



Improving the Quality of Life for Veterans with Psychosis

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Family Support for Recovery of Persons with Serious Psychiatric Illness: *The VISN 22 MIRECC Partners with the Office of Mental Health Service*

by Shirley M. Glynn, Ph.D.

Research demonstrates that participation in structured family psychoeducation programs, especially those emphasizing illness education, communication skills training, and problem-solving instruction, results in symptomatic improvements in persons who have experienced recent exacerbations of schizophrenia, bipolar illness, and depression.



Some of the seminal studies in this field were conducted by investigators at the VA Greater Los Angeles Healthcare System and UCLA, who sustain a commitment to developing family-based interventions to improve consumer outcomes and reduce relative burden in serious psychiatric illness. While participation in formal treatment programs may be valuable, it is also important to note that just having ongoing contact with a family member who provides emotional and/or tangible support in a non-critical manner is related to better functioning in persons with serious psychiatric

illnesses. Thus, programs and policies that provide for access to family psychoeducational programs, as well as those that simply support family relationships, are becoming key components of recovery-oriented mental health programs.

As part of its commitment to implement recovery-oriented treatment, the VA has specified a number of family related policies in the recently released Uniform Mental Health Services Package. All veterans with serious psychiatric illnesses are to be approached at least yearly (or at every hospital discharge if more frequent) to inquire about

"...the VA has specified a number of family related policies in the recently released Uniform Mental Health Services Package."

their interest in having their families involved in care, and the treatment team is to have, at a minimum, contact with the family yearly, if the veteran consents.

In addition, every VA medical center is to offer...

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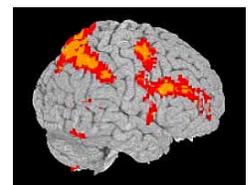
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Training Tools in fMRI by Greg Brown, Ph.D.

Over the past decade, functional magnetic resonance imaging (fMRI) has provided clinical neuroscience researchers with a new tool to investigate abnormal brain function. fMRI is noninvasive, highly repeatable and, now, commonly available. Using a suite of magnetic resonance methods, researchers and clinicians can now obtain information about brain activity,

structure, and metabolism in one imaging session (See adjacent figure which shows brain areas activated by a spatial working memory task). With CPT codes now available to bill for fMRI scans, clinicians will increasingly use this new technology to map brain functions of individual patients, predict treatment response, and monitor treatment outcome.

The increasing use of fMRI in clinical research and clinical practice has generated a considerable demand for training materials. The VISN 22 MIRECC Imaging Unit...



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Letter From The Director

Stephen R. Marder, MD

The Family's Role in Recovery

Families can play a major role helping patients recover from serious mental illnesses. For example, patients with schizophrenia who have contact with their families are more likely to make progress in psychosocial treatments and rehabilitation. A number of approaches for engaging families in treatment have been developed and several have been found to be effective. These include therapeutic interventions to improve the family environment as well as programs to educate families about mental illness. Recently, organizations such as the National Alliance for the Mentally Ill (NAMI) have worked with experts to develop family education projects such as Family to Family. This program (<http://www.nami.org/Template.cfm?Section=Family-to-Family>) is actually delivered by trained family members to family members. The focus is on a number of serious mental illnesses including schizophrenia, schizoaffective disorder, bipolar illness and major depression.

This increased interest in engaging families is also being implemented in the VA. The VA Mental Health Strategic Plan and the Uniform Mental Health Services Package both emphasize the need for VA programs to engage families. The result is that VA facilities will be increasing and improving the services that are available to the families of veterans.

A program described in this newsletter's feature article will take place in September in Long Beach, CA to train VA clinicians from all of the Networks in approaches to families of individuals with serious mental illness. Individuals who attend this program will be trained in evidence-based practices and will serve as trainers in each of their networks.

