilitation) are associated with implementation of smoking cessation evidence-based treatment. This method will allow us to develop facilitation strategies based on existing evidence and local context.

This study addresses the VA mandate to provide smoking cessation interventions to all Veterans who wish to quit and extends the work that we have done in our MIRECC on smoking cessation to another important group of smokers. It addresses VA Office of Public Health concerns regarding how to best implement evidenced based smoking cessation interventions to those with HIV who smoke. The results will provide the foundation for future plans to design, deploy, and evaluate smoking cessation implementation efforts in HIV treatment settings.

Training VA Peer Support Specialists as Facilitators in Wellness Recovery Action Planning

By Melanie Bennett

Wellness Recovery Action Planning (WRAP) is a peer-led illness self-management intervention that "...guides participants through the process of identifying and understanding their personal wellness resources and then helps them develop an individualized plan to use these resources on a daily basis to manage their mental illness" (SAMHSA, 2013). WRAP was originally developed as a means of self-help by individuals experiencing psychiatric symptoms. Dr. Mary Ellen Copeland began utilizing WRAP in 1997 and has shared this resource with people in recovery from a variety of behavioral health issues. Since that time, WRAP has been implemented in community and institutional settings across the country, and research has accumulated indicating strong outcomes for individuals with serious mental illness who participated in WRAP, including decreased symptoms and increased hopefulness and quality of life. WRAP is now recognized by SAMHSA as an evidenced-based practice to enhance mental health recovery for individuals with serious mental illness.

Over the last year, VA has hired over 800 Peer Support Specialists (PSSs), and there is growing need for those working within mental health services to be trained in WRAP. To date, PSSs who are interested in becoming WRAP facilitators and implementing WRAP groups must seek training outside of VA. In order to increase implementation of WRAP within VA, the VISN5 MIRECC is leading an effort to adapt WRAP facilitator training to the needs and structure of VA through a pilot development and implementation project that is bringing together representatives from local VA mental health services, peer support specialists, researchers in implementation, and representatives from The Copeland Center for Wellness and Recovery, the organization that has developed WRAP and is dedicated to training facilitators in keeping with its evidence-based principles. Project members have been working for the last year to adapt the WRAP training curriculum to the structure of VA. This has involved revising the training from a 5-day to a 4-day format, identifying alternative training formats including use of teleconferencing and distance learning in order to connect PSSs to training opportunities at remote locations, and studying ways to provide learning materials on WRAP and mental health recovery as part of existing VA training systems. In addition, procedures for helping PSSs complete their own WRAP prior to beginning the training, for assisting them in creating a WRAP group at their local VA, and connecting them with follow-up consultation have been specified.

WRAP "...guides participants through the process of identifying and understanding their personal wellness resources and then helps them develop an individualized plan to use these resources on a daily basis to manage their mental illness"

WRAP Facilitator Training

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The target date for the first round of in-person WRAP training for eight Peer PSSs is March 2014. Over the four days, PSSs will be steeped in an understanding of the values and ethics of WRAP, as well as hands-on development of their group facilitation skills. Emphasis will be placed on the creation of a safe learning environment as a way to model the environment that PSSs will need to create when they facilitate their own WRAP groups. PSSs will spend a lot of time learning about and practicing ways to convey recovery beliefs and principles through the WRAP process. After completion of the in-person training, Peer Support Specialists will set up WRAP groups at their local VAs and then participate in 6-month follow-along consultation comprised of regular conference calls with an Expert WRAP Consultant that will include review and assessment of trainees' adherence to the WRAP model and use of group facilitation skills. A site visit by the WRAP Consultant will be a key feature of the consultation period and will allow PSSs to get immediate and detailed feedback on their strengths as WRAP facilitators as well on areas that need improvement.

