

# ANNUAL REPORT

TO THE MASSACHUSETTS DEPARTMENT OF MENTAL HEALTH  
2014 - 2015



The Systems and Psychosocial Advances Research Center  
UMass Department of Psychiatry  
A Massachusetts Department of Mental Health Research Center of Excellence



## **Table of Contents**

- **Executive Summary**
- **Appendix A: New SPARC Funded Research**
- **Appendix B: SPARC Dissemination Products**
- **Appendix C: New SPARC Publications**
- **Appendix D: New SPARC Faculty and Staff**

## Executive Summary

We are grateful to the Massachusetts Department of Mental Health (DMH) for its continued support of the University of Massachusetts Medical School's (UMMS) DMH Research Center of Excellence, the Systems and Psychosocial Advances Research Center (SPARC). We continue to leverage the DMH investment to support innovative, recovery-oriented, state-of-the-art psychosocial and systems research. Highlights of Fiscal Year 2015 include another increase in research dollars awarded through new grants and contracts, and the end of our three-year Strategic Plan to guide our growth and trajectory over the coming years.

### SPARC Overview

The Systems and Psychosocial Advances Research Center conducts research to enhance services, improve the quality of life, and promote recovery for people with behavioral health conditions. Our research informs and advises individuals with lived experience and their families, providers, administrators and policy-makers navigating the behavioral health landscape in the Commonwealth and beyond. SPARC was created in 1993 when it was designated a Center of Excellence for Psychosocial and Systems Research by the Massachusetts DMH. Our mission mirrors the DMH commitment to collaborating with other state agencies, consumers, families, advocates, providers, and communities. DMH and SPARC are aligned in their vision of promoting mental health through early intervention, treatment, education, policy, and regulation to provide opportunities for citizens of the Commonwealth to live full and productive lives.

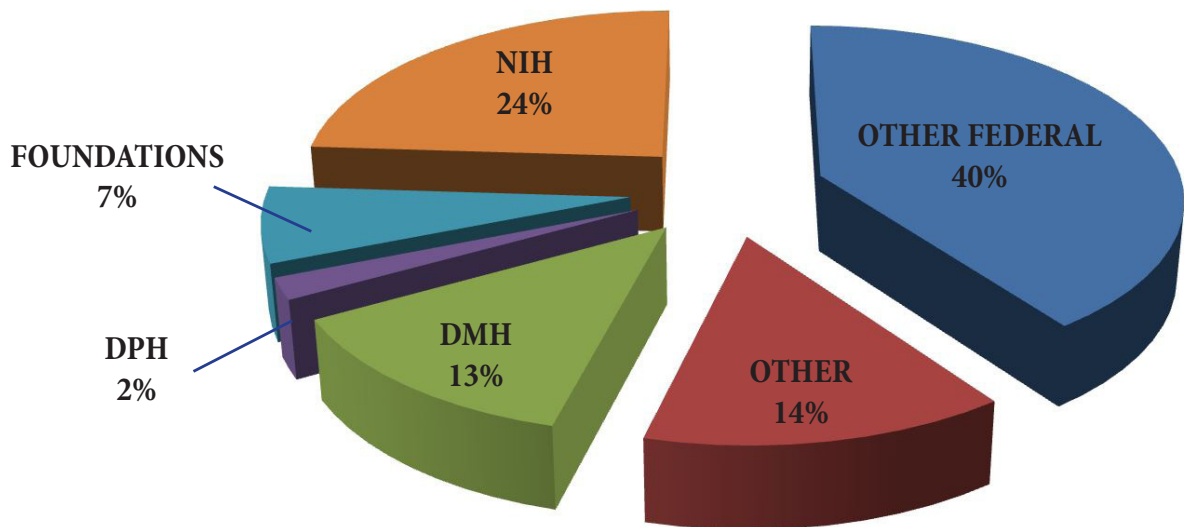
Our faculty are nationally/internationally recognized in services and supports research, child and family mental health issues, transitional age youth, multicultural issues, evaluation, clubhouses and vocational rehabilitation, wellness and mindfulness, forensic/legal and human rights issues, criminal justice, psychosocial therapies development and implementation, the Deaf community, and co-occurring disorders. We have developed linkages in areas of autism, homelessness, and addictions. We collaborate across UMMS Departments of Psychiatry, Family and Community Medicine, and Preventive and Behavioral Medicine, as well as with Commonwealth Medicine, other UMass campuses, and other national and international institutions to optimize our resources and relationships to build a bigger and stronger Center. We have collaborations with the Eunice Kennedy Shriver Center at UMMS that brings together three entities: the Child and Adolescent Neurodevelopment Initiative (CANDI), the Center for Autism and Neurodevelopmental Disorders (CANDO), and the former Eunice Kennedy Shriver Center for Developmental Disabilities.

### Research Portfolio

Fiscal Year 2015 was a healthy year for the SPARC. The SPARC continues to provide a positive return for the DMH investment:

- The SPARC received \$9,625,166 in new research funding
- The SPARC submitted 16 grant applications
- The SPARC was awarded 17 new research grants and contracts
- The SPARC published 63 research articles, briefs, and manuals

## SPARC Funding Sources FY 15



Every \$1 invested by DMH yielded a return of \$8 to the Commonwealth to fund research, training, technical assistance, and service delivery.

## SPARC Strategic Plan

On January 14th, 2015 SPARC held their annual Strategic Planning Retreat to kick off the 3rd and final year of work to realize our vision of helping people living with mental health challenges lead happy and productive lives. We were joined by our DMH colleagues Joan Mikula, Commissioner; Kathy Sanders, Medical Director and Deputy Commissioner Clinical and Professional Services; Jeffrey Geller, Medical Director, Worcester Recovery Center and Hospital; and Sue Sciaraffa, Central Massachusetts Area Director, who shared with us their thoughts regarding DMH priorities, ways that the SPARC can assist DMH, and areas of potential synergy and intersection with the SPARC.

### Accomplishments from the Strategic Plan include:

- Increasing the national and international recognition of the SPARC by solidifying the new visual identity and title of our center. We developed and refined policies about how and when to use the visual identities, and staff/faculty affiliations. We also launched the SPARC Webinar series (see pg. 7).
- Increasing long-term financial stability through diversifying our funding base through the work of the Grant Support Team with 14 grant submissions, of which 8 were funded in FY15. In addition, the Team worked extensively with DMH leadership on the SAMHSA “Now Is the Time” Healthy Transitions (HT): Improving Life Trajectories for Youth and Young Adults with, or at Risk for, Serious Mental Health Conditions grant. This 5 million dollar/5 year grant was awarded in July 2015 (see pg. 4). We also worked with the Department of Psychiatry and UMMS personnel to develop a SPARC business plan to identify and develop opportunities to expand our training, technical assistance, and evaluation capacities.



- Broadening and deepening collaborations with key stakeholders including DMH and other public agencies, within Psychiatry and with other departments at UMMS, Commonwealth Medicine (CWM), and other UMass campuses. SPARC began meeting with the CWM Marketing Analytics Group, which has generated “sell sheets” that offer a general overview of specific content areas, and can be used to highlight the expertise of SPARC faculty and staff across a variety of domains.
- Relocating to the Chang Building on the UMMS Maple Avenue Campus, and securing the resources and facilities to meet demands going forward to meet our goals. The SPARC space (approximately 8,300 sq. ft.) is handicapped accessible and facilitates teamwork and efficiency among SPARC faculty, staff, and collaborators.



### New Initiatives/Research Highlights

- The Learning and Working During the Transition to Adulthood Rehabilitation Research and Training Center (RTC) was awarded a second five-year grant from the National Institute on



Disability, Independent Living, and Rehabilitation Research (NIDILRR) and the Substance Abuse and Mental Health Services Administration (SAMHSA). The RTC will continue its research, knowledge translation, and technical assistance activities with an emphasis on the education and employment trajectories of 14-30 year olds living with serious mental health conditions. The RTC will also further explore two sub-populations that are particularly vulnerable to poor transitions to work and school; young parents, and those with justice system involvement.

- Marsha Ellison and Kate Biebel were awarded the Feasibility for Demonstration of Supported Education to Promote Educational Attainment and Employment among Individuals with Serious Mental Illness grant by the Office of Assistant Secretary for Planning and Evaluation. They collaborated with the Research Triangle Institute, Inc. on a feasibility study for a demonstration of Supported Education (SEd) to promote educational attainment and employment among individuals with severe mental illness. The project identified key considerations in planning and preparing for a larger-scale demonstration of SEd by compiling evidence on SEd programs, identifying gaps in the knowledge base about SEd, and describing possible approaches for addressing unanswered questions about SEd.
- Chuck Lidz is the PI on the Therapeutic Misconception (TM) and Scientific Reframing study, funded by the NIH National Center for Complementary and Alternative Medicine. Findings from this research will provide the basis for a transformation of the manner in which clinical researchers gain consent from participants, and substantially reduce one of the major barriers to genuine informed consent to research. This study is designed as a hypothetical randomized trial comparing an enhanced disclosure using scientific reframing designed to reduce TM versus disclosure as usual. The study design will test the ability of a scientific reframing disclosure to reduce TM and whether such disclosure reduces the inclination of potential subjects to volunteer for a clinical trial.




- The SPARC and the Transitions RTC are collaborating with Research Triangle International, Inc. in the “Now is the Time” Healthy Transitions: Improving Life Trajectories for Youth and Young Adults with, or at Risk for, Serious Mental Health Conditions multi-site evaluation. SPARC/RTC is heading up the process evaluation across NITT-HT sites, as well as infusing youth and young adult voice into all evaluation activities. The overall goal is to provide services and supports to address serious mental health conditions, co-occurring disorders, and risk for developing serious mental health conditions among youth 16 – 25 years old. NITT-HT sites will: increase awareness about early indications of signs and symptoms for serious mental health concerns; identify action strategies to use; provide training to provider and community groups to improve services and supports specific to this age group; enhance peer and family supports, and develop effective interventions for youth, young adults and their families as these young people transition to adult roles and responsibilities.
- Colleen McKay and the Program for Clubhouse Research collaborated with researchers from American University in Washington, DC to examine factors associated with program sustainability within the Clubhouse Model. Researchers conducted and analyzed interviews of key informants from U.S. clubhouses to create a conceptual framework for clubhouse sustainability. Clubhouses with longer program sustainability had higher clubhouse accreditation levels, clubhouse autonomy (freestanding programs), and multiple funding sources.
- Gina Vincent is leading the Adolescent Domestic Battery (ADB) Typologies Validation study to refine and cross-validate the pilot version of the Adolescent Domestic Battery Typologies Tool (ADBT) for categorizing youth charged with domestic-related offenses against a parent. The ADBTT provides a structured framework to help inform case processing, dispositional, and treatment decisions based on an assessment of risk for future ADB. The end result of this project will be an assessment manual that describes the development and validation of the ADBTT, explains how to administer and score the tool, and can be used to guide the implementation of the tool in a juvenile justice or other child and family service setting.
- Chuck Lidz is conducting a study funded by NIH/National Institute of General Medical Sciences. The Central IRBs: Enhanced Protections for Human Research Participants study uses innovative methods to describe how Central-IRBs (C-IRB's) review multi-site projects, and how these reviews differ from single site reviews and the reviews of multi-site projects by local IRBs. Study results are intended to help: (1) define the principles and practices involved in the conduct of C-IRBs, (2) understand whether different tools or procedures will help to maximize the effectiveness of C-IRBs and (3) describe any ethical and logistical issues that should be taken into account when IRBs act as C-IRBs. Chuck and his team will explore approaches for determining how central IRBs compare to local IRBs in the topics considered during the reviews of protocols requiring full board review.

