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## iSPARC 2021 Annual Report to the Massachusetts Department of Mental Health

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Improving Mental and Behavioral Health Services for Better Lives and Stronger Communities

# 2021 ANNUAL REPORT

TO THE MASSACHUSETTS DEPARTMENT OF MENTAL HEALTH

## "Working Together, Apart"



Implementation Science & Practice Advances Research Center  
Department of Psychiatry  
UMass Chan Medical School

A Massachusetts Department of Mental Health Research Center of Excellence

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# Executive Summary

We are continually grateful to the Massachusetts Department of Mental Health (DMH) for its ongoing support of the UMass Chan Medical School, Department of Psychiatry DMH Research Center of Excellence—the Implementation Science and Practice Advances Research Center (iSPARC). In FY21, iSPARC continued to leverage DMH’s investment to rapidly translate research findings into best practices for individuals with lived experience, their families, and the providers who serve them across the Commonwealth. These successes were maintained throughout a particularly challenging year—one in which iSPARC staff and faculty spent the entire fiscal year working on a primarily remote basis. This year has been a critical lesson for iSPARC in how to effectively “work together, apart.”

Not only did our Center survive these newly imposed conditions, but we have thrived at moving forward our programs of research and implementation science practice while simultaneously adapting to our new work life pandemic circumstances. Highlights of these successes include the advancement of **Melissa Anderson** to become the Deputy Director of iSPARC, as well as three impressive faculty promotions—**Nancy Byatt** to Professor of Psychiatry, Obstetrics & Gynecology and Population & Quantitative Health Sciences; **Melissa Anderson** to Associate Professor of Psychiatry; and **Kathryn Sabella** to Assistant Professor of Psychiatry.

This fiscal year has also brought new leadership to the Department of Psychiatry. **Kimberly Yonkers, M.D.** is the new chair of Department, and the *Katz Family Chair*. She is a nationally and internationally recognized expert in perinatal mental health and has joined the faculty of iSPARC.

## iSPARC's Mission

iSPARC is aligned with DMH's mission to meet the mental health needs and support individuals of all ages to live, work, and meaningfully participate in their communities. Our mission is to conduct, disseminate, and implement research in the public mental health system to enhance services for people with behavioral health conditions that promote their recovery and improve their quality of life. As such, we conduct research in partnership with the people whose lives are most affected—individuals with lived experience, their families, and the providers who serve them—recognizing that those with lived experience have expertise that is essential to conduct impactful research and that investigators without lived experience cannot provide that expertise.

This past year has seen major advancements in how we practice community engagement via virtual platforms and has highlighted the increase in access that these platforms create for many individuals with lived experience across the Commonwealth. Our goal is to continue to leverage these platforms beyond the scope of the pandemic to retain these recent gains in our accessibility to the Massachusetts mental health community.

## The iSPARC Research Portfolio

### iSPARC Faculty & Staff:



Received \$10,565,941 in new research funding



Submitted 22 grant applications



Were awarded 9 new grants and contracts



Published 63 peer-reviewed journal articles