This training and implementation pilot project will also include a process evaluation that will gather information from the PSSs on their experience in the training program, the ease of use of distance learning and technology as part of their training, and how well the training program prepared them for facilitating their local WRAP groups. This evaluation is a way to gain an understanding of how the training program worked, whether it met the needs of the PSSs and imparted all of the skills needed to facilitate WRAP groups - information that will be critical to expanding the implementation of this WRAP facilitator training program to PSSs working across VA.

Substance Abuse and Mental Health Services Administration. (2013). Wellness Recovery Action Plan (WRAP). SAMHSA's National Registry of evidence-based Programs and Practices. <http://nrepp.samhsa.gov/ViewIntervention.aspx?id=208>



Meet A MIRECC Investigator

AN INTERVIEW WITH TEODOR POSTOLACHE, MD

Teodor Postolache is a MIRECC investigator and a Professor in the Department of Psychiatry and the director of the Mood and Anxiety Program at the University of Maryland (UM), School of Medicine. A graduate of the Cluj-Napoca Medical School in Romania, he completed postgraduate studies in Medicine at the Vienna General Hospital (Vienna, Austria) and Broussais Hospital (Paris, France), and his residency training in Psychiatry at the Beth Israel Medical Center (NY). Dr. Postolache is a diplomate of the American Board of Psychiatry and Neurology, and a licensed physician in Maryland and the District of Columbia. He is also certified in Behavioral Sleep Medicine by the American Academy of Sleep Medicine. He has studied mental illness in Baltimore, Washington DC, Old Order Amish from Lancaster County, suicide attempters in Sweden, patients with schizophrenia in Germany, and national population cohorts in Denmark. Dr. Postolache received a Laughlin award from the American College of Psychiatrists, the 2000 Fellows Award for Research Excellence from NIH, the Walter Weintraub Award for Teacher of the Year from University of Maryland/Sheppard Pratt Psychiatry Residency Training, a NARSAD Independent Investigator Award, and the Distinguished Investigator Award from the American Foundation for Suicide Prevention.

1) Tell us about your area of research.

My clinical domains of interest are suicide and suicide risk factors, including mental illness, sleep disturbance, impulsivity and aggression. I am particularly interested in interactions between natural environmental factors (e.g.

light exposure, airborne aeroallergens and neurotropic pathogens and biological systems (such as the circadian, immune, and endocrine), in regulating mood, cognition and behavior.

2) What studies/programs of research are you currently working on?

A particular focus is the contribution of immune dysregulation to symptomatic and functional impairment in severe mental illness and individuals at high risk for suicide. We are particularly interested in potentially modifiable risk factors such as chronic latent infections, low vitamin D levels, allergy and allergen exposure, and metabolic factors with proven immune dysregulation such as obesity and diabetes.

3) What are the potential benefits of your program of research for Veterans?

Many studies have been focused on immune alterations in mental illness, but very few have actually looked at upstream factors that may precipitate or perpetuate immune activation. My hope is that we will be able to identify subcategories of Veterans with mental illness where preventing or treating a common neurotropic infection, allergy, very low vitamin D levels would improve their response to treatment, reduce the risk of suicide, improve functioning and quality of life.

4) How can people get in touch with you if they have questions about your work?

Please call me at the MIRECC at 410-637-1853 or e-mail me: tpostola@psych.umaryland.edu.

Upcoming Educational Activities at the MIRECC



EVENT FOR CAREGIVERS OF OLDER VETERANS WITH SERIOUS MENTAL ILLNESS

The VISN 5 MIRECC is hosting an event for family members and caregivers of older Veterans with serious mental illness. Older Veterans with serious mental illness who are interested in learning about issues that might be relevant to them as they age are also welcome to attend. This event is titled *Caregivers of Aging Veterans with Serious Mental Illness* is scheduled for February 11, 2014 at the VA in Baltimore. VA mental health providers who work with older Veterans with serious mental illness will give short presentations, and participants will gather in smaller groups to discuss their needs and challenges and areas in which they would be interested in gathering more information. Veterans and their loved ones are encouraged to attend!

