

# THE VISN 5 MIRECC MATTERS

An Electronic Publication of the VA Capitol Health Care Network  
(VISN 5) Mental Illness Research, Education, and Clinical Center

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## ACCEPTANCE AND COMMITMENT THERAPY TRAINING IN BALTIMORE

*Submitted by Minu Aghevli, MA and James  
Finkelstein, PsyD*

At the end of January, the Addictions Day Treatment Program (ADTP) and Post-Traumatic Stress Residential Rehabilitation Program (PRRP) held a 2-day training workshop on the basic elements and clinical application of Acceptance and Commitment Therapy (ACT). The workshop was conducted by Kelly Wilson, PhD, and was attended by over thirty mental health staff members, including individuals from ADTP, PRRP, the mental health clinic, the Partial Hospitalization Program, the Methadone Clinic, Special Populations Treatment Programs (SPTP), SARRTP (Perry Point) and Baltimore's Inpatient Unit.

ACT is a cognitive-behavioral treatment that has been empirically-validated for a wide variety of conditions, including substance abuse, trauma, and chronic pain. The ACT approach is being employed in the ADTP and PRRP programs, which recently merged to better address the needs of dually-diagnosed substance-abuse and trauma recovery patients. The hope is that the ACT framework will provide a cohesive, intensive therapeutic milieu that will maximize behavioral change in this historically treatment-resistant and chronic population.

In the words of Dr. Kelly Wilson,

“ACT is part of a movement in psychological science that sees acceptance as an important addition to change-oriented treatment strategies. An emerging body of evidence suggests that acceptance and openness to experience can have both physical and psychological benefits. The paradox upon which ACT is founded is that radical acceptance of what cannot be changed empowers us to recognize and change the things that can. ACT teaches clients to embrace necessary suffering in order to increase their ability to engage in committed, life-affirming action. ACT does not allow a neat division between people doing treatment and people needing treatment. It is hard to get what is important about ACT without confronting the fact that in a very deep sense, we are all in the same boat.”

Continuing supervision and discussion of ACT theoretical issues is taking place on a weekly basis; please contact **Sonja Batten, PhD** at [Sonja.Batten@med.va.gov](mailto:Sonja.Batten@med.va.gov) or **Paul Benson, PhD** at [Paul.Benson@med.va.gov](mailto:Paul.Benson@med.va.gov) if interested.

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## THE MAKING OF A DVD BY THE MIRECC

### “INVOLVING FAMILIES: IMPROVING CARE FOR INDIVIDUALS WITH SCHIZOPHRENIA”

*Paul Ruskin, MD, Cynthia Clark RN, Bette Stewart, Lisa Dixon, MD, MPH, Aaron Murray- Swank, PhD, Susan Hadary, William Whiteford*

Treatment guidelines for schizophrenia recommend that all patients have family involvement and education. Firm evidence suggests that family involvement significantly reduces relapse. Despite this, studies indicate that many patients with schizophrenia have little to no family involvement in the overall treatment process and only a small minority has formal family treatment or education. This lack of family involvement and treatment holds true in VA as well as non-VA settings.

The Veterans Affairs Capitol Network (VISN 5) MIRECC has made the enhancement of family education and involvement a major priority of our center. In order to achieve this goal, the MIRECC has conducted focus groups with families and clinicians to determine the needs of families of patients with schizophrenia. In addition, the MIRECC has encouraged family participation in the NAMI Family to Family Education Program (FFEP). Through this program, trained family members educate other family members about mental illness and about treatment options. Finally, our MIRECC regularly sponsors conferences for family members. The goal of these conferences is to educate family members about symptoms, medications, psychosocial treatment, and rehabilitative services that are available to Veterans with schizophrenia.

In the course of conducting these activities, we have learned that:

1. Although families provide a great deal of care for Veterans with schizophrenia, they are often not involved at all, or they are only peripherally involved, with the clinicians who are providing treatment and
2. Clinicians want to have more involvement with families, but they often don't know how to involve the families, or what services can be provided to families.

In an effort to increase the involvement of families with schizophrenia in the treatment process, the VISN 5 MIRECC is producing a three part VIDEO/DVD staff development series entitled “Involving Families: Improving Care for Individuals with Schizophrenia.” The purpose of the Video/DVD series is twofold:

1. To encourage and inspire VA clinicians and other clinicians to become more involved with the families of patients with schizophrenia and
2. To serve as a “how to” instructional program to teach VA clinicians and other clinicians how to become more involved with the families of patients with schizophrenia.

Part I explores the topic of how to find the family members of veterans with schizophrenia and how to engage them in the treatment process. Part II describes the range of services that can be provided to family members. Part III includes the important information that family members need to know about schizophrenia and its treatment.

The Video/DVD is being professionally produced by Video Press, the Oscar, Emmy, and Peabody award-winning production facility of the University of Maryland School of Medicine. Once the Video/DVD has been produced, it will be widely distributed free of charge throughout the VA medical system. The Video/DVD will also be put on our MIRECC website so that it can be readily accessed by providers and families.

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## RESEARCH CAREER DEVELOPMENT AWARD GRANTED

*Submitted by Dwight Dickinson, PhD*

In January, 2004, **Dwight Dickinson, PhD**, received word that his application to the VA Rehabilitation Research and Development Service for a Research Career Development award (RCD) had been funded. Dr. Dickinson is active in various MIRECC projects relating to cognition in schizophrenia, in particular the MIRECC computer-assisted cognitive remediation program (CACR), which has been described in previous issues of the MIRECC Matters Newsletter. The three-year RCD will support Dr.