## Integrated Care

Behavioral health has assumed unprecedented prominence in national and state healthcare reform efforts. SPARC considers behavioral health integration to be a top priority for our research and technical assistance to DMH and providers. SPARC and other Department of Psychiatry faculty members have vital expertise in a wide array of behavioral health topic areas. Carl Fulwiler serves on a cross-system committee for UMass Medical School and UMass Memorial Medical Center that is tasked with developing recommendations for significantly expanding integrated care in clinical services, professional training and research. In addition,

because of its priority, SPARC is actively recruiting for a mid-career faculty member with specific research expertise in this area. Highlights of relevant integrated care projects include:

- Carl Fulwiler's Keeping Weight Off: Brain Changes Associated with Healthy Behaviors NIH-funded study is going well and is half-way through recruitment. Thirty participants who have lost weight have been enrolled, with half randomized to mindfulness and half randomized to a control intervention. All participants had MRI's at baseline and will have another MRI at the completion of the interventions. Participants will be followed at 6 months and 1 year to determine if changes in connectivity between prefrontal and limbic regions predict psychological, behavioral and weight outcomes.
- 
- Nancy Byatt received a NIH/National Center for Advancing Translational Sciences K12 award for Rapid Access to Psychiatric Care in Perinatal Depression Programs (RAPPID), to develop and evaluate programs to improve delivery of depression care in obstetric settings. Using iterative feedback from key stakeholders, Nancy and her team developed RAPPID, a new stepped care approach. They convened a multidisciplinary work group consisting of perinatal and psychiatric health care professionals that developed provider specific RAPPID components including toolkits, screening procedures, implementation assistance, and access to immediate psychiatric consultation. They adapted the Addressing Problems Through Organizational Change (APTOC) implementation platform, developed by Doug Ziedonis, for use in Ob/Gyn settings resulting in a beta version of RAPPID that has been pilot tested. The pilot demonstrated that RAPPID has the potential to differentially improve treatment rates as compared to enhanced usual care (i.e., access to MCPAP for Moms).
  - Doug Ziedonis' Addressing Tobacco or Wellness Through Organizational Change (AWTOC) was successfully implemented in the UMMS Adult Inpatient Psychiatric Program, which resulted in staff offering mindfulness groups several times weekly, an increase in referrals to the Tobacco Consultation Service, and a metabolic monitoring and intervention form and protocol being developed. Staff reported discussing/promoting wellness more; providing wellness referrals and resources; and some changes in charting wellness.

## Consumer Voice Highlights

Consumer voice is critical to all the ongoing work at SPARC. In addition to working side-by-side with individuals with lived experience of mental health concerns, SPARC relies on the direction and guidance of two consumer advisory bodies - the SPARC consumer advisory council – Mental Health Experienced & Years of Understanding (MHE & YOU), and the Transitions Research and Training Center's Youth Voice. Within SPARC, individuals with lived experience are actively involved in all phases of research, from defining the problem and developing research questions to disseminating results. The voice of individuals with lived experience is infused into all SPARC research, training, and dissemination activities. Highlights include:

- The MHE & YOU Advisory Council, in collaboration with the Mental Health Area Research Network (MHARN) and the SPARC, successfully completed the 2015 May is Mental Health Awareness Month

campaign. Thirty-six video statements were produced, focusing on the theme of “Empowerment through Advocacy.” Videos featured individuals from the SPARC, the UMMS Department of Psychiatry, and local community mental health agencies and organizations. The 2015 video statements can be viewed at: <http://www.umassmed.edu/sparc/publications-and-products/multimedia/rehabilitation-recovery/advocacy-statements/>



- The MHE & YOU Advisory Council members attended and disseminated SPARC and MHE & YOU products at a variety of conferences including the WRCH 2nd Annual Women’s Mental Health Symposium, the 2014 NAMI Mass Annual Convention, the first US National Clubhouse Conference, the DMH Centers of Research Excellence Conference, and the PPAL 5th Annual State Conference.
- Tania Duperoy and Rachel Stone of the Transitions RTC attended a parent support group at Baycove Human Services and shared their personal recovery stories. The two answered parents’ questions and detailed RTC resources for assisting young adults with SMHC in the transition into work and school.
- Five RTC staff with lived mental health experience attended the annual DMH Young Adult Summit in May 2015, where they received certificates of appreciation for their work in the youth mental health movement. Amanda Costa of SPARC and the RTC co-presented a workshop at the summit on maintaining health and wellness while in recovery.
- Two RTC staff attended a family support meeting at the Parent Information Network in Middleboro in December 2014. RTC staff members shared their recovery stories with an audience of family members and young adults with lived experience. They also presented the work of the Transitions RTC, and shared tip sheets and resources from the RTC with audience members.
- In September 2014, the SPARC released a video featuring Jonathan Delman, the Associate Director of Participatory Action Research, Learning and Working Transitions RTC, speaking about Participatory Action Research (PAR). In the video he describes what PAR is and how it is important in developing relevant research. The video can be seen on SPARC’s YouTube Channel: <https://youtu.be/ocY1UwQbo9U>





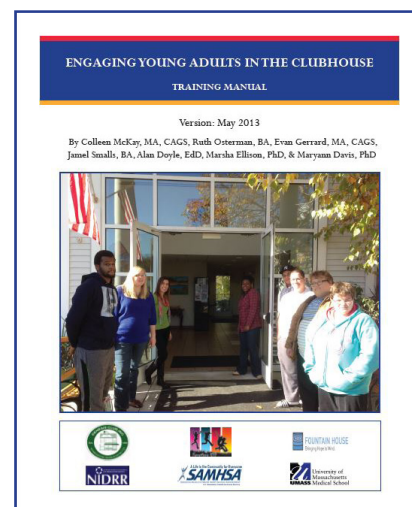
## Dissemination/Community Engagement Highlights

- SPARC faculty and staff educated and informed constituents regarding the dissemination work of our DMH Research Center of Excellence at numerous conferences/meetings in the Commonwealth including the 2014 NAMI Mass Annual Convention, WRCH 2nd Annual Women's Mental Health Symposium, 4th Annual Community Engagement and Research Symposium, DMH Centers of Research Excellence Conference, 2nd Annual Symposium and Gailanne Reeh Lecture, Integrating Care: From Evidence to Operations Conference, PPAL 5th Annual State Conference, 31st Annual Public Sector Psychiatry Conference, 28th Annual Research & Policy Conference on Child, Adolescent, and Young Adult Behavioral Health, PRA: The Recovery Workforce Summit: 2015 Annual Conference, Southeast DMH Conference: Supportive Conversations for Better Transitions: A Collaborative Approach for Transitional Age Youth and Families, Juvenile Justice & the Adolescent Brain Symposium, Department of Youth Services' Leadership Series and 17th Annual Massachusetts Adolescent Sex Offender Coalition/Massachusetts Association for the Treatment of Sexual Abusers Joint Conference.
- The SPARC created a new interactive webinar series. Our first webinar was on June 9th and featured Carl Fulwiler presenting on the topic of "Mindfulness Based Approaches to Eating and Weight Loss." The webinar was attended by 94 individuals, including providers, researchers, faculty and staff from throughout the Commonwealth. We have upcoming webinars scheduled featuring Doug Ziedonis, Gina Vincent, Jean Frazier, and Mary Olson. SPARC will provide up to 4 webinars a year, focusing on different topics to assist with workforce development and knowledge translation including supports for transition-aged youth, innovations in integrated care, risk assessment and mental health screening, wellness, and co-occurring disorders. Upcoming webinars are listed at <http://www.umassmed.edu/sparc/publications-and-products/sparc-webinar-series/>
- SPARC and Transitions RTC websites received 17,474 visits from over unique 11,128 visitors. Product downloads from our websites and our Psychiatry Information In-Brief e-journal totaled over 50,000. Our Facebook pages reached 657 "likes"; Twitter pages currently have 373 followers while our listserv reached 2,190 members.
- Colleen McKay and the Program for Clubhouse Research conducted a project on enhancing and manualizing a training and curriculum to engage young adults, which was developed by two clubhouse training bases. An iterative process was used to obtain feedback from training participants to pilot the training curriculum, develop a new training manual, and examine the impact of the training. Twenty-two individuals from eleven clubhouses from four states and four countries participated in the training. Key need areas highlighted by trainees included developing linkages with schools/colleges, having young adults available to help with the orientation of prospective members, and, helping young adults achieve their goals. Ninety percent of survey respondents say their



clubhouse modified its services following the training to better engage young adults.

- Wyatte Hall, Melissa Anderson, Marlene Elliott, and Douglas Ziedonis produced a video, “Engaging the Deaf Community in Behavioral Health Research: Insider, Outsider, and Ally Perspectives.” The video presents the perspectives of four professionals who conduct behavioral health research within the Deaf community - one Deaf community member, two hearing allies who work within the community, and one hearing mentor who works in the general population. The video explores the marginalization of Deaf people within a medical disability framework; historical and current oppression within behavioral health systems; and, cultural insensitivity among clinicians and clinical researchers. The video can be viewed here: <http://www.umassmed.edu/sparc/publications-and-products/multimedia/multicultural-mental-health/>



- The MHE & YOU Advisory Council and the Mental Health Area Research Network (MHARN) partnered with the Harvard Commonwealth Research Center to develop and implement the 2015 DMH Centers of Excellence Conference – “Innovative Approaches to Prevention: Enhancing Mental Health.” There were approximately 100 attendees at the April 10, 2015 conference. Attendees included persons with lived experience, family members, psychologists, clinicians, researchers, and doctors. Gina Vincent and Maryann Davis presented while Carl Fulwiler and David Smelson led workshops.
- Jonathan Delman served on the Institute of Medicine (IOM) committee that released new report - Developing Evidence-Based Standards for Psychosocial Interventions for Mental Disorders.
- Maryann Davis served on the IOM committee on Improving the Health, Safety, and Well-Being of Young Adults Board on Children, Youth, and Families, which produced the report Investing in the Health and Well-Being of Young Adults.