CONFERENCE ON PEER SUPPORT SERVICES

The VISN 5 MIRECC will be holding its annual conference on June 10, 2014! The title of the conference is *The Role of VA Peer Support Specialist Services in Enhancing Recovery for Veterans with Serious Mental Illness*, and it will be held at the Baltimore VA. VA and community presenters will discuss clinical work and research related to Peer Support Specialists within VA including the VA national initiative to hire and train more Peer Support Specialists, and how Peer Support Specialists have been involved in mental health programs in different VA medical centers. Stay tuned for more information on this conference!

MIRECC MENTAL HEALTH RECOVERY RESOURCE TABLE

The VISN 5 MIRECC continues to host a regular Recovery Resource Table on the 2nd Floor of the Baltimore VA Medical Center. The table has VA mental health resources for Veterans and family members. Veterans can also learn of research innovations at the MIRECC, how our efforts can positively impact them, and opportunities for them to get involved. Stop by and see us!

Contact Ralf Schneider with questions or for information on any of these activities: 410-637-1874, Ralf.Schneider@va.gov.

Recent MIRECC Publications and Presentations

[VISN 5 MIRECC staff are listed in **bold**]

Publications

Blank, M.B., **Himmelhoch, S.**, et al. (2013). Treatment Considerations for HIV-Infected Individuals with Severe Mental Illness. *Current HIV/AIDS Reports*, 10(4), 371-379.

Bennett, M.E., Toffey, K., Dickerson, F., **Himmelhoch, S.**, Katsafanas, E., & Savage, C.L.G. (in press). A Review of Android Apps for Smoking Cessation. *Journal of Smoking Cessation*.

Dixon, L.B., Glynn, SM, Cohen, A.N., **Drapalski, A.L.**, **Medoff, D.**, Potts, W., Fang, L.J., & **Gioia, D.** (2014). Outcomes of a Brief Program, REORDER, to Promote Consumer Recovery and Family Involvement in Care. *Psychiatric Services*, 65(1), 116-120.

Himmelhoch, S., **Medoff, D.**, Maxfield, J., Dihmes, S., **Dixon, L.**, et al. (2013). Telephone based cognitive behavioral therapy targeting major depression among urban dwelling, low income people living with HIV/AIDS: Results of a randomized controlled trial. *AIDS Behav.*, 17(8), 2756-2764.

Keller, W.R., **Fischer, B.A.**, McMahon, R.P., Meyer, W., & **Buchanan, R.W.** (2013). Open-label sal-salate for the treatment of pre-diabetes in people with schizophrenia. *Schizophrenia Research*, 147(2-3), 408-409.

Kelly, D.L., Wehring, H.J., Earl, A.K., Sullivan, K.M., Dickerson, F.B., Feldman, S., McMahon, R.P., **Buchanan, R.W.**, Warfel, D., Keller, W.R., **Fischer, B.A.**, & Shim, J.C. (2013). Treating symptomatic hyperprolactinemia in women with schizophrenia: Presentation of the ongoing DAAMSEL clinical trial (Dopamine partial Agonist, Aripiprazole, for the Management of Symptomatic Elevated prolactin). *BMC Psychiatry*, 13(214).

Mangge, H., Weghuber, D., Prassl, R., Haara, A., Schnedl, W., **Postolache, T.T.**, & Fuchs, D. The Role of Vitamin D in Atherosclerosis Inflammation Revisited: More a Bystander than a Player? *Curr Vasc Pharmacol*. 2013. [Epub ahead of print] PubMed PMID: 24329737.

Marshall, T., **Goldberg, R.W.**, et al. (2014). Supported Employment: Assessing the Evidence. *Psychiatric Services*, 65(1), 16-23.

Okusaga, O., Muravitskaja, O...**Postolache, T.T.** (in press). Elevated levels of serum phenylalanine in schizophrenia: A guanosine triphosphate cyclohydrolase-1 metabolic pathway abnormality? *PlosOne*.