In our "Where Are They Now?" section Dr. Joshua Madsen, a former MIRECC psychology fellow describes a new Family Mental Health program that he has helped to develop in San Diego. He notes that there has been substantial growth in treatments that focus on couples. This has been largely due to veterans entering the VA system after service in Iraq and Afghanistan.

The VISN-22 MIRECC plans to play a national role in both training individuals to become better family therapists and carrying out research to improve models of family therapy.

MIRECC 22 Live Meeting—Unit Reviews

by Jeffrey Grayson

The semi-annual meeting of the MIRECC executive committee was held on May 27, 2008 in Long Beach to review activities of each of the scientific units and discuss various educational goals for the next year. In the coming issues we will highlight different unit activities.

The first two Units to discuss their activities will be the Neuropsychopharmacology Unit (NPU) and the Im-

aging Unit.

The NPU Director is: Mark Geyer, Ph.D.



The NPU currently has two Pala Awards focused on the rodent attentional set shifting task (ASST) that parallels cognitive tests used in schizophrenia pa-

tients. Dr. Jared Young is studying the ASST in mice treated with nicotinic drugs and after genetic deletions of the alpha-7-nicotinic receptor that is linked to schizophrenia. Dr. Susan Powell is using the ASST to assess the ontogeny of cognitive deficits in isolated and socially housed rats. The Unit supports a VA Merit grant on stress mechanisms (Drs. Hauger & Ris-

brough), a new NIMH grant on the effects of COMT gene abnormalities on sensorimotor gating (Drs. Risbrough and Zhou), and a new NIMH grant on the effects of dopamine drugs on gating in mice treated with viral gene treatments to reduce dopamine D1 receptors in the brain (Drs. Zhou and Geyer).

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Fellowship Program News

Where are they now?



Joshua Madsen, Ph.D., recently graduated from the MIRECC fellowship program in clinical psychology, and joined the staff of VA San Diego Healthcare System and UCSD Department of Psychiatry. He first came to the VA in the summer of 2005, by way of the University of Colorado at Boulder, to begin his predoctoral internship in clinical psychology at the VA/UCSD consortium. During his tenure in the MIRECC fellowship program he continued to pursue his interest in couple and family based treatments among veteran populations that had begun during internship.

In his new position, he will be the director of the Family Mental Health Program (FMHP) of the San Diego VA. His duties will include teaching and training, clinical service, and research, and he will continue to collaborate with investigators at other sites to evaluate the effectiveness of couple therapy services within the VA system, as well as to identify mechanisms of action of such treatments. The FMHP has grown considerably since he first joined the clinic in with an increase in weekly caseload from approximately 12 couples to 40 currently. This growth has been due largely to the influx of OEF/OIF veterans into the VA system, but also to an increasing awareness of the immense value of couple and family based psychological treatments in supporting veterans' transitions following deployments and military service, among other benefits. He believes this is a very exciting time to be involved in this particular work.

Dr. Madsen describes his MIRECC experience as a critical step to obtaining his current position. The didactic program, networking opportunities, training support, and flexibility in selecting clinical activities, provided the requisite skills for the next stage of his career, and a context in which to hone them. "I have been very fortunate for the opportunities afforded to me during fellowship, and am very grateful to the many talented individuals that provided guidance along they way." *Editor's Note: This is the first in a series which will look at former MIRECC fellowship program participants and their experiences after leaving the program.*

For more information about the MIRECC Fellowship program visit:

<http://www.mirecc.va.gov/mirecc-fellowship.asp>

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Spotlight on MIRECC 22 Staff ~ Kathy Arndt



Kathy Arndt came to the Long Beach VA in January 1984 after spending 5 years working for the Department of Defense. Prior to joining the MIRECC in 1996, Kathy had broad VA experience serving as the secretary for Gastroenterology, secretary to the Assistant Chief of Medicine, support staff for the Quality Assurance program, and finally as the Administrative Officer for the Dialysis Program.