Additional dissemination products include: RTC Tip Sheets and Issue Briefs (<http://www.umassmed.edu/transitionsRTC/publication>), webinars (<http://www.umassmed.edu/sparc/publications-and-products/sparc-webinar-series/>), and a new YouTube Series (<https://www.youtube.com/user/UMassSparc>)

### **Dissemination of Materials at Massachusetts Conferences**

- Total number of products disseminated at MA Conferences: 2,213
- Total number of MA conferences SPARC staff attended to distribute materials: 9
- Number of conference attendees where SPARC materials were distributed: 2,405

### **Presentations at Massachusetts Conferences**

- Presentations and trainings given by SPARC faculty and staff in MA: 73
- Number of MA conferences where SPARC faculty & staff gave presentations: 60
- Number of state and provider workforce members and consumers and family members with whom research information was shared: 4,636

## Webinars Given by SPARC Faculty and Staff

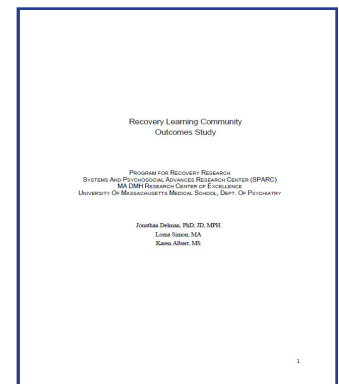
- Number of webinars: 4
- Number of webinar attendees: 301

## Collaborations with DMH and Other State Agencies Highlights

- Kate Biebel continues to work with Deborah Sapar, a WRCH Senior Clinician and Treatment Planning Facilitator, to infuse a parenting and family-focus into the WRCH. Most recently, she advised on revising a Parenting Strengths and Needs Assessment tool, developed by Joanne Nicholson of SPARC, to target the WRCH inpatient population of patients who are parents.
- Kimberly Larson and colleagues are working with Debra Pinals and Ivy Sohn on a National Survey of Juvenile Competence to Stand Trial Evaluation Procedures and Services. This is a 50 state survey of the state mental health service directors through their national organization.
- ServiceNet was awarded the contract to establish PREP West. SPARC will be the academic partner to provide consultation, training and research support. Mary Olson and Doug Ziedonis will be providing consultation and training on the Open Dialogue model, and Maryann Davis and the Transitions RTC will provide technical assistance on supported employment. Moving forward, SPARC faculty will explore other collaborative research opportunities with PREP West.
- DMH held its 4th Annual Peer Leadership Recognition Event in May, 2015 to recognize young adult peer workers for their work in the mental health field. At the summit, young adults attended workshops dedicated to supporting the employment, education and wellness goals of youth in recovery. Amanda Costa ran a workshop on Whole Health Action Management. During the afternoon portion of the summit, young adults received certificates for their accomplishments in the field of youth mental health. Amanda Costa, Tania Duperoy, Jennifer Whitney, Gillian Simons, Rachel Stone, and Laura Golden from the Transitions RTC were among over 100 young adults honored.
- Gillian Simons is on the DMH Northeast Area Site Board, which is comprised of two consumers, one family member, and DMH staff, including Susan Wing, Area Director. The board makes financial, housing, hospital bed, and community decisions within the DMH system.
- In collaboration with the Office of Children, Youth and Families in the MA Executive Office Health and Human Services (EOHHS), researchers and staff at the UMMS's Center for Health Policy and Research (CHPR), and Deirdre Logan and Kate Biebel from the SPARC developed a series of chart books of key indicators of child and youth development in Massachusetts. These books provide access to key data indicators related to child and youth development regarding population, health and disabilities, school and work, enrollment in public services and benefits, and arrests, probation, and the Department of Youth Services involvement. These domains are part of EOHHS Shared Vision Framework for Massachusetts Youth and Young Adults, and represent areas of focus for the newly-launched 18 Family Resource Centers (FRCs) in communities across the state (jointly funded by EOHHS and the Department of Children and Families).
- Transitions RTC staff members actively participated on several DMH committees including the Department of Mental Health/Massachusetts Rehabilitation Commission's Memorandum of

Understanding (MOU) Committee, the DMH Statewide Youth Advisory Council (SYAC), and the DMH Children's Behavioral Health Initiative Committee.

- Jonathan Delman and Doug Ziedonis joined leaders and advocates in public health, behavioral health, and tobacco control in June, 2015 for the first-ever initiative focused on reducing smoking prevalence among people with behavioral health disorders in Massachusetts. The Massachusetts State Leadership Academy for Tobacco-free Recovery Summit was held by DMH and DPH, in partnership with SAMHSA and the Smoking Cessation Leadership Center. The purpose of the summit was to design an action plan for Massachusetts to reduce smoking and nicotine addiction among individuals with mental illness and addictions, and to create an environment of collaboration and integration among the fields of public health, mental health, and substance abuse services.
- In December 2014, Maryann Davis, Marsha Ellison, and the Transitions RTC staff met with Michael Stepansky, Director of Employment at DMH, to discuss the Transitions RTC's State of the Science Proceedings on employment, employment initiatives, research studies, and knowledge translation activities. Due to these discussions, the Transitions RTC is providing assistance to DMH and the Massachusetts Rehabilitation Commission to develop an effective collaboration between the two agencies, while incorporating a strong consumer voice. Amanda Costa attends their monthly meetings, and Jon Delman will assist in research and evaluation.
- Jonathan Delman, Lorna Simon, and Karen Albert examined personal recovery outcomes of participants at the six MA DMH Recovery Learning Communities (RLCs). Frequency and type of RLC use had a statistically significant association with higher rates of meaningful improvement in overall recovery. Respondents who participated in RLC activities at least twice a week reported meaningful improvement scores at a rate of 80%, while those who participated once a week or less reported overall meaningful improvement at a rate of 54%; chi-square testing showed that difference was statistically significant ( $p < 0.0001$ ). The report is available at: <http://www.umassmed.edu/PageFiles/40770/Recovery%20Learning%20Community%20Outcomes%20Study%2012.2.pdf>
- The Massachusetts Child Psychiatry Access Project (MCPAP) for Moms program completed its first year. The MCPAP for Mom's team has developed toolkits, which have been distributed to Ob/Gyn providers across Massachusetts. At the end of Fiscal Year 2015, MCPAP for Moms had enrolled 55 practices, which is about 26% of Ob/Gyn practices in Massachusetts. In addition, they have completed many Grand Rounds and trainings throughout the Commonwealth.
- Kate Biebel, Toni Wolf (Employment Options), and Joanne Nicholson met with Joan Mikula and Sandy Wixted in March 2015 to discuss strategies for infusing the importance of the parenting role into ongoing DMH work.
- Rosalie Torres Stone, Esteban Cardemil (Clark University), and Carl Fulwiler continued their work on the Worcester Mental Health Needs Assessment Study focusing on refugee and immigrant populations. They worked in collaboration with the Worcester Division of Public Health and UMMS to conduct this





assessment. They developed a survey, conducted multiple focus groups and held stakeholder meetings. Data collection was completed and the report for the Worcester Division for Public Health was finalized in June 2015.

- Ann Capoccia of DMH requested technical assistance from Maryann Davis and the Transitions RTC regarding the role of peer mentor supervisors on the STAY system of care grant. As an initial step to understanding what was working or not working in the supervision of Peer Mentors, DMH contracted with the Transitions RTC to conduct qualitative interviews with these supervisors. Interviews were completed in October 2014 and the Peer Mentor (PM) Supervisor Report was delivered to DMH in November 2014. The report summarized the analysis of 8 peer mentor supervisor interviews from 7 Massachusetts Community Service Agencies (CSAs) and provided recommendations. Maryann Davis, Kathryn Sabella, and Lisa M. Smith met with Ann Capoccia and DMH Staff in December 2014 to discuss the results.
- The Center of Excellence (COE) for Specialty Courts was awarded to the UMMS Law & Psychiatry program by the MA Trial Court in December 2014. The COE provides technical assistance, research, and training to the MA Trial Court related to best practices for drug courts, mental health courts, and veterans courts. The COE also will be evaluating drug courts in the state and leveraging funds to generate grants for various activities related to specialty courts. The COE is directed by Ira Packer and has multiple cores led by other faculty: Gina Vincent (Evaluation Core), Al Grudzinskas (Legal Core), David Smelson (Research Core), and Lauren Miller (Training Core). Commonwealth Medicine is also a partner of the COE and is designing the Trial Court's website on specialty courts and overseeing marketing activities.

## Honors and Awards

Melissa Anderson was awarded the 2014 National Institute on Drug Abuse and National Institute on Alcohol Abuse and Alcoholism Travel Award in August 2014. It provides funding to attend the American Psychological Association Annual Convention. Melissa presented the following poster: "PTSD/SUD in Individuals with Physical Disabilities: Identifying Problems and Promising Interventions."

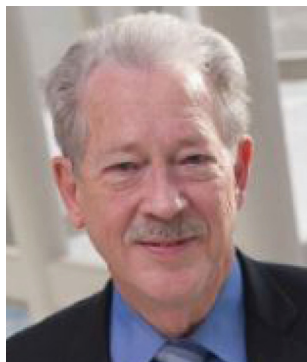


Amanda Costa and Samantha Sandland accepted the Leadership Award from Work Without limits on November 20, 2014 on behalf of the Massachusetts Statewide Young Adult Council (SYAC) for leading by example, changing minds, addressing stigma, and promoting employment for young adults. The Leadership Award is presented to an organization that goes above and beyond to advance the employment of people with disabilities in Massachusetts. The Massachusetts DMH created SYAC in 2006 for young adults with mental health needs between the ages of 16 and 25 years old to voice their concerns and ideas for mental health services and supports during a young person's transition into adulthood.



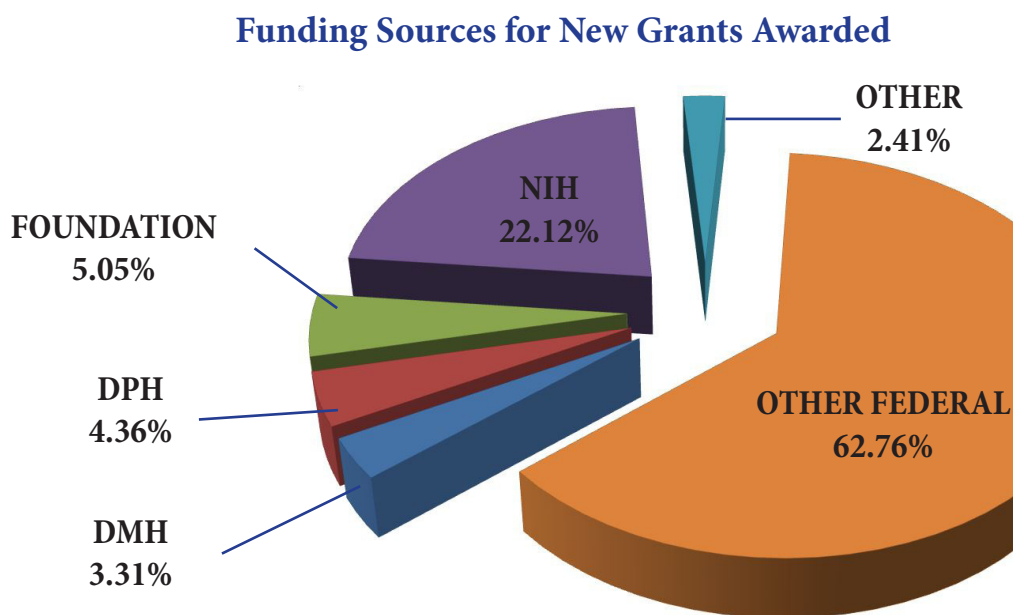


Maryann Davis was awarded the Armin Loeb Award from PRA as an individual who has conducted the best-designed and most useful research in the field of psychiatric rehabilitation in the preceding year or years. The Armin Loeb Award is presented in memory of Dr. Armin Loeb who served as Director of Research of Horizon House in Philadelphia for approximately 20 years. He was the first full time research director of any psychiatric rehabilitation agency and conducted research and evaluation studies, which have served as models in the field.



