



MIRECC Matters

VISN5 MIRECC: Putting Recovery Into Practice

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Letter from the Director

Richard Goldberg, Ph.D.

This month I have a number of administrative changes to announce. After a national competitive search, I was named permanent Director last month. As noted in my previous columns, I am both honored and excited about the opportunity to help lead the MIRECC on to continued success. In addition, Dr. Robert Buchanan, who has been the Acting Associate Director of the Research Core, will soon be assuming the position of Interim Director of the Maryland Psychiatric Research Center (MPRC). Given his new position at the MPRC, he and I both agreed it would be best for him to assume a new role within the MIRECC. Specifically, Bob will become the new Assistant Director of the Research Core and will focus his efforts on helping to further our collaborations with the MPRC and the Department of Psychiatry at the University of Maryland, School of Medicine. Bob will also work to strengthen our efforts in developing innovative translational programs of research here at the MIRECC. I am also delighted to announce that Julie Kreyenbuhl, Pharm.D., Ph.D., has accepted my offer to serve as the new permanent Associate Director of the Research Core. Julie, who has been affiliated with the MIRECC since its inception, has much to bring to the role and I am excited about working with her in her new position. Also, now that I am no longer in an acting position as MIRECC Director, I am happy to announce that I have named Dr. Seth Himelhoch as the permanent Associate Director of the Clinical Core and Dr. Melanie Bennett as the permanent Associate Director of the Education Core.

In keeping with our mission of putting recovery into practice, I would like to report on some exciting current efforts to support local, VISN and National VHA recovery oriented programming. At the local level,

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Letter from the Director

(continued from page 1)

we are currently providing expert consultation to support a new VAMHCS clinical initiative that is offering Veterans being discharged from inpatient settings services that help enhance continuity of psychiatric outpatient care and support recovery. Based on an intervention evaluated in the context of a MIRECC investigator initiated VA Merit study, the new VAMHCS program will help extend the delivery of evidence-based and recovery-oriented services to seriously mentally ill Veterans at a critical juncture in their care. For those interested in reading more about the funded research noted above, our main outcomes were reported in a Psychiatric Services manuscript published in 2009 [Dixon, L.B., Goldberg, R.G. et al. (2009). Use of a critical time intervention to promote continuity of care after psychiatric inpatient hospitalization. *Psychiatric Services*, 60(4), 451-458].

At the VISN level, we are working with mental health leadership, local recovery coordinators, and Veterans to establish a workgroup charged with supporting the expanding peer workforce taking root across VISN 5. In addition to supporting new hires linked to the Peer Support Apprentice and Peer Support Specialist positions described in the GS-102 Series, the workgroup will also support the growing number of volunteer mental health peers to ensure that programs and settings benefit from their unique perspectives and lived experiences.

Nationally, I am delighted to report that Dr. Alicia Lucksted, the VISN 5 MIRECC Recovery Coordinator recently delivered a webinar for the VA Women's Mental Health Teleconference Series entitled "Creating a Welcoming Clinical Environment for Lesbian, Gay, Bisexual, and Transgender Veterans." Drawing on her expertise in mental health recovery, Dr. Lucksted delivered a powerful and well-received program that will help extend the principles and strategies of recovery to new VA initiatives to create welcoming and culturally competent services and supports for LGBT Veterans.

***MIRECC Matters* is also available online:**

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

Using Technology to Support Smoking Cessation in Individuals with Schizophrenia

By Melanie Bennett

Smoking and smoking-related illnesses are enormous problems for Veterans, and VA is very interested in helping Veterans quit. Smoking is a critical problem for individuals with schizophrenia. Over 60% of people with schizophrenia smoke, a rate that is double that of the general population and remains high despite decreases in rates of smoking overall. Treating smoking is critical to improving the health of people with schizophrenia. The VA and the VISN 5 MIRECC are committed to assisting Veterans with schizophrenia in their efforts to quit smoking and provide cessation services for those who want them. Another promising strategy to promote quitting and support continued confidence in one's ability to stay quit is the use of applications (i.e., apps) on smartphones and handheld computers such as the I-pod Touch or the I-pad. There are many applications that target smoking cessation and they have many benefits. Applications can include content that is both tailored to the individual and general to the larger group of smokers, and they are used on portable devices so that individuals can access content in real time when they are experiencing urges or cravings to smoke.