Okusaga O, Yolken RH,...**Postolache TT.** (2013). Elevated gliadin antibody levels in individuals with schizophrenia. *World J Biol Psychiatry*, 14(7), 509-15

Warren KR, **Postolache TT**, Groer ME, Pinjari O, Kelly DL, Reynolds MA. (2014). Role of chronic stress and depression in periodontal diseases. *Periodontol 2000*, 64(1), 127-38.

Presentations

Blank, M., **Himmelhoch, S.**, Balaji, A., Helfinger, J., **Dixon, L.**, et al. A Multisite Study of the Prevalence of HIV using Rapid HIV Testing in Mental Health Settings . Presented at American Public Health Association, 2013.

Buchanan, R.W. The Neural Circuitry of Social Impairments in Schizophrenia Spectrum Disorders. American College of Neuropsychopharmacology 52nd Annual Meeting, Hollywood, Florida, December 9, 2013.

Reddy, F., Horan, W., Wynn, J.K., Corey-Lisle, P., Maglinte, G., Barch, D.M., **Buchanan, R.W.**, Gold, J., Young, J., & Green, M.F. Assessing Effort-Based Decision-Making in Schizophrenia with Two Novel Behavioral Paradigms. American College of Neuropsychopharmacology 52nd Annual Meeting, Hollywood, Florida, December 9, 2013.

Fischer, B.A., Keller, W.P., McMahon, R.P., Meyer, W., Miller, M., & **Buchanan, R.W.** Endothelial Function in Schizophrenia. American College of Neuropsychopharmacology 52nd Annual Meeting, Hollywood, Florida, December 10, 2013.

Barch, D.M., Marder, S.R...**Buchanan, R.W.** Task-Related Brain Activation in Subjects with Chronic, Stable Schizophrenia and the Effects of a Single-Dose α -7 Nicotinic Acetylcholine Receptor Agonist (AQW051): A Placebo-Controlled, Double-Blind, Randomized Study. American College of Neuropsychopharmacology 52nd Annual Meeting, Hollywood, Florida, December 11, 2013.

Comings and Goings

We are happy to welcome two new staff members to the VISN 5 MIRECC!

Kelly Lloyd, MHS and Lynn Calvin, BS both will be working as recruiters and assessors for studies at the MIRECC that are examining medical illness management and mental health stigma among Veterans with serious mental illness. Kelly received her Master of Health Science in Mental Health from Johns Hopkins in 2008 and most recently worked as a clinical research assistant on a study examining inpatient treatment services for alcohol use disorders. Lynn has a BS in biology from Coppin State College as well as additional coursework in alcoholism counseling. She has extensive experience coordinating clinical trials research, training research staff, and administering research assessments.

Welcome to both of you!

Upcoming Conferences and Events

MIRECC SCIENCE MEETINGS

The MIRECC organizes a series of meetings at which invited speakers and local researchers present research findings, discuss other projects they are working on to get input from peers, or discuss other research-related issues. These meetings occur twice per month and are held in the MIRECC conference room (7th Floor Baltimore Annex). Dates, speakers, and topics for the spring are listed below. Please contact Melanie Bennett (Melanie.Bennett@va.gov) for more information.

Clayton Brown, Ph.D. on Analysis of Longitudinal Data (2/25/14)

Eric Slade, Ph.D. on Overview of VA Administrative Data Resources (4/22/14)

James Waltz, Ph.D. on Motivational Deficits and the Physiology of Reward Processing
(5/13/2014)

RECOVERY-ORIENTED SMALL GRANTS PROGRAM

Application Deadlines: 1st of March, June, September, & December
Small Grant Amount: \$300-\$5000