Thomas Grisso received the 2014 American Psychological Association Award for Distinguished Professional Contributions to Applied Research at the 2014 Annual Convention of APA in August. The citation focused on his research on juvenile justice issues: “Thomas Grisso has made seminal contributions to the field of forensic psychology and psychiatry through is internationally renowned program of research, which has directly impacted juvenile justice reform worldwide. His research contributions to juvenile forensic assessment and to the study of the interface between youth development and the law are unparalleled. Dr. Grisso’s work exemplifies how to diffuse and translate knowledge from psychological science and assessment into forensic assessment practices and national policies in the United States. His research has raised the global standards for juvenile legal rights and screening for mental health procedures.”

Fiscal Year 2015 is off to a great start. We have a number of new grants funded and are continuing to explore innovative opportunities to help us diversify our funding portfolio. We entered the final year of our Strategic Plan, with a clear focus on priorities and action items that support the shared DMH and SPARC goal of providing the best, state-of-the-art recovery-oriented, patient-centered care to all citizens of the Commonwealth. We look forward to another productive year of partnering with DMH.



## Fulfillment of the DMH Contract

### Research Activity

These numbers represent both ongoing and new SPARC research during Fiscal Year 2015.

Performance Measure	Accomplished in Fiscal Year 2013	Accomplished in Fiscal Year 2014	Accomplished in Fiscal Year 2015
Number of research projects approved by DMH <sup>1</sup>	37	38	46
Number of research proposals submitted & approved by an IRB <sup>2</sup>	7	11	12
Number of grants submitted <sup>3</sup>	22	20	28
Number of grants approved for funding <sup>4</sup>	16	17	16

<sup>1</sup>The number of ongoing SPARC research projects during the fiscal year.

<sup>2</sup>The total number of projects that received initial IRB approval during the fiscal year.

<sup>3</sup>The total number of grant applications that SPARC submitted during the fiscal year, regardless of their approval status. Some submitted grants may have received funding during the fiscal year, some may receive funding next fiscal year, and some may receive no funding.

<sup>4</sup>The total number of new grants that either received money during the fiscal year or are approved for funding in the upcoming fiscal year.

### Summary of New Grant funding

The ongoing financial support provided by DMH confers SPARC the ability to leverage monies from a variety of other sources in support of research and training. The figure reported below includes the portion of each grant/contract awarded in the 2015 Fiscal Year, not the total funds for life of the grant. The total is inclusive of both direct funds (monies which go directly to the project) and indirect funds (monies that support overhead on the project, the operation of SPARC, the UMass Department of Psychiatry, and the University of Massachusetts Medical School).

Performance Measure	Accomplished in Fiscal Year 2013	Accomplished in Fiscal Year 2014	Accomplished in Fiscal Year 2015
External Funding Obtained	\$5,888,491	\$4,558,847	\$6,825,040

## Summary of Publications

SPARC faculty and staff publish in a variety of different venues. Although the majority of publications appear in peer-reviewed journals, SPARC faculty and staff also publish books, book chapters, monographs, conference papers, and reviews of academic manuscripts.

Performance Measure	Accomplished in Fiscal Year 2013	Accomplished in Fiscal Year 2014	Accomplished in Fiscal Year 2015
Number of papers submitted and accepted for peer review publication	80	64	76

## Summary of Other Dissemination Efforts

SPARC continued to conduct trainings and give presentations at a wide variety of venues throughout Fiscal Year 2015. The following numbers represent the efforts of SPARC to distribute and disseminate information to DMH state and provider clinical workforce as well as consumers and family members.

Performance Measure	Accomplished in Fiscal Year 2013	Accomplished in Fiscal Year 2014	Accomplished in Fiscal Year 2015
Number and types of forums used by SPARC to share information with DMH State and provider clinical workforce, consumers and family members	51	36	107
Number of state and provider workforce members and consumers and family members with whom research information was shared <sup>5</sup>	4,240	4,893	4,636

<sup>5</sup>This represents the number of individuals attending SPARC faculty and staff presentations at conferences and trainings in Massachusetts during FY15. This does not include Massachusetts individuals accessing research information through other SPARC mechanisms (i.e., website, listservs, and social media).

## Appendix A

### New SPARC Funded Research

#### **Assessing Threats to the Developmental Model of Juvenile Justice**

**PI:** Thomas Grisso, Ph.D.

**Funding:** John D. & Catherine T. MacArthur Foundation

**Budget:** \$436,222

**Time Frame:** 7/1/2014 - 6/30/2016

**Description:** The purpose of this project is to maximize the gains of the Fourth Wave in juvenile justice reform, allowing it to continue to influence nationwide policy and practice in juvenile justice for an extended future. We believe that this approach to juvenile justice should be sustained because it employs sound developmental science and humanitarian values to inform policy and practice that best meet the needs of young people and society. The aims of the project are to promote the above purpose by identifying potential threats to the approaches, policies and practices represented in the Fourth Wave of juvenile justice reform, and to develop strategies for strategies for threat mitigation. As noted in the statement of the problem, general social change over time can be expected to challenge the policies and practices of any social reform. What is needed is a consideration of the foreseeable circumstances that could challenge and erode the principles and products of the current reform. This consideration should identify not only those threats, but also strategies to extend its use and to assure that it continues to be part of the fabric of the juvenile justice system. The beneficence of the First Wave and due process of the Second Wave are still with us, although the models themselves no longer dominate. If the Fourth Wave exists long enough to permeate the system, future versions of the juvenile justice system will continue to manifest its developmental perspective.

#### **Central IRBs: Enhanced Protections for Human Research Participants**

**PI:** Charles Lidz, Ph.D.

**Co-PI's:** Kimberly Larson, J.D., Ph.D., Ekaterina Pivovarov Ph.D.

**Funding:** National Institutes of Health

**Budget:** \$ 1,668,607

**Time Frame:** 10/1/2014 - 9/30/2017

**Description:** Although Institutional review boards (IRB) were originally intended to reflect local values and knowledge, they have been widely criticized as inappropriate for large multi-site studies. One proposed solution is increased use of central IRBs (C-IRBs), which would manage human subject protection for all of the sites. This study uses innovative methods and builds on prior research on IRBs by the investigators to describe how C-IRBs review multi-site projects, and how these reviews differ from single site reviews and the reviews of multi-site projects by local IRBs. The results of this study are intended to help (1) define the principles and practices involved in the conduct of CIRBs, (2) understand whether different tools or procedures will help to maximize the effectiveness of CIRBs and (3) describe any ethical and logistical issues that should be taken into account when IRBs act as C-IRBs. This proposal combines methods used in two different studies of local IRBs to describe central IRBs decision-making processes. These methods will include audio-recording of an estimated 249 reviews at 22 different IRB panels associated with 10 different central IRBs and semi-structured interviews with administrators, IRB chairs, reviewers, and staff members. We have developed systematic procedures for coding and processing this type of data so that we can do systematic qualitative and sophisticated quantitative analyses of the data. It allows us to describe the organization and decision making of central IRBs. In addition, we are exploring approaches for determining how central IRBs compare to local IRBs in the topics considered during

the reviews of protocols requiring full board review. Our research on local IRBs has made us uniquely qualified and ready to study this innovation IRB review.

### **Centralized Referral System/Link-Kid**

**PI:** Jessica Luddy, Ph.D.  
**Funding:** Lookout Foundation, Inc.  
**Budget:** \$49,985  
**Time Frame:** 1/1/2015 - 12/31/2015  
**Description:** Historically, across our state, despite multiple wide-scale dissemination efforts to train up the workforce in evidence-based trauma-focused treatment, children who have experienced trauma have had to sit on waiting lists until services were available, with average waiting times as long as 4 to 6 months for treatment. Given these challenges, the Child Trauma Training Center (CTTC) has created a neutral Centralized Referral System (CRS/LINK-KID©) that is not linked to any single provider agency, but includes a network of mental health agencies and providers who have been trained in evidence-based trauma treatments (Trauma-Focused Cognitive-Behavioral Therapy, TF-CBT; Child Parent Psychotherapy, CPP; and the Attachment, Self-Regulation, and Competency, ARC model). The CRS/LINK-KID includes a network of mental health agencies and practitioners who have been trained in evidence-based trauma-focused treatments, with a large database and toll-free number (1-855-LINK-KID), housed and maintained within the University.

### **Feasibility Study for Demonstration of Supported Education to Promote Educational Attainment and Employment among Individuals with Severe Mental Illness**

**PI:** Marsha Ellison, Ph.D., M.S.W.  
**Co-PI:** Kathleen Biebel, Ph.D.  
**Funding:** Research Triangle International, Inc.  
**Budget:** \$102,965  
**Time Frame:** 9/1/2014 - 8/31/2015  
**Description:** This study is designed to characterize the current state of knowledge about SEd as a way to assess the feasibility of conducting a demonstration of SEd for individuals with serious mental illness. This project sought to identify key considerations in planning and preparing for a larger-scale demonstration of SEd by compiling evidence on SEd programs, identifying gaps in the knowledge base about SEd, and describing possible approaches for addressing unanswered questions about SEd. The project focuses on answering a series of research questions about SEd program composition, implementation, service context, the experiences of individuals involved in SEd programs, available SEd data sources and ongoing evaluations, SEd policies, financing, and gaps in the SEd knowledge base. Three key tasks are associated with this project: (1) a literature review; (2) an environmental scan of SEd researchers, program managers, and other key informants; and (3) site visits to three programs implementing SEd service delivery models. The final project report will include chapters describing the results from each task, as well as a final synthesis chapter that identifies future SEd needs and opportunities.

### **MISSION Implementation (Maintaining Independence and Sobriety through Systems Integration)**

**PI:** David A. Smelson, Ph.D.  
**Funding:** Massachusetts Department of Mental Health  
**Budget:** \$351,981  
**Time Frame:** 7/1/2014 - 6/30/2015  
**Description:** MISSION Implementation, a Massachusetts Department of Mental Health program, seeks to improve the coordination of care and reduce justice involvement among the nearly one in five combat veterans



returning from Iraq /Afghanistan with trauma related symptoms and addictions. Veterans are diverted from jail and selected by judges in Worcester County and Franklin, Hampshire, and Hampden Counties to receive treatment rather than serve jail time. The program employs an assertive community treatment approach that includes mental health and substance abuse treatment, peer support, vocational/educational support, and trauma informed care.

MISSION Implementation builds on a longstanding partnership between Massachusetts DMH (lead agency for oversight and dissemination), Community HealthLink, and Soldier ON (community providers), and the UMMS Department of Psychiatry (Dr. David Smelson, evaluator). Dr. Smelson and his team at UMMS assist the community-based providers on this project, Community Healthlink and Soldier On, in evaluating their ability to provide services that adequately meet the mental health, substance abuse and criminogenic needs of these clients.