Kathy has worked in the MIRECC Education Dissemina-

tion Unit (EDU) since September 1997 and has enjoyed the varying challenges. "It has been a constantly evolving process and a great experience. I have thoroughly enjoyed all the wonderful people I have been privileged to work with over the years." Kathy has made significant contributions to MIRECC goals, especially as the logistics coordinator for many MIRECC educational events.

On October 31st Kathy will have completed over 30 years of Federal Service. In retirement,

she plans to travel, take some classes, enjoy her family and friends and spoil those grandchildren.





Meet Your Local Recovery Coordinators (LRC)

by Stacey E. Maruska, LISW

With the new national focus on recovery, the VA has funded Local Recovery Coordinator (LRC) positions at all facilities to help with transformation of local VA mental health services to a recovery-oriented model of care, to sustain those changes, and to support further systemic change as new evidence becomes available on optimal delivery of recovery-oriented mental health care. Each LRC is responsible for:

- Leading the integration of recovery

principles into all mental health services provided at the Medical Center and its affiliated CBOC's.

- Being directly involved in the direct provision of recovery-oriented clinical services.
- Providing training and consultation to facility leadership, staff, veterans, and family members regarding the recovery transformation.
- Promoting the integration of

recovery services across all mental health programs.

- Promoting activities to eliminate stigma associated with mental illness.
- Ensuring that veterans with SMI are given every opportunity to pursue and be responsible for their own goals.

Because the VISN 22 MIRECC shares these goals it is committed to supporting the efforts of the LRCs.

Long Beach



Stacey Maruska, LISW is a U.S. Army veteran and VA social worker. She completed her MSW in macro social work at University of Southern California. She spent the first part of her career at the West Los Angeles VA Medical Center as the VA Supported Housing Coordinator. Ms. Maruska in partnership with a veteran consumer established the Vet to Vet peer support program and the Mental Health Consumer Advisory Council at West LA. She has assisted other VISN 22 facilities in establishing their own peer support programs and consumer councils. Her current position is the Local Recovery Coordinator for the VA Long Beach Healthcare System and VISN 22 MIRECC Recovery Education.

Greater Los Angeles – Sepulveda



Frederick (Rick) Martin, Psy.D. is a clinical psychologist who has been in the field for thirty years. He spent the first part of his career at the Sheppard and Enoch Pratt Hospital in Towson, Maryland. He then worked for the VA Maryland Health Care System as the Clinical Manager of the Community Mental Health Sub-product Line and a member of the Clinical Core of the VISN Five Mental Illness Research Education and Clinical Center (MIRECC). Most recently he was the Coordinator of the Addiction Treatment Unit (ATU) at the West Los Angeles VA and the team leader of the Mental Health Intensive Case Management (MHICM) program at the Sepulveda Ambulatory Care Center.

Las Vegas



Mark Smasal, PhD is trained in clinical psychology which includes neuropsychological, psychological, and academic assessment. Evaluations may include the assessment of behavior – environment interaction, personality, intelligence, academic achievement, abilities and skills, and brain-behavior relationships. He has undertaken clinical responsibilities in various settings including three Veterans Administration Medical Centers; nursing homes; private practice as well as a University teaching hospital; post-acute rehabilitation hospital; University based outpatient clinic; State prison, and correctional facility. In such settings, he provided assessments and treatment to populations diverse in age and in economic, education, social, and cultural backgrounds. He has functioned as a neuropsychologist, behavior analyst, behavioral consultant, individual therapist, group therapist, forensic evaluator, expert witness, researcher / primary investigator, and assistant professor. He was coordinator of the Homeless Program at the Salt Lake City VA Medical Center for approximately three years. Dr. Smasal is currently the Local Recovery Coordinator at VA Southern Nevada Healthcare System. In that capacity he coordinates the implementation of recovery-oriented mental health services in all programs.