It is unclear whether these and other technologies are available to and can be used by individuals with schizophrenia. To examine these questions, Drs. Melanie Bennett and Seth Himelhoch, investigators at the MIRECC, are conducting a pilot study funded by the MIRECC to collect information on the availability and use of computers, mobile devices, cell phones, and Smartphones to access health related information by individuals with schizophrenia, both within and outside of VA. The study includes a survey of individuals with schizophrenia who smoke at least half a pack of cigarettes per day regarding their use of mobile devices and handheld computers, as well as use of the internet for health information. Findings from this survey will allow for a clear understanding of the types of technology that smokers with schizophrenia have and access on a regular basis - information that is critical to incorporating a mobile application as part of a smoking cessation program for this group of smokers. Following the survey, a subset of participants will complete a brief training to learn to use a widely available app to assist smokers in quitting. Findings from the training will offer valuable insight as to whether individuals with schizophrenia can and want to use a mobile application for health behavior change and how best to structure a training for application use.



Educational Conferences Planned for Spring 2013

By Rebecca Wald

The VISN 5 MIRECC is hosting two conferences in 2013.

Homelessness is a top priority area for VA as described in the VA's Plan to End Veteran Homelessness. Veterans with serious mental illness (SMI) are at especially high risk for homelessness. We are planning a 1-day conference, scheduled for May 14, 2013 in Baltimore, titled "Homeless Veterans with Serious Mental Illness: From Street to Independence." The keynote speaker will be Amy Kilbourne, Ph.D., who will speak about "Population-based strategies to reduce the risk of homelessness and mortality among Veterans with SMI." Vince Kane, MSW, the Director of the VA National Center on Homelessness Among Veterans, will also be a presenter. Other topics that will be covered at the conference include outreach to Veterans with serious mental illness in the context of street medicine, creative ways to engage homeless Veterans in mental health care, and solutions to homelessness within the VA environment.

Another critical area for VA is issues regarding an aging Veteran population. The challenge in providing safe and effective services to older Veterans is compounded for Veterans with SMI, who often have challenges related to mental illness that change with age and require additional or more intensive attention over time. To address these issues, the VISN 5 MIRECC is planning a conference, scheduled for June 4, 2013 in Baltimore, titled "Issues of Aging in Veterans with Serious Mental Illness." The keynote speaker will be Peter Rabins, M.D., who will speak on "Preparing for the mental health of older Veterans in the next ten years." Bradley Karlin, Ph.D., the National Mental Health Director for Psychotherapy and Psychogeriatrics at VA Central Office will also be a presenter. Other speakers will address issues related to cognitive assessment in elderly Veterans with SMI, issues related to medication prescribing and use in older individuals with both physical and mental health disorders, and nursing perspectives on providing treatment to this group of Veterans.

Both conferences are aimed at providing practical information, grounded in both research and clinical practice, to assist VA staff in their efforts to promote mental health recovery among Veterans in the VISN 5 network. VA staff and Veterans are encouraged to attend! Please mark your calendars now! Registration information will follow in the next MIRECC Matters. For more information, contact Rebecca Wald, Ph.D., rwald@psych.umaryland.edu.

Homelessness and Issues of Aging are two critical issues for Veterans with serious mental illness. The VISN 5 MIRECC is planning conferences that address these areas.

Webpage Launch

VISN 5 MIRECC Educational Products

By Matt Wiley

The VISN 5 MIRECC is excited to announce the inception of an Educational Products page on its website! The site will provide MIRECC investigators and collaborators a platform through which they can pass on important scientific and educational information as it relates to our Mission Statement of "Putting Recovery into Practice."



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VISN 5 MIRECC - Educational Products

- [Educational Videos](#)
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The site contains slide presentations and videos on topics including: Involving the Family and Improving Care with Schizophrenia, Social Skills Training, HIV and Mental Health, and Safe Prescribing for Female Veterans with Mental Illness. We are adding videos on clozapine treatment for schizophrenia and tobacco use and treatment in individuals with serious mental illness. In addition, the site contains a list of presentations that MIRECC investigators are able to provide in their areas of expertise to clinical staff, professional organizations, or Veteran groups. Future efforts will be aimed towards adding to the list of existing videos and slide presentations but also enhancing the site by adding webinars and focused presentations on hot topics in serious mental illness within VHA.