### **MISSION FORWARD (Maintaining Independence and Sobriety through Systems Integration)**

**PI:** David A. Smelson, Ph.D.  
**Funding:** Massachusetts Department of Public Health  
**Budget:** \$419,264  
**Time Frame:** 7/1/2014 - 6/30/2016  
**Description:** The goal of the project was to reduce relapse and recidivism by assertively facilitating care between the courts and community providers to address the unmet treatment needs which often prevents compliance with court treatment plans. The project used the MISSION Criminal Justice Treatment Manual and Consumer Workbook to facilitate service delivery, which systematically incorporates the Risk-Need-Responsivity (RNR) framework to identify criminogenic risk factors and guide treatment planning alongside the sanctioning power of the court. Maintaining Independence and Sobriety Through Systems Integration, Outreach, and Networking-For Offenders Recovering with Awareness, Resources, and Dignity (MISSION-FORWARD), will serve a total of 180 clients over the three-year project period: 120 in the Quincy Adult Drug Court and 60 in the Dedham Veterans Treatment Court all of whom will receive MISSION services for up to one year. In addition to delivering direct services using the MISSION model, the Gavin Foundation referred clients to other recovery and treatment programs in the community to meet the assessed needs of the population to be served. This project received input during the planning phase from district judges, state agencies, community treatment providers, and is consistent with the goals of the Massachusetts Interagency Council on Substance Abuse and Prevention. This project was innovative in that it focused on two types of specialty courts and will embed peer and case manager teams who will use an evidence-based wraparound model previously developed with SAMHSA funding to specifically improve coordination between the courts, clients, and community-based treatment providers.

### **MST for Emerging Adults (MST-EA) in Washington, DC**

**PI:** Maryann Davis, Ph.D.  
**Funding:** Evidence -Based Associates  
**Budget:** \$10,201  
**Time Frame:** 10/1/2014 - 1/15/2015  
**Description:** Maryann conducted program evaluation activities on the MST-EA team, including assisting in: analyzing data, discussing relevant and available comparative datasets, designing the design of program evaluation data collection, and preparing reports.

### **Now is the Time (NITT) Evaluation**

**PI:** Maryann Davis, Ph.D.  
**Co-PI's:** Kathleen Biebel, Ph.D. Mason Haber, Ph.D., Colleen McKay, M.A., C.A.G.S.  
**Funding:** Substance Abuse and Mental Health Services Administration  
**Budget:** \$1,540,741  
**Time Frame:** 10/1/2014 - 9/30/2019  
**Description:** In support of the President's "Now is the Time" (NITT) Plan, the Substance Abuse and Mental Health Services Administration announced a new grant program, "Now is the Time" Healthy Transitions: Improving Life Trajectories for Youth and Young Adults with, or at Risk for, Serious Mental Health Conditions. The overall goal of HT will be to provide services and supports to address serious mental health conditions, co-occurring disorders, and risk for developing serious mental health conditions among youth 16 – 25 years old. This will be accomplished by increasing awareness, screening and detection, outreach and engagement, referrals to treatment, coordination of care and evidence-informed treatment for this age group. Healthy Transitions will: increase awareness about early indications of signs and symptoms for serious mental health concerns; identify action strategies to use when a serious mental health concern is detected; provide training to provider and community groups to improve services and supports specific to this age group; enhance peer and family supports, and develop effective services and interventions for youth, young adults and their families as these young people transition to adult roles and responsibilities. When needed, these services are to be continuous so that young people and their families experience a seamless transition across age groups. The NITT Evaluation makes use of available information and data to inform grantees and their stakeholders throughout the grant. Evaluators will support grantees and their partners in providing data for the evaluation, which will include process and outcome evaluation components.

### **Risk Assessment in Juvenile Probation: Contributions of Mental Health and Substance Abuse**

**PI:** Gina Vincent, Ph.D.  
**Funding:** U.S. Department of Justice  
**Budget:** \$125,000  
**Time Frame:** 8/1/2014 - 9/30/2015  
**Description:** A two-year quasi-experimental research study of the impact of implementing risk assessment and risk-needs responsivity in juvenile probation offices in two states. Research indicates that the old adage of "doing the time for the crime" does not have an appreciable impact on re-offending. This is particularly the case for young offenders; a group for which deeper penetration into the juvenile justice system can in fact make them worse. Justice agencies will have more success if they base their intervention decisions on some essential characteristics of the offender; namely, the level of risk for re-offending and specific criminogenic needs (risk factors that can change over time). This approach is known as Risk-Needs-Responsivity (RNR). The first step in implementing RNR principles is having a method for valid identification of risk levels and criminogenic risk factors and understanding where mental health fits in. Risk assessment, if implemented properly, can guide dispositions and case management decisions in a manner that conserves resources, while increasing effectiveness and preserving public safety.

### **Self Perceptions of Risk for Patients with Co-Occurring Disorders**

**PI:** Charles Lidz, Ph.D.  
**Funding:** University of California  
**Budget:** \$17,241  
**Time Frame:** 4/1/2015 - 12/31/2015  
**Description:** This study seeks to assess the ability of patients to predict their own future involvement in violent incidents. Dr.

Lidz will assist with the basic study design and materials for the project. He will participate in the training of interviewers by traveling to the study site to lend his expertise in interviewing and data collection to that of the PI. He will participate in weekly staff project meetings via telephone, will provide constructive feedback to interviewers to maintain and enhance their skills, and assist with data analysis, interpretation, and dissemination. He will visit the site in the 1st year to assist with staff training and the final year to participate in the analysis.

#### **Technical Assistance in Specifying the MD Transition-Age Youth Program Model**

**PI:** Maryann Davis, Ph.D.  
**Co-PI:** Mason Haber, Ph.D.  
**Funding:** University of Maryland  
**Budget:** \$59,118  
**Time Frame:** 8/1/2014 - 9/30/2015  
**Description:** The project is designed to assist the Maryland Behavioral Health Administration in efforts to specify its statewide model for serving transition-age youth and young adults with serious mental health conditions as developed through its federally funded Healthy Transition Initiative (HTI) and locally funded programs for the population. The Maryland Model includes an array of core services delivered to all youth and young adults, including person-centered planning, intensive case management, and skills training activities, as well as ancillary evidence-based psychiatric rehabilitation interventions delivered to address needs of individual youth where indicated, including interventions to assist with employment, education, and independent living in the community as well as treatment for specific psychiatric and co-occurring disorders. Activities include a synthesis of the current literature and expert panel reviews of best practices for the population, site visits to collect data on current HTI-funded sites, and development of a manual and fidelity instrument to help Maryland better describe and assess implementation of its model.

#### **The Learning and Working During the Transition to Adulthood Rehabilitation Research**

**PI:** Maryann Davis, Ph.D.  
**Co-PI's:** Kathleen Biebel, Ph.D., Jonathan Delman, Ph.D., Marsha Ellison, Ph.D., M.S.W., Charles Lidz, Ph.D.  
**Funding:** U.S. Department of Education  
**Budget:** \$4,374,967  
**Time Frame:** 10/1/2014 - 9/29/2019  
**Description:** The Learning and Working During the Transition to Adulthood Research and Training Center (Transitions RTC) will expand our national leadership on the transition to employment for youth and young adults with serious mental health conditions (SMHC) to researchers, policymakers, practitioners, and young people with lived experience of SMHC and their families. The Transition RTC will develop and translate knowledge from state of the art rigorous research on education and work in 14-30 year olds with SMHC. The research will be conducted in real world settings in partnership with youth and young adults with lived experience and informed by family input. While significant progress has occurred in both research and services for this population in the past five years, much remains to be done. There are no established evidence-based interventions to support the post-secondary schooling or early working years in this population. Three major areas of research are currently needed to move the field significantly forward. First, research is needed to identify the range of paths in the transition to employment, and the malleable factors that contribute to variability in educational and working success in this population. Second, research is needed to continue the development and testing of interventions that have preliminary evidence of efficacy. Third, research is needed that helps us understand ways in which state vocational rehabilitation, child mental health, and adult mental health agencies can better work together to enhance the transition to employment in this population.

### **Therapeutic Misconception and Scientific Reframing**

**PI:** Charles Lidz, Ph.D.  
**Funding:** National Institute of Mental Health  
**Budget:** \$460,625  
**Time Frame:** 7/1/2014 - 6/30/2016  
**Description:** Chuck is the PI on a Therapeutic Misconception (TM) study that will take a major step in the direction of determining how to reduce TM in clinical trials. TM involves patient/subjects failing to grasp the difference between participating in a clinical trial and receiving ordinary clinical care. This study will provide the basis for a transformation of the manner in which clinical researchers gain consent from participants, and substantially reduce one of the major barriers to genuine informed consent to research. This study is designed as a hypothetical randomized trial comparing an enhanced disclosure using scientific reframing designed to reduce TM versus disclosure as usual. The hypothetical study is as close to a real one as possible, including gaining consent in real clinical settings with real patients who would be eligible for the mock protocol that will be very similar to a recently closed protocol. The study involves three different clinical services at a university medical center. This design will test the ability of a scientific reframing disclosure to reduce TM and also test whether such disclosure reduces the inclination of potential subjects to volunteer for a clinical trial.

### **Training Criminal Justice Personnel in Behavioral Health Issues of Children, Adolescents, & Young Adults**

**PI:** Albert J. Grudzinskas, Jr., J.D.  
**Co-PI:** Barry Feldman, Ph.D..  
**Funding:** SHINE Foundation  
**Budget:** \$10,000  
**Time Frame:** 2/1/2015 - 1/31/2016  
**Description:** This project is developing a training curriculum for Massachusetts police officers to identify and assist children, adolescents and young adults experiencing trauma or a behavioral health crisis. Trainings focus on crisis intervention, recognition of symptomatology and common behavioral health presentations, strategies for de-escalation, wellness and stress management for officers, and developing trauma informed strategies for working with youth.

### **The Transition Age Youth Psychotherapy Experience (TYPE) Research Study**

**PI:** Maryann Davis, Ph.D.  
**Funding:** SHINE Foundation  
**Budget:** \$10,000  
**Time Frame:** 2/1/2015 - 1/31/2016  
**Description:** This project is investigating the relationship of treatment attrition (TA) to factors that are the intermediate targets of the major existing adult TA interventions, and factors that likely contribute either uniquely or more strongly to TA in young adults than mature adults. The study will examine differences in treatment expectations, psychological distress, therapeutic alliance, self-determination skills, and social network stigma between young adults who are low and high attenders in individual outpatient psychotherapy from Community Healthlink Clinics in MA.

### **Validation and Implementation of the OYAS-Div Risk Screen Project**

**PI:** Gina Vincent, Ph.D.  
**Funding:** Arkansas Advocates for Children and Family  
**Budget:** \$22,003

**Time Frame:** 4/1/2015 - 3/31/2016

**Description:** This subcontract is to locally validate and implement the Diversion version of the Ohio Youth Assessment System in juvenile intake offices in Arkansas. Gina Vincent, PhD (PI) and Rachael Perrault, MA (Research Project Director) at UMMS will oversee the integration of the OYAS screen into juvenile intake in one county for data gathering purposes. The goal is to obtain a sample of 200 to 250 youth who receive an OYAS screen by an intake worker. This sample of youth will be used to derive a temporary cutoff score on the OYAS based on the overall distribution of scores. Re-offense data on this sample of youth will be needed to derive a more valid cutoff score for the OYAS screen for use at juvenile intake in Arkansas. Once the sample of 200 to 250 cases is drawn, UMMS will work with the IT Department to track new petition data for this sample in Contexte. We will track new petitions (and convictions) for a period of six months. Once the re-offense data are obtained from the IT Department, UMMS will conduct Cox Regressions and Receiver Operating Characteristic curves to determine the best cutoff for use of the OYAS diversion screen. At that time, UMMS will assist the AOC with implementing the tool throughout intake departments by drafting policy and determining exactly how it will be used in diversion decisions.