Dickinson's work on CACR and other ongoing cognitive projects. It will also help extend his work in helping to close the gap between patient-oriented clinical work and basic cognitive neuroscience which has slowed progress in the development of treatments for cognitive deficits in schizophrenia. While clinical trials are essential to demonstrate the effectiveness of new treatments, the mechanisms of cognitive impairment and cognitive improvement are poorly understood. Different experimental methods, such as neuro-imaging and electrophysiology are tools being used to explore the neural underpinnings of the cognitive deficit in schizophrenia and identify the brain mechanisms related to treatment response. The RCD will provide support for exploratory studies using these methods to begin to describe some of the neural mechanisms of cognitive change in response to CACR.

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## CONGRATS ARE IN ORDER!

MIRECC Investigators **Jack Blanchard, PhD**, **Dwight Dickinson, PhD**, and **Mary Lambert, PhD** all recently passed their National and Maryland licensure exams for clinical psychology. Congratulations!

Additional congratulations to **Sarah Morris, PhD**, who was recently appointed to the position of Assistant Professor at the University Of Maryland School Of Medicine. Additionally, Dr. Morris was chosen to be the Associate Director of the MIRECC Fellowship Program. Thank you to **John Junginger, PhD** for his outstanding service in this position previous to Dr. Morris's appointment. Dr. Junginger will be increasing his responsibilities in the Mental Health Service Line.

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## WELCOME TO NEW MEMBERS OF THE VISN 5 MIRECC TEAM

**Danielle Stewart** has recently joined the MIRECC staff. Danielle will be completing her MS in Clinical Psychology at Loyola College in Maryland this year. She has previously assisted in research for the National Institute on Aging and worked at the Granite House, Inc. and Spring Grove State Hospital. Danielle will be conducting assessments for the Computer-Assisted Cognitive Rehabilitation and the Generalization of Training in Schizophrenia. Welcome, Danielle!

## UPCOMING EVENTS

### Homelessness and Serious Mental Illness: From the Streets to Recovery

April 27-28, 2004

Location: Trump Plaza Hotel, Atlantic City, NJ

*This conference is co-sponsored by VISNs 1, 3, 4, and 5 and features a panel of national speakers. Topics include treatment adherence/psychopharmacology; substance abuse; legal issues; medical co-morbidity; and non-profit, city and federal models for intervention.*

For more information, contact Katy Ruckdeschel at [ruckdesc@mail.med.upenn.edu](mailto:ruckdesc@mail.med.upenn.edu).

## **Family Conference: “Mental Illness: Working Towards Recovery”**

May 8, 2004, 8:30-1:30 PM

Location: Baltimore VA Medical Center, 2<sup>nd</sup> Floor Cafeteria

The MIRECC will be presenting the fifth conference for veterans with mental illness and their families. Tony Lehman, MD, MSPH will be talking about the importance of family involvement. Steve Baker, who is a consultant and trainer in the area of supported employment, will present as well. A panel of consumers and work supervisors will discuss the experience of work therapy and the effect on their lives.

For more information or to refer consumers and their families, please contact Cindy Clark at [Cynthia.Clark2@med.va.gov](mailto:Cynthia.Clark2@med.va.gov).

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## **Women and Substance Use Disorders: Co-Morbidity and Treatment**

May 17, 2004

Location: Sheraton Inner Harbor Hotel, Baltimore, MD

*This will be the Third Annual Women's' Conference planned by the VISN 5 MIRECC. This one-day conference will bring together nationally known experts to discuss issues related to women with substance use disorders. Conference attendees will learn about gender related differences in substance abuse, the pharmacological treatment of psychiatric co-morbidity in substance abusing women, the behavioral treatment of substance abusing women with personality disorders, the treatment of pregnant women addicted to substances and the nature and unique problems associated with substance use in women with serious mental illnesses.*

For more information and registration, see [www.chepinc.org](http://www.chepinc.org). Click on the conferences tab, and then on “Women and Substance Use Disorders: Co-Morbidity and Treatment.”

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## **Working with Families of the mentally ill: Meeting the Challenges and Reaping the Rewards**

October 18, 2004

Location: Maritime Institute, Linthicum Heights, MD

*This one day conference will focus on the importance of family involvement and partnership with clinicians in the treatment of mental illness. National and local experts will address evidence-based practice models including MacFarland's Family Psycho-Education Model and NAMI's Family-to-Family program, and will include a forum for consumers to address issues of families using the mental health care system.*

For more information and registration, see [www.chepinc.org](http://www.chepinc.org). Click on the conferences tab, and then on “Working with Families of the Mentally Ill: Meeting the Challenges and Reaping the Rewards.”

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**Conferences for 2005**  
**(Additional Information will be posted as details are confirmed)**

*Spring 2005: Women and Post-Traumatic Stress Disorder*  
*Baltimore metro Area*

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*June 5-8, 2005: National MIRECC Conference*  
*New Orleans, Louisiana*

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*Fall 2005: Management of Violence in a Psychiatric Setting*  
*National Wildlife Center- Shepherdstown, West Virginia*

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*November 16, 2005: Maryland Schizophrenia Conference*  
*Martin's West, Baltimore, Maryland*

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