The site can be accessed at:

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

Meet a MIRECC Investigator

AN INTERVIEW WITH Julie Kreyenbuhl, Pharm.D., Ph.D.

Julie Kreyenbuhl, Pharm.D., Ph.D. is a Research Investigator and Associate Director of the Research Core for the VISN 5 MIRECC, as well as an Associate Professor of Psychiatry in the Division of Services Research, Department of Psychiatry, University of Maryland School of Medicine. Dr. Kreyenbuhl completed her clinical pharmacy training (Pharm.D.) from Mercer University College of Pharmacy and Health Sciences in 1993 and received a Ph.D. in Pharmaceutical Health Services Research from the University of Maryland School of Pharmacy in 1999. She completed a post-doctoral fellowship at the Maryland Psychiatric Research Center in 2000 and joined the MIRECC shortly thereafter as a Research Investigator.

1) Tell us about your area of research.

My areas of expertise include mental health services research, pharmacoepidemiology of serious mental illness (SMI), shared decision-making around medication choice for SMI, and medication adherence. I have also conducted research on the prevalence and outcomes of co-occurring medical conditions such as Type 2 diabetes in individuals with SMI. In addition, I have contributed to the development of evidence-based treatment guidelines for schizophrenia.

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

I am currently developing and testing the effectiveness of patient-centered, computer technology-based interventions in the areas of medication adherence and self-management of medication side effects, in particular the metabolic side effects (e.g., weight gain, increases in blood sugar and cholesterol) of antipsychotic medications. For example, I received a Merit Award from the VA HSR&D Service to conduct a study of a computerized intervention that provides personalized health

information directly to Veterans with SMI on whether their care adheres to screening guidelines for metabolic side effects of antipsychotic medications. The goal of the study is to determine if a Veteran-centered intervention can increase rates of screening for metabolic side effects and can activate them to discuss metabolic screening with their clinicians. I also received funding from the National Institute of Mental Health to develop and pilot test a Smartphone application for enhancing adherence to antipsychotic medications among individuals with schizophrenia. The 'app' will remind individuals when it is time to take their antipsychotic medications and will also query them during the day about whether they are experiencing side effects and about the status of their symptoms. All of this information will be made available to their mental health providers for 'real-time' monitoring of adherence, side effects, and symptoms.

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

Research has shown that patients who take an active role in the self-management of and decision-making around their health conditions experience a number of positive outcomes, including greater knowledge of their health conditions and effective treatments, better treatment adherence and treatment engagement, better health outcomes, and greater satisfaction with care. My hope is that my program of research will lead to the development and widespread implementation of tools that Veterans with SMI can use jointly with their mental health providers to improve their physical and mental health status. I hope to enhance Veterans' access to and acceptability of these tools by delivering them via innovative and increasingly available computer and Smartphone technologies.

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

I can be reached in my office in the MIRECC suite in the VA Annex at 410-637-1864 or e-mail me at Julie.Kreyenbuhl@va.gov.

Recent MIRECC Publications and Presentations

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

Publications:

- Bellack, A., & Drapalski, A.** (2012). Issues and developments on the consumer recovery construct. *World Psychiatry, 11* (3), 156-160.
- Fischer, B.A.** (2012). Maltreatment of people with serious mental illness in the early 20th century: A focus on Nazi Germany and eugenics in America. *Journal of Nervous and Mental Disease, 200*(12), 1096-100.
- Fischer, B.A.** (2012). A review of American psychiatry through its diagnoses: the history and development of the diagnostic and statistical manual of mental disorders. *Journal of Nervous and Mental Disease, 200*(12), 1022.
- Goldberg, R.W.,** Dickerson, F., **Lucksted, A., Brown, C.H.,** Weber, E., Tenhula, W.N., **Kreyenbuhl, J., & Dixon, L.B.** (2013). Living Well: An intervention to improve self-management of medical illness for individuals with serious mental illness. *Psychiatric Services, 6*, 51-57.
- Himmelhoch, S.,** Weber, E., **Medoff, D.,** Charlotte, M., Clayton, S., Wilson, C., Ware, R., & Benford, J. (2012). Posttraumatic stress disorder and one-year outcome in methadone maintenance treatment. *American Journal of Addiction, 21*(6), 524-30.
- Park SG, **Bennett ME,** Couture SM, & Blanchard JJ. (2013). Internalized stigma in schizophrenia: Relations with dysfunctional attitudes, symptoms, and quality of life. *Psychiatric Research, 205*(1-2), 43-7.
- Strauss, G.P., Keller, W.R., **Buchanan, R.W.,** Gold, J.M., **Fischer, B.A.,** McMahon, R.P., Catalano, L.T., Culbreth, A.J., **Carpenter, W.T.,** & Kirkpatrick, B. (2012). Next-generation negative symptom assessment for clinical trials: Validation of the Brief Negative Symptom Scale. *Schizophrenia Research, 142*(1-3), 88-92.
- Strauss, G.P., Hong, L.E., Gold, J.M., **Buchanan, R.W.,** McMahon, R.P., Keller, W.R., **Fischer, B.A.,** Catalano, L.T., Culbreth, A.J., **Carpenter, W.T.,** Kirkpatrick, B. (2012). Factor structure of the Brief Negative Symptom Scale. *Schizophrenia Research, 142*(1-3), 96-8.
- Xiang, Y.T., Dickerson, F., **Kreyenbuhl, J.,** et al. (2012). Common use of antipsychotic polypharmacy in older Asian patients with schizophrenia (2001-2009). *Journal of Clinical Pharmacology, 32*(6), 809-13.
- Xiang, Y.T., **Kreyenbuhl, J.,** Dickerson, F.B., et al. (2012). Use of first- and second-generation antipsychotic medications in older patients with schizophrenia in Asia (2001-2009). *Australian and New Zealand Journal of Psychiatry, 46*(12), 1159-64.

Presentations:

- Teyslar, P, Stock, V., Wilk, C., Camsari, U., Ehrenreich, M, **Himmelhoch, S.** (2012, October) *Meta-analytic support for Antipsychotic Prophylaxis to Reduce Post-Operative Delirium Risk in the Elderly.* Poster presented at the Institute of Psychiatric Services Annual Meeting, New York, NY.
- Himmelhoch, S.,** Maxfield, J., Dhimes, S., **Medoff, D., Dixon, L.** & Mohr, D. (2012, October). *Telephone-Based CBT for HIV Related Depression: Results of a Randomized Controlled Trial.* Poster presented at the American Public Health Association Annual Meeting, San Francisco, CA.
- Himmelhoch, S.,** Riddle, J., & **Goldman, H.** (2012, October). *Evaluation of Resources, Barriers and Utilization of Evidenced Based Smoking Cessation Interventions in Community Mental Health Settings.* Oral presentation at the American Public Health Association Annual Meeting, San Francisco, CA.
- Drapalski, A.L., Lucksted, A.,** Perrin, P., Aakre, J., **Brown, C.,** DeForge, B., Boyd, J. (2012, November). *Modeling Internalized Stigma and Its Effects among People with Serious Mental Illness.* Poster presented at the 46th Annual Association for Behavioral and Cognitive Therapies Convention. National Harbor, MD.
- Buchanan, R.W.,** Weiner, E., Kelly, D.L., McMahon, R.P., Gold, J.M., Gorelick, D. (2012, December). *Rasaigiline in the Treatment of the Persistent Negative Symptoms of Schizophrenia.* Presented at the annual meeting of the American College of Neuropsychopharmacology [ACNP]. Hollywood, FL.
- Marciano R, Nagaraj V, Gillman S, Lennon C, Uyanwune I, **Fischer BA.** (2012, December). *Cannabis Anyone?* Presented at the annual meeting of the American Academy of Addiction Psychiatry [AAAP], Miami, FL.
- Fischer, B.A.,** McMahon, R.P., Kelly, D.L., Wehring, H.J., Meyer, W.A., Feldman, S., Carpenter, W.T., Gorelick, DA. (2012, December). *Risk-taking behavior in schizophrenia and controls with and without cannabis dependence.* Presented at the annual meeting of the American College of Neuropsychopharmacology [ACNP]. Hollywood, FL.