## Appendix B

### SPARC Dissemination Products



#### SPARC Cast Videos:

- Participatory Action Research video featuring Jonathan Delman (<https://youtu.be/ocY1UwQbo9U>)
- Engaging Deaf Research Participants featuring Melissa Anderson, Wyattte Hall, Marlene Elliott and Douglas Ziedonis (<https://youtu.be/jr1IIMZb55I>)

#### SPARC Webinar Series:

- Mindfulness Based Approaches to Eating and Weight Loss webinar featuring Carl Fulwiler (<https://youtu.be/MThloBoAjpK>)

#### Transitions Research & Training Center:

- Building a Community of Practice to Support Young Adults with Serious Mental Health Conditions

#### Transitions Research & Training Center Videos

- Announcing Comeback TV!! (<https://youtu.be/35jQyoDuC0U>)
- What To Do If Being Cyberbullied (<https://youtu.be/h1xjNDEbCbQ>)
- Things to Consider When Looking for a Job (CBTV Employment Part 1) ([https://youtu.be/2O8\\_4uI9j-c](https://youtu.be/2O8_4uI9j-c))



# Building a **COMMUNITY OF PRACTICE** to Support Young Adults with Serious Mental Health Conditions

Tip Sheet 9

Transitions RTC

February 2015

The Transitions Research and Training Center (RTC) assisted in the development of a Community of Practice (CoP) on supporting **Transition Age Youth and Young Adults (TAYYA)** with **Serious Mental Health Conditions (SMHC)**. The Northeast Massachusetts Community of Practice (NE MA CoP) was composed of local stakeholders seeking to enhance services for this group.

## What Is a Community of Practice?

A Community of Practice brings together “groups of people who share a concern, a set of problems, a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis”.<sup>1</sup>



CoPs are flexible, informal groups that encourage the sharing of knowledge among members so as to advance practice. Three important characteristics distinguish a Community of Practice from other groups:

1. **The domain** is the focus or topic of interest. This is what the group will address in its work, and should be something that motivates the members to participate.
2. **The community** is built by the relationship and interaction of the members. Coming together to share similar and different experiences and problems helps create the community.
3. **The practice** is the common knowledge shared by the members as they seek to solve problems or create new ideas together.<sup>2</sup>

## How Did We Do It?

### A Community Built across the Silos:

Transition age youth and young adults with SMHC traverse many systems and stakeholders including: child mental health, adult mental health, vocational rehabilitation, child welfare, secondary and post-secondary education, transition age youth, family members and advocates. We sought membership from all these groups.

### A “Champion” Made the Connections:

In an effort to bridge the systems gap, we garnered a well-respected “Champion”<sup>3</sup> to help bring this diverse group of stakeholders together. In this case, the champion was a regional Director of the Massachusetts Department of Mental Health Services. The Director helped us to identify and recruit local members of the NE MA CoP.

### A Self-Defined Goal and Self-Governing CoP:

The CoP self-selected their leader and then their goal. The shared goal of the NE MA CoP was to create tip sheets that would provide valuable information and guidance to TAYYA with SMHC and their supporters.

### Infused the Voice of Youth and Young Adults with SMHC:

All tip sheets were brought for review to a statewide young adult council, in which all members have lived experience of having a SMHC. The council provided valuable input and feedback on drafts. In turn, the young adults awarded their “Stamp of Approval” to all the CoP tip sheets.



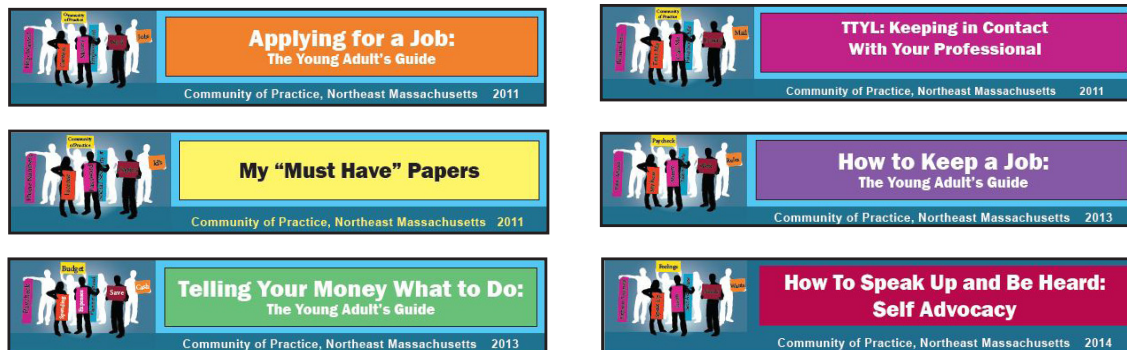
### Organizational Sponsor Assisted the CoP:

The Transitions RTC provided the NE MA CoP resources such as: website development and online meeting technology and instructions, product template and logo design, dissemination, and administrative duties i.e., note taking, posting meeting minutes, sending meeting invites and reminders.

## NE MA Community of Practice Results

The six tip sheets created are very successful and continue to be disseminated both locally and nationally by the NE MA CoP members and the Transitions RTC. They have been downloaded thousands of times from the RTC's website and linked to various organizations.

### Tip Sheet Products



Tip Sheets available at: <http://www.umassmed.edu/transitionsRTC/publication>

## Takeaways on How to Start Your CoP

- **Get a Sponsor:** Find a sponsor to help support your CoP's endeavor.
- **Get a Champion:** Find a leader who is connected to the community to champion your initiative.
- **Goals Are Set by Members:** The group decides what is the ultimate goal/mission of the CoP.



## Resources for CoP Models

- Need help creating your own Community of Practice? The Transitions RTC provides Technical Assistance: <http://www.umassmed.edu/transitionsRTC/need-help>
- Cultivating Communities of Practice: A Guide to Managing Knowledge - Seven Principles for Cultivating Communities of Practice (3/25/02) <http://hbswk.hbs.edu/archive/2855.html>
- Wenger, E. (2006). Communities of practice: A brief introduction. Available from <http://wenger-trayner.com/theory/>
- Community of Practice Design Guide: A Step-by-Step Guide for Designing & Cultivating Communities of Practice in Higher Education (EDUCAUSE, n.d.) <http://net.educause.edu/ir/library/pdf/NLI0531.pdf>
- Knowing in Community: 10 Critical Success Factors in Building Communities of Practice (2001, Richard McDermott, PhD) <http://www.co-i-l.com/coil/knowledge-garden/cop/knowing.shtml>
- Network Notes III Communities of Practice (Canadian Health Services Research Foundation, n.d.): [http://www.chsrf.ca/Libraries/Network\\_Notes\\_ENGLISH/Network\\_Notes\\_III\\_%e2%80%93Communities\\_of\\_Practice.sflb.ashx](http://www.chsrf.ca/Libraries/Network_Notes_ENGLISH/Network_Notes_III_%e2%80%93Communities_of_Practice.sflb.ashx)
- Gotto, G. S., Turnbull, A., Summers, J. A., Blue-Banning, M. (2008). Community of Practice Development Manual: A Step-by-Step Guide for Designing & Cultivating Communities of Practice. Austin, TX: SEDL. [http://www.ktdrr.org/resources/rush/copmanual/CoP\\_Manual.pdf](http://www.ktdrr.org/resources/rush/copmanual/CoP_Manual.pdf)
- NCDDR. (2005). Communities of Practice: A Strategy for Sharing and Building Knowledge. FOCUS: Technical Brief Number 11. Austin, TX: SEDL. [http://www.ktdrr.org/ktlibrary/articles\\_pubs/ncddrwork/focus/focus11/Focus11.pdf](http://www.ktdrr.org/ktlibrary/articles_pubs/ncddrwork/focus/focus11/Focus11.pdf)

## References

1. Wenger, E., McDermott, R., & Snyder, W. M. (2002). Cultivating communities of practice: A guide to managing knowledge. Boston: Harvard Business School Press.
2. Wenger, E. (1998). Communities of practice: Learning, meaning, and identity. New York: Cambridge University Press.
3. Dowling, Paul. (posted Dec. 2011) ACT KM Forum: Building a Community of Practice: Learning from our own experience, Retrieved on September 16, 2014 From: <http://www.docstoc.com/docs/108907403/Building-a-Community-of-Practice>



Visit Transitions RTC online at <http://www.umassmed.edu/transitionsRTC>

**Suggested Citation:** Smith, L. M., Broughton, A., Starks, J. & Ellison, M. (2015). Building a Community of Practice to Support Young Adults with Serious Mental Health Conditions, Tip Sheet 9. Worcester, MA: University of Massachusetts Medical School, Department of Psychiatry, Systems and Psychosocial Advances Research Center (SPARC), Transitions Research and Training Center.

This publication can be made available in alternative formats upon request through [TransitionsRTC@umassmed.edu](mailto:TransitionsRTC@umassmed.edu)

The contents of this tip sheet were developed with funding from the US Department of Education, National Institute on Disability and Rehabilitation Research, and the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (NIDRR grant H133B090018). Additional funding provided by UMass Medical School's Commonwealth Medicine division. The content of this tip sheet does not necessarily reflect the views of the funding agencies and you should not assume endorsement by the Federal Government.



The Transitions RTC is part of the Systems & Psychosocial Advances Research Center (SPARC), A Massachusetts Department of Mental Health Research Center of Excellence

## Appendix C

### New SPARC Publications

Aalsma, M., White, L., Lau, K., Perkins, A., Monahan, P., & Grisso, T. (2015). Behavioral health care needs, detention-based care and criminal recidivism at community reentry from juvenile detention: A multi-site survival curve analysis. *American Journal of Public Health*, 105(7), 1372-1378. DOI: 10.2105/AJPH.2014.302529

Anderson, M. L., Glickman, N., Mistler, L. A., & Gonzalez, M. (2015). Working therapeutically with deaf people recovering from trauma and addiction. *Psychiatric Rehabilitation Journal*, Epub ahead of print. DOI: 10.1037/prj0000146

Anderson, M. L., & Najavits, L. M. (2014). Does seeking safety reduce PTSD symptoms in women receiving physical disability compensation? *Rehabilitation Psychology*, 59(3), 349-353. DOI: 10.1037/a0036869

Biebel, K., Ellison, M., Alikhan, S., Ringeisen, H., & Ryder-Burge, A. (2015). Site visit report: Feasibility study for demonstration of supported education to promote educational attainment and employment among individuals with serious mental illness. Prepared for the Office of the Assistant Secretary for Planning and Evaluation.

Biebel, K., Nicholson, J., & Wolf, T. (2015). Shifting the intervention paradigm from individuals to families living with parental mental illness. In *Parental Psychiatric Disorders, 3rd Edition* (A. Ruepert, D. Maybery, J. Nicholson, M. Seeman and M. Gopfert (Eds.)). pp. 343-353. Cambridge University Press

Biebel, K., Woolsey, K., & Nicholson, J. Implementing an intervention for parents with serious mental illness and their families: Building workforce capacity. *Psychiatric Rehabilitation Journal*, 37(3): 209-215 (2014). Doi: 10.1037/prj0000046

Brodsky, S., & Pivovarov, E. (2014). The credibility of witnesses. In C. W. Esqueda, R. Weiner, & B. Bornstein (Eds.), *The Witness Stand and Lawrence S. Wrightsman, Jr.* New York: Springer Publishing.