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Cont'd from Page 4 **Meet Your LRC**

Loma Linda



Christa Osuna, LCSW completed her Masters Degree in Social Work at the University of Southern California. She has been a Licensed Clinical Social Worker in California since 1991. Christa has worked with individuals who are dual-diagnosed at San Bernardino County Behavioral Health and in the private sector supervising pre-licensed clinicians who provide home and school based counseling with school aged children. In addition to her role as Local Recovery Coordinator with Loma Linda VA Medical Center, she is a clinician with the Intake Team in triage and in outpatient Behavioral Medicine Services, as well as a liaison for the Vet To Vet facilitators.

San Diego



Elizabeth Twamley, Ph.D. completed her Ph.D. in clinical psychology at Arizona State University, her psychology internship at UCSD, and her postdoctoral fellowship in Geriatric Psychiatry at UCSD. She is now an Assistant Professor of Psychiatry at UCSD, in addition to her role as a psychologist and Local Recovery Coordinator in the VA San Diego Healthcare System. Her research focuses on bridging neuropsychology and interventions for individuals with schizophrenia (e.g., work rehabilitation and cognitive training) and understanding component processes of neurocognitive performance in schizophrenia. Her current NIMH R01 focuses on supported employment in severe mental illness.



Susan R. Tate, Ph.D. is a Clinical Psychologist at the VASDHS and Assistant Adjunct Professor in the Department of Psychiatry, University of California, San Diego. Dr. Tate's clinical focus and research work has focused on interventions for adults with substance use disorders and the role of psychiatric and medical comorbidity in addiction treatment outcomes. She is currently working on two VA funded research studies: as Principal Investigator testing a health focused motivational intervention for alcohol dependent veterans and as Co-Investigator evaluating an integrated cognitive behavioral intervention for substance dependent adults with concomitant mood disorders. Another area of interest has been life stress and the impact of both chronic and acute life stressors on treatment participation and outcomes.

Cont'd from Page 1 **Family Support for Recovery...**

family consultation (a course of 3-5 targeted time-limited focused meetings to solve a particular issue) as well as either family education or family psychoeducation to all interested relatives of persons with serious psychiatric illnesses.

Systematically integrating families in care is a major transition for the VA, and the VISN 22 MIRECC has played a key role in helping the VA Office of Mental Health Services develop policies, procedures, and training programs to support this effort. For the past 18 months, Dr. Glynn, one of our VISN 22 MIRECC clinical researchers, has been working closely with the Office to refine policies and provide national training and consultation to support the implementation of

evidence-based family programs throughout VA. Dr Glynn and Amy N. Cohen, Ph.D., a member of the VISN 22 MIRECC Health Services Unit, are founding members of a VA clinical research group which has now hosted two national meetings to develop and refine a treatment algorithm to guide family services offered to veterans with serious psychiatric illnesses. Finally, the VISN 22 MIRECC is co-sponsoring, with the Office of Mental Health Services, a three day "Roll Out of the Uniform Mental Health Services Package" training for family clinicians and Local Recovery Coordinators throughout VA from September 22-24th in Long Beach. The conference will be attended by at least one Local Recovery Coordinator from every VISN and VA family clini-

cians from throughout the nationally recognized, VA and academic trainers. At the conference, staff from the VA Office of Mental Health Services will provide information on the VA's vision of recovery, and the role of families in that recovery, and experts on behavioral family therapy, family-focused therapy, multiple family group therapy, family consultation, the Support and Family Education (SAFE) program, and telehealth with families will conduct training. Participation in all of these efforts to bolster family involvement in care demonstrates the VISN 22 MIRECC's ongoing commitment to helping people recover from psychosis, and most particularly, have the caring relationships with others that most of us, with illness or not, desire.