Comings and Goings

We have a number of people to say goodbye to in this issue of the MIRECC Matters. A fond farewell to one the VISN 5 MIRECC's greatest contributors, **Mary Lupi**, who retired this year after being with the MIRECC since its start in 1999. Mary was the Administrative Officer at the VISN 5 MIRECC since its founding over 12 years ago. In this role she was a major support, resource, counselor, and friend to every investigator, administrator, and staff member at our MIRECC. She played a critical role navigating MIRECC activities to ensure their compliance with VA rules and regulations, and made sure that our MIRECC worked efficiently and effectively to achieve its mission. Mary was always a warm and caring person who provided a needed kind word while simultaneously "encouraging" our timely completion of requirements for MIRECC projects, grants, and initiatives. We will miss her steady and sure presence to guide us! We at the MIRECC wish her all the best in this new chapter of her life!

**Thank you Mary for your many contributions to the VISN 5 MIRECC!
We will miss you!**

We also say goodbye to **Arthur Sandt, Ph.D.** Arthur worked for the MIRECC as a research assistant following completion of his internship training at VAM-HCS/UM Psychology Internship Consortium at the Baltimore VAMC. He administered assessments in research projects aimed at understanding mental health recovery among Veterans with SMI and worked on a study testing an intervention for self-stigma. Arthur recently completed his graduate training and earned his Ph.D. in clinical psychology. He left the MIRECC for a position as VA Psychologist in the Opiate Agonist Program within the Substance Abuse Service at the Baltimore VAMC. **Good luck Arthur!**

Comings and Goings

And...we have many new people to welcome to the MIRECC!

We are happy to welcome **Beth Klingaman, Ph.D.**, our postdoctoral fellow, to the MIRECC. Beth received her Ph.D. from the University of Maryland College Park and completed her predoctoral internship at the Denver VA Medical Center. Beth's research has examined barriers and facilitators to engagement in physical activity and the identity development processes of underserved populations that experience mental and physical health disparities.

Welcome also to **Ralf Schneider, M.A., CPRP** as our new Coordinator for the PSR Fellowship Hub Site and other initiatives and demonstration projects developed through the Clinical & Educational Cores. Ralf received his graduate education in Human Service Psychology at the University of Maryland, Baltimore County, and he comes to the MIRECC with a wealth of experience in administration, management, and delivery of services provided in community psychosocial rehabilitation programs to individuals with schizophrenia and other serious mental illnesses.

We are also fortunate to welcome our new Administrative Officer **Steve Day, MS, MHA**. Steve earned a Master's Degree in Health Administration from the University of Colorado. He comes to us from the Geriatric Research, Education, and Clinical Center, and he will be responsible for our MIRECC's administrative functioning, making sure our research, education, and clinical initiatives and efforts follow VA rules and regulations at the VAMHCS, VISN, and VACO levels.

Welcome to you all!



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 fall are listed below. Please contact Melanie Bennett (Melanie.Bennett@va.gov) for more information.

- February 12: Dr. Jason Schiffman, Identifying Risk Factors for the Development of Psychosis
 February 26, Dr. Daniel Almirall, Adaptive Treatment Strategies and Sequential Multiple Assignment Randomized Trial (SMART) Designs
 March 12: Jesse Katherine Vazzano, LICSW, Network Homeless Coordinator, VA Capitol Health Care Network (VISN 5)
 March 26, Dr. Sarah Nett, Review of Services Offered to Veterans with a History of Military Sexual Trauma at the VAMHCS

RECOVERY-ORIENTED SMALL GRANTS PROGRAM

Application Deadlines for 2012: 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 information or to receive an application, please contact:

Alicia Lucksted, Ph.D.
 MIRECC Recovery Coordinator
 Www.mirecc.va.gov/visn5

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

(continued from page 8)

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. In March 2012, the VISN 5 MIRECC in Baltimore and the VISN 22 MIRECC in Los Angeles hosted the 17th and 18th overall workshops for the VA-SST program.

To date, the program has trained nearly 500 VA mental health clinicians in the delivery of SST. We have also trained a total of 25 Master Trainers as experts in SST, covering 16 out of the 21 VISNs.

Upcoming workshops are scheduled for:

April 11-12, 2013 (Los Angeles); August 12-14, 2013 (Baltimore);
September 26-27, 2013 (Los Angeles)

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:

Alicia Lucksted, at 410-706-3244 or Alicia.Lucksted@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.





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