Byatt, N. (2015, May). *Rapid access to perinatal psychiatric care in depression (RAPPID)* (Masters of Science in Clinical Investigation thesis). Retrieved from [http://escholarship.umassmed.edu/gsbs\\_diss/731/](http://escholarship.umassmed.edu/gsbs_diss/731/)

Byatt N. (2014, September). MCPAP for Moms: A new program that can help psychiatric providers manage their pregnant and lactating patients. *Massachusetts Psychiatric Society's Newsletter*, 146, 3.

Byatt, N., & Freeman, M. (2015). Is there an association between prenatal exposure to antidepressants and PPHN of the newborn? Translating the evidence to clinical practice. *The Evidence-based Nursing Journal*, 18(1), 15-16.

Byatt, N., Rui, X., Dinh, K., & Waring, E. M. (2015, April 7). Trends in mental health care use in relation to depressive symptoms among pregnant women. *Archives of Women's Mental Health*. Epub ahead of print.

- Byatt, N., & Toor, R. (2015). Young, pregnant, ataxic-and jilted. *Current Psychiatry*, 14(1), 44-49.
- Byron, G., Ziedonis, D., McGrath, C., Frazier, J., DeTorrijos, F., & Fulwiler, C. (2015). Implementation of mindfulness training for mental health staff: Organizational context and stakeholder perspectives. *Mindfulness* 6(4), 861-872. DOI: 10.1007/s12671-014-0330-2.
- Carriero, S., Smelson, D., Ranney, M., Horvath, K., Boudreaux, E., Picard, R., & Boyer, E. (2015). Real-time mobile detection of drug use with wearable biosensors: A pilot study. *Journal of Medical Toxicology*, 11(1), 73-79. DOI: 10.1007/s13181-014-0439-7
- Colins, O., Grisso, T., Mulder, E., & Vermeiren, R. (2014). The relation of standardized mental health screening and categorical assessment in detained male adolescents. *European Child and Adolescent Psychiatry*, 24(3), 339-349. DOI: 10.1007/s00787-014-0584-1
- Copeland, W., Burns, B.J., Costello, E.J., Angold, A.M.B., Shanahan, L., & Davis, M. (2015). Untreated psychiatric cases increase during the transition to adulthood. *Psychiatric Services*, 66(4), 397-403. DOI: 10.1176/appi.ps.201300541
- Cutrona, S. L., Wagner, J., Roblin, D. W., Gaglio, B., Williams, A., Torres Stone, R., & Mazor, K. M. (2015). E-Mail to promote colorectal cancer screening within social networks: acceptability and content. *Journal of Health Communication*, 20(5), 589-598. DOI: 10.1080/10810730.2015.1012238
- Davis, M., Sheidow, A. J., & McCart, M. R. (2015). Reducing recidivism and symptoms in emerging adults with serious mental health conditions and justice system involvement. *Journal of Behavioral Health Services and Research*, 42(2), 172-190. DOI: 10.1007/s11414-014-9425-8
- DeMatteo, D., Munetz, M., Petrila, J., Grudzinskas, Jr., A. J., Fisher, W., Filone, S., Winckworth-Prejsnar, K., & Rock, M. (2015). State-level dissemination and promotion initiatives: Florida, Massachusetts, Ohio, and Pennsylvania. In P. Griffin, K. Heilbrun, E. P. Mulvey, D. DeMatteo, & C. A. Schubert (Eds.), *The sequential intercept model and criminal justice: Promoting community alternatives for individuals with serious mental illness* (pp. 164-187). New York, NY: Oxford University Press.
- Delman J., Clark J., Eisen S., & Parker V. (2015). Facilitators and barriers to the active participation of clients with serious mental illnesses in medication decision making: The perceptions of young adult clients. *The Journal of Behavioral Health Services & Research*, 42(2), 238-53. DOI: 10.1007/s11414-014-9431-x
- Delman, J., & Harter, S. (2015). Vocational and educational supports for people with histories of homelessness and co-occurring mental health and substance use disorders. In D. Smelson, et al. (Eds.), *MISSION-Homelessness treatment manual* (pp. 90-100). Bedford, MA: Veterans Health Administration.
- DiGirolamo, G. J. Smelson, D., & Guevremont, N. (2015). Cue-Induced craving in patients with cocaine use disorder predicts cognitive control deficits toward cocaine cues. *Addictive Behaviors*, 47, 86-90. DOI: 10.1016/j.addbeh.2015.03.025



- Ellison, M., Klodnick, V. V., Bond, G. R., Krzos, I. M., Kaiser, S. M., Fagan, M., & Davis, M. (2015). Adapting supported employment for emerging adults with serious mental health conditions. *Journal of Behavioral Health Services and Research*, 42(2), 206-222. DOI: 10.1007/s11414-014-9445-4
- Finlay, A. K., Binswanger, I., Smelson, D., Sawh, L., McGuire, J., Rosenthal, J., Blue-Howells, J., Timko, C., Blodgett, J., Harris, A. H. S., & Frayne, S. (2015). Gender differences in mental health and substance use disorders and treatment entry among justice-involved veterans in the Veterans Health Administration. *Medical Care*, 53(4 Suppl 1), S105-11. DOI: 10.1097/MLR.0000000000000271
- Geller, J. L. (2015, February 26). Letter to the Editor. Can there be good mental asylums? *New York Times*, p. A26. [http://www.nytimes.com/2015/02/26/opinion/can-there-be-good-mental-asylums.html?\\_r=0](http://www.nytimes.com/2015/02/26/opinion/can-there-be-good-mental-asylums.html?_r=0)
- Geller, J. L. (2015, March 6). Listening to patients with an open mind. *Psychiatric News*, 50(5), 22.
- Gettens, J., & Henry, A. D. (2014). Employment-related health insurance and service delivery needs of persons with disabilities. *Journal of Disability Policy Studies*. DOI:10.1177/1044207314539010
- Gettens, J., Hoffman, D., & Henry, A. D. (2015). *Wraparound health insurance costs and utilization among employed people with disabilities*. Disability Research Consortium DRC Working Paper. Mathematica Center for Studying Disability Policy.
- Grisso, T. (2014). Foreword. In R. Otto, R. Demier, & M Boccaccini, *Forensic reports and testimony* (vii-ix). New York: Wiley.
- Grisso, T. (2014). Protections for juveniles in self-incriminating legal contexts, developmentally considered. *Court Review*, 50(1), 32-36. Retrieved from <http://aja.ncsc.dni.us/publications/courtrv/cr50-1/CR50-1.pdf>
- Guy, L., Nelson, R., Fusco-Morin, S., & Vincent, G. M. (2014). What do juvenile probation officers think of using the SAVRY and YLS/CMI for case management, and do they use the instruments properly? *International Journal of Forensic Mental Health*, 13(3), 227-241. DOI: 10.1080/14999013.2014.939789
- Haber, M. G. (2015). *University of North Carolina at Charlotte Evaluations of North Carolina Families United Transition-age Youth and Family Partner Programs – Final Report*.
- Hartwell, S. W., James, A., Chen, J., Pinals, D. A., Marin, M. C., & Smelson, D. (2014). Trauma among justice involved veterans. *Professional Psychology, Research and Practice*, 45(6), 425-432. DOI: <http://dx.doi.org/10.1037/a0037725>
- Henry, A. D., Fishman, J., Gettens, J., Behl-Chadha, B., Hillerns, C., & Lei, P. P. (2015). *Findings from the One Care Quality of Life Survey. Report to MassHealth*. Shrewsbury MA: Center for Health Policy and Research, University of Massachusetts Medical School.
- Henry, A. D., Fishman, J., Gettens, J., Goody, M., & Alsentzer, D. (2015). *Findings from the One Care Member Experience Survey 2014. Report to MassHealth from the One Care Early Indicators Project*. Shrewsbury MA: Center for Health Policy and Research, University of Massachusetts Medical School.

- Henry, A. D., Hashemi, L., & Zhang, Y. (2014). Evaluation of a statewide implementation of supported employment in Massachusetts. *Psychiatric Rehabilitation Journal*, 37(4), 284-288. DOI: <http://dx.doi.org/10.1037/prj0000097>
- Kirsch, D. J., Doerfler, L. A., & Truong, D. (2015). Mental health issues among college students: who gets referred for psychopharmacology evaluation? *American Journal of College Health*, 63(1), 50-56. DOI: 10.1080/07448481.2014.960423
- Kirsch, D. J., Pinder-Amaker, S. L., Morse, C., Ellison, M. L., Doerfler, L. A., & Riba, M. B. (2014). Population-based initiatives in college mental health: Students helping students to overcome obstacles. *Current Psychiatry Reports*, 16(12), 525. DOI: 10.1007/s11920-014-0525-1
- Klodnick, V. V., Sabella, K., Brenner, C., Krzos, I., Ellison, M. L., Kaiser, S., Davis, M., & Fagan, M. (2014). Perspectives of young emerging adults with serious mental health conditions on vocational peer mentors. *Journal of Emotional and Behavioral Disorders*, 1-12. DOI: 10.1177/1063426614565052
- Larson, K., Kinscherff, R., & Goldstein, S. (2014). Ethical considerations and professional posture in working with violent offenders. In C. A. Pietz, & C. A. Mattson (Eds.), *Violent offenders: Understanding and assessment* (pp. 474-502). New York, NY: Oxford University Press.
- Leslie, L., Maciolek, S., Biebel, K., Debordes-Jackson, G., & Nicholson, J. (2014). Exploring research use at the research-policy-practice interface in children's behavioral health services. *Administration and Policy in Mental Health and Mental Health Services Research*, 41(6), 822-34. DOI: 10.1007/s10488-014-0535-7
- Li, M., Deng, W., Chen, Z., He, Z., Wang, Q., Huang, C., . . . Li, T. (2015). A splitting brain: Imbalanced neural networks in schizophrenia. *Psychiatry Research: Neuroimaging*, 232(2), 145-153. DOI: 10.1016/j.pscychresns.2015.03.001
- Lidz, C. W., Albert, K., Appelbaum, P. S., Dunn, L. B., Overton, E., & Pivovarov, E. (2015). Why is therapeutic misconception so prevalent? *Cambridge Quarterly of Healthcare Ethics*, 24(2), 231-241. DOI: 10.1017/S096318011400053X
- Lidz, C. W., & Appelbaum, P. S. (2014). Therapeutic misconception in clinical trials: Fighting against it and living with it. *Revista clínica española*, 214(8), 457-458. <http://dx.doi.org/10.1016/j.rce.2014.06.013>
- Lincoln, A., Borg, B., & Delman, J. (2015). Developing a community-based participatory research model to engage transition age youth using mental health service in research, *Family & Community Health*, 38(1), 87-97. DOI: 10.1097/FCH.0000000000000054
- Long-Bellil, L., Cumings, C., & Henry, A. D. (2015). *Vermont Choices for Care: Personal and systemic factors leading to nursing facility readmission*. Report to the Vermont Department of Disabilities, Aging and Independent Living. Shrewsbury MA: Center for Health Policy and Research, University of Massachusetts Medical School.

Long-Bellil, L., Cumings, C., Henry, A. D., & Trafton, W. (2015). *Vermont Choices for Care: Evaluation of Years 1-9*. Report to the Vermont Department of Disabilities, Aging and Independent Living. Shrewsbury MA: Center for Health Policy and Research, University of Massachusetts Medical School.

McInnes, D. K., Sawh, L., Petrakis, B. A., Rao, S., Shimada, S. L., Gifford, A. L., Eyrich-Garg, K. M., Anaya, H. D., & Smelson, D. (July, 2014). The potential for health-related uses of mobile phones and internet with homeless veterans: Results from a multi-site survey. *Telemedicine and e-Health*, 20(9), 801-809. DOI: 10.1089/tmj.2013.0329

Neal, T., & Grisso, T. (2014). Assessment practices and expert judgment methods in forensic psychology and psychiatry: An international snapshot. *Criminal Justice and Behavior*, 41(12), 1406-1421. DOI: 10.1177/00093854814548449

Nicholson, J., Wolf, T. & Biebel, K. (2015). Creating positive parenting experiences: Family Options. In *Parental psychiatric disorders, 3rd edition* (A. Ruepert, D. Maybery, J. Nicholson, M. Seeman and M. Gopfert (Eds.)). pp. 266-276. Cambridge University Press.

Nicholson, J., Wolf, T., Wilder, C. & Biebel, K. (2015). *Creating options for family recovery: A provider's guide to promoting parental mental health*. Employment Options, Inc.

Patitz, B. J., Anderson, M. L., & Najavits, L. M. (2015). An outcome study of Seeking Safety with rural community-based women. *Journal of Rural Mental Health*, 39(1), 54-58. DOI: 10.1037/rmh0000015

Pivovarova, E. (2014). Response to the selective appeal of neuroscience and its implications for the courtroom. *The Jury Expert*, 26(4), 36-37. Retrieved from [http://www.thejuryexpert.com/wp-content/uploads/TJEvVol26Num4\\_Nov2014.pdf](http://www.thejuryexpert.com/wp-content/uploads/TJEvVol26Num4_Nov2014.pdf)

Pivovarova, E., & Brodsky, S. (2014). Towards wariness between attorneys and clinician neuroscientists. *The Jury Expert*, 26(3), 32-33. Retrieved from [http://www.thejuryexpert.com/wp-content/uploads/TJEvVol26Num3\\_Aug2014.pdf](http://www.thejuryexpert.com/wp-content/uploads/TJEvVol26Num3_Aug2014.pdf)

Pivovarova, E., & Brodsky, S. (2014). Expert witness as a traveling sprinkler. *New Jersey Psychologist*, 64(1), 10-11. Retrieved from [http://issuu.com/njpsychologicalassociation/docs/final\\_winter\\_2014\\_low\\_res](http://issuu.com/njpsychologicalassociation/docs/final_winter_2014_low_res)

Porche, M. V., Fortuna, L. R., Wachholtz, A., & Torres Stone, R. (2015). Distal and proximal religiosity as protective factors for adolescent and emerging adult alcohol use. *Religions*, 6(2), 365-384. DOI: 10.3390/rel6020365

Smelson, D., Chinman, M., McCarthy, S., Hannah, G., Sawh, L., & Glickman, M. (2015). A cluster randomized Hybrid Type III trial testing an implementation support strategy to facilitate the use of an evidence-based practice in VA homeless programs. *Implementation Science*, 10, 79. DOI: 10.1186/s13012-015-0267-4

Smelson, D., Pinals, D., Harter, J., Sawh, L., & Ziedonis, D. (2015). *The MISSION criminal justice treatment manual, Spanish edition*. Substance Abuse and Mental Health Service Administration.

Smelson, D., Sawh, L., Harter, J., & Ziedonis, D. (2015). *The MISSION participant workbook second edition, Spanish edition*. Substance Abuse and Mental Health Service Administration.

Stewart, R. J., & Geller, J. L. (2014). Personal accounts: Recovery is resilience in the face of symptoms. *Psychiatric Services*, 65(4), 563-564. DOI: 10.1176/appi.ps.650402

Tsang, S., Schmidt, K. M., Vincent, G. M., Salekin, R. T., Moretti, M. M., & Odgers, C. L. (2015). Assessing psychopathy among justice involved adolescents with the PCL: YV: An item response theory examination across gender. *Personality Disorders: Theory, Research, and Treatment*, 6(1), 22-31. DOI: 10.1037/per0000094

Vincent, G. M. (2015). Application and implementation of risk assessment in juvenile justice. The science of aggression and violence in the courts. *Journal: Science in the Courtroom*, 1(3). Retrieved from: <http://ncsi.institute/volume-1-number-3-april-2015.html>

Vincent, G. M., & Lovins, B. (2015). Using a decision matrix to guide juvenile dispositions: Where do we go next? *Policy Essay. Criminology & Public Policy*, 14(1), 51-58. DOI: 10.1111/1745-9133.12112

Young, L., Mulloy, M., Huckabee, S., Landoll, R., Miller, M., & Weist, M. (2015). Child and adolescent mental health and the schools. In B. G. Cook, M. Tankersley, & T. J. Landrum (Eds.), *Advances in learning and behavioral disabilities; Vol 28; Transition of youth and young adults* (pp. 197-224). Retrieved from <http://www.emeraldinsight.com/doi/book/10.1108/S0735-004X201528>

Zalpuri, I., Byatt, N., Gramman, S., Dresner, N., & Brendel, R. (2015). Decisional capacity in pregnancy: a complex case of pregnancy termination. *Psychosomatics*, 56(3), 292-297. DOI: 10.1016/j.psych.2014.09.009

Zhang, D., Stecker, P., Huckabee, S., & Miller, R. (2014). Strategic development for middle school students struggling with fractions assessment and intervention. *Journal of Learning Disabilities*. DOI: 10.1177/0022219414562281.

Ziedonis, D. M., Fan X., Bizamcer, A. N., Wyatt, S. A., Tonelli, M. E., & Smelson, D. (2014). Co-occurring addiction and psychotic disorders. In R. K. Ries, D. A. Fiellin, S. C. Miller, & R. Saitz (Eds.), *Principles of addiction medicine fifth edition* (pp. 1346-1364). Chevy Chase, MD: American Society of Addiction Medicine.

## Appendix D

### New SPARC Faculty & Staff

#### New SPARC Faculty

Melissa L. Anderson, Ph.D. is studying the development and evaluation of evidence-based psychotherapies for Deaf clients. Members of the Deaf community – a sociolinguistic minority group of at least 500,000 Americans whose primary language is American Sign Language (ASL) – experience trauma, posttraumatic stress disorder, and substance use disorders at rates double to the general population. Yet, to address these disparities, there are no evidence-based behavioral health treatments that have been empirically tested for efficacy with Deaf people. Melissa is making a critical first step toward reducing Deaf people's behavioral health disparities by developing and evaluating Deaf-accessible interventions for trauma and addiction. At UMass, Melissa provides individual therapy to Deaf clients recovering from trauma and addiction and conducts research on best approaches for working with Deaf clients. She is the recent recipient of a Clinical Research Scholar Award (K12) administered by the UMass Center for Clinical & Translational Science, with which she and a team of Deaf and hearing clinicians and community members are developing a digital American Sign Language therapy manual for treating trauma and addiction.



Mason G. Haber, Ph.D. is an Assistant Professor in Research in the Department of Psychiatry and the Transitions RTC at the SPARC. Mason's research focuses on the implementation of positive youth development programs for transitioning youth receiving mental health services, especially those developed through community initiatives and wraparound approaches. Additionally, he investigates factors predicting successful transitions in vulnerable young adult populations such as interagency collaboration and family support, employing methodological approaches including the use of single or multiple linked archival data sources (e.g., intake evaluations, school records, arrest records), secondary data analyses, and systematic and meta-analytic reviews. His previous publications include an outcome evaluation of the Partnerships for Youth Transition demonstration, a meta-analysis of factors in secondary educational settings predicting post-secondary outcomes of youth with disabilities, and recent chapters summarizing recent evidence on positive youth development and harm reduction interventions for transitioning youth. Mason has extensive experience evaluating programs to support transition to adulthood of youth and young adults with serious mental health conditions or co-occurring SMHC and substance use disorders.



Ekaterina (Kate) Pivovarova, Ph.D. is an Assistant Professor in the Department of Psychiatry, Division of Law and Psychiatry in the SPARC at the University of Massachusetts Medical School. She obtained her Ph.D. in Clinical Psychology, with a specialization in Forensics, at Fordham University. She went on to complete a clinical Forensic Psychology Fellowship at UMMS. Kate obtained further cross-disciplinary training as a Research Fellow at the Center for Law, Brain and Behavior at Massachusetts General Hospital. Kate's research has examined clinical decision-making, psychometric properties of psycholegal instruments, and bioethics issues. She is a licensed psychologist in the Commonwealth of Massachusetts.



### New SPARC Staff



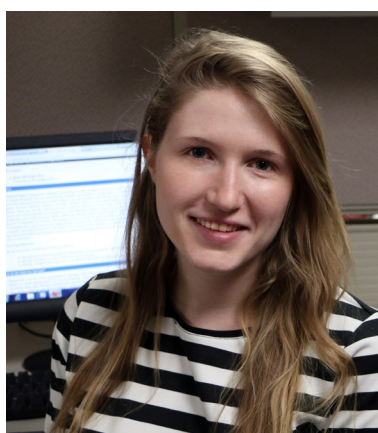
Shums Alikhan, B.S. graduated from Boston University in 2013 with a Bachelor of Science in Health Science and is currently pursuing a Master's degree in public health at UMASS. She is a Research Coordinator for SPARC who serves as a Program Assistant for MCPAP for Moms and is part of the Grant Support Team. Additionally, she is working on two of Chuck Lidz's studies: Central IRBs: Enhanced Protections for Human Research Participants and Therapeutic Misconception and Scientific Reframing. Shums is interested in youth and family mental health, intervention and program implementation, as well as research ethics.



Peter Bui, B.A. is a Research Coordinator in the Transitions RTC at the SPARC. He obtained his Bachelor's Degree from Assumption College in 2014. He is currently involved RTC-led research that seeks to understand the career and education development activities of young adults and young adult parents with serious mental health conditions. His research interests include mental health in youth and young adults, depression, empathy, child development, and the impact of mental illness on employment and education.



Lauren Davis, B.S. is a Knowledge Translation Project Coordinator in the Transitions RTC at the SPARC. She obtained a dual Bachelor's Degree from Fitchburg State University in Human Services and Political Science in 2004. Her research interests include translation and dissemination of research findings, collaborating with youth and young adults with lived experience, service providers, advocates, consumers, and their families focusing on improving educational and employment outcomes.



Laura Golden, B.A. is a Clinical Research Assistant in the Transitions RTC at the SPARC. She has a degree in Sociology from Clark University. Her research interests include career development and post-secondary education of young adults with mental health conditions, longitudinal studies of the transition to adulthood among youth with mental health conditions, and participatory action research. She is currently working on the Transition Age Youth Psychotherapy Expectations Study, interviewing young adults who have just begun psychotherapy about their experiences in therapy. She is also working on the Collecting Histories of Education and Employment during Recovery Study, which is a retrospective longitudinal study tracking the education and employment experiences of older young adults between the ages of 26 and 30.



Alexandra Murray, B.A., M.P.A. is Research Coordinator at the SPARC. She has a degree in Psychology and Public Administration, both from Clark University. Her research interests include Research Ethics and Institutional Review Boards, Attention Deficit Hyperactivity Disorder, as well as the social-determinants of mental health. She is currently working on the Central IRBs: Enhanced Protections for Human Research Participants study.