The VISN 5 MIRECC offers a small grant mechanism to fund recovery-oriented clinical and educational innovations in response to the VA's Action Agenda to transform VA mental health services to a recovery model. This program especially encourages (but is not limited to) proposals such as: creating, adopting, launching or expanding recovery-oriented clinical or self-help projects; new programs to educate staff, Veterans, and/or family members of Veterans about mental health recovery models; or specific recovery-oriented services/programs. For more in-

MONTHLY CONSULTATION SEMINAR Psychopharmacology Case Conference

First Thursday of every month

1:00 - 2:00 PM

Call 1-800-767-1750, code 79846

All VISN Clinicians are invited to attend this conference and to bring questions about a difficult or challenging psychopharmacology case. Note that the topic of the conference has been expanded from a focus only on metabolic side effects of antipsychotic medications to include all areas of psychopharmacology. The MIRECC Case Conference facilitators are Robert Buchanan, M.D., MIRECC investigator and Professor of Psychiatry at the UMB School of Medicine; Julie Kreyenbuhl, PharmD, Ph.D., MIRECC investigator and Associate Professor in the UMB Department of Psychiatry; and Neil Sandson, M.D., inpatient attending psychiatrist in the VAMHCS and MIRECC staff member.

Upcoming Conferences and Events

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VA Social Skills Training for Serious Mental Illness

Since 2008, the VA Social Skills Training (VA-SST) program has been training VA clinicians nationwide in the delivery of SST for Veterans with serious mental illness.

To date, the program has trained over 550 VA mental health clinicians in the delivery of SST. We have also trained over 30 Master Trainers as experts in SST, covering 18 out of the 21 VISNs across the country.

For more information on Social Skills Training and the VA-SST Training program, we encourage you to visit our website:

http://www.mirecc.va.gov/visn5/training/social_skills.asp

Matthew Wiley, MPH, VA Social Skills Training Program Coordinator:

Matthew.Wiley@va.gov

The VISN 5 MIRECC Seeks Veterans Interested in Mental Health Issues to Join Our Veterans Advisory Panel

Advisors are volunteer Veterans who meet once a month to hear about current VISN-5 MIRECC research, educational, and clinical projects and to contribute their perspectives, opinions and suggestions as Veterans.

All interested Veterans are encouraged to join!

Be part of the discussion.

Help shape MIRECC work in the VA.

Meet other Veterans with common interests.

Good on your resume, too.

To become a MIRECC Veterans Advisory Panel (VAP) advisor, or for more information, please contact:

Ralf Schneider, at 410-637-1874 or Ralf.Schneider@va.gov

The MIRECC Veterans Advisory Panel is not connected to a research study.

It is an ongoing group of volunteer advisors who help the MIRECC further improve its work.





MIRECC DIRECTOR

Richard Goldberg, Ph.D.

ASSOCIATE DIRECTOR, RESEARCH CORE

Julie Kreyenbuhl, Pharm.D., Ph.D.

ASSOCIATE DIRECTOR, EDUCATION CORE

Melanie Bennett, Ph.D.

ASSOCIATE DIRECTOR, CLINICAL CORE

Seth Himelhoch, M.D., M.P.H.

MIRECC ADMINISTRATIVE CORE MANAGER

Amy L. Drapalski, Ph.D.

MIRECC COORDINATOR

Matthew T. Wiley, M.P.H.

MIRECC MATTERS EDITOR

Melanie Bennett, Ph.D.

MIRECC MATTERS ASSOCIATE EDITORS

Jennifer M. Aakre, Ph.D.

Cindy Clark, R.N., C., C.D.

Amy L. Drapalski, Ph.D.

Richard Goldberg, Ph.D.

PHOTO CREDITS

Medical Media, VA Maryland Health Care System
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MIRECC MATTERS

An electronic publication of the

VA Capitol Health Care Network (VISN 5)

Mental Illness Research, Education, and Clinical Center (MIRECC)

www.mirecc.va.gov/visn5

MIRECC Matters is also available online:

www.mirecc.va.gov/visn5/newsletter.asp