Cont'd from Page 1 **Training Tools in fMRI**

has recently developed a set of PowerPoint slides to train individuals in basic fMRI methods. The slides are divided into 11 one and one-half hour lectures that cover topics ranging from the biophysics of the commonly used functional magnetic resonance signal to multivariate statistical models for the analysis of functional brain connectivity. Lectures include a discussion of magnetic resonance methods to measure cerebral blood flow and a detailed presentation of the general linear model used to derive brain activity maps for individual subjects. In April of this year Dr. Gregory Brown, the VISN 22 Imaging Unit Director, presented these

lectures to students and faculty at a seminar jointly sponsored by the, The Hong Kong Polytechnic University, The Chinese University of Hong Kong, and the Hong Kong Neuropsychological Association. The first seminar day included fMRI presentations from the select group of Hong Kong scientists who have begun doing fMRI. The last day included a tour of a large psychiatric hospital. One goal of the lectures was to stimulate cross-cultural brain imaging studies of individuals with severe mental illness. Cross-cultural studies may help identify core abnormalities of brain function that are culturally invariant as well as identify the

unique contributions of cultural on the expression of severe mental illness. The next step in this process will involve the exchange of graduate level or post-doctoral trainees. The Data Core of the VISN 22 MIRECC will post the PowerPoint lectures on the VISN 22 MIRECC website as part of the MIRECC Education Unit's outreach activities.



fMRI Scanner

Cont'd from Page 2 **MIRECC 22 Live Meeting—Unit Reviews**

The Imaging Unit Director is: Greg Brown, Ph.D.



The Imaging Unit has been continuing its work on identifying brain abnormalities in severe mental illness and using neuroimaging to examine how the brain changes with treatment. We recently completed a brain imaging clinical trial of adding donepezil to antipsychotic medication in patients with schizophrenia. Initial results were presented in the last newsletter, ongoing analyses will examine the role of anticholinergic burden and smoking and will examine how similar participants' subjective response was to their objective scores. We continue to collaborate

with the Biomedical Informatics Research Network (BIRN) to develop and test quality assurance and analytic tools for imaging research and for sharing imaging data. We have also been exploring specific information processing deficits underlying the problems that patients with psychotic disorders have with working memory using both mathematical modeling techniques and, more recently, magneto-encephalography (MEG), which helps to assess differences in the timing of neural events between patients and healthy individuals. Additionally, we have been collaborating with the Neuropsychopharmacology Unit on developing translational cognitive tasks and with the Education and Dissemination Unit to provide training opportunities.

The Imaging Unit has one Pala Award to Gregory Asgaard, PhD, MIRECC Psychology Fellow entitled, "Attention and Inhibition in Bipolar Disorder: A Translational Paradigm." This study aims to develop a test of selective attention and inhibitory processing that is directly translatable to animal models, and examine the neural underpinnings of the task in healthy individuals.





Quick Tip: Document Protection

Do you need to protect specific files that are on a shared drive, but don't want to create new folders?: Here is how to protect individual documents by applying a password so that no one can read, delete or modify your work. There are two different levels of protection that can be applied.

Procedure: Open document to be protected. From the toolbar select: File > Save As > Tools > Security Options > make choices as listed below > Protect Document

First option, is to open document: If applied you have to give the correct password to open the document.

Second option, is to modify document: If applied others must give a correct password to modify the document or it becomes read-only.



Note: For local security rules contact your Information Security Officer.

In the next issue...

- EQUIP Project
- Educational Conference Review
- MIRECC Retreat Summary
- Unit Reviews
- Fellowship Program
- Spotlight on MIRECC Staff

Upcoming Events:

Dr. David Kingdon Educational Training

~September 8, 2008

~Location: Coast Hotel, Long Beach

MIRECC Retreat: "Making Sense Out of Complex Data"

~September 16-17, 2008

~Location: Coast Hotel, Long Beach

Serious Mental Illness Family Training

~September 22-24, 2008

~Location: Coast Hotel, Long Beach

Social Skills Training

~October 30-31, 2008

~Location: Westin Hotel, Long Beach

~Kathy Arndt, 562-826-8000, x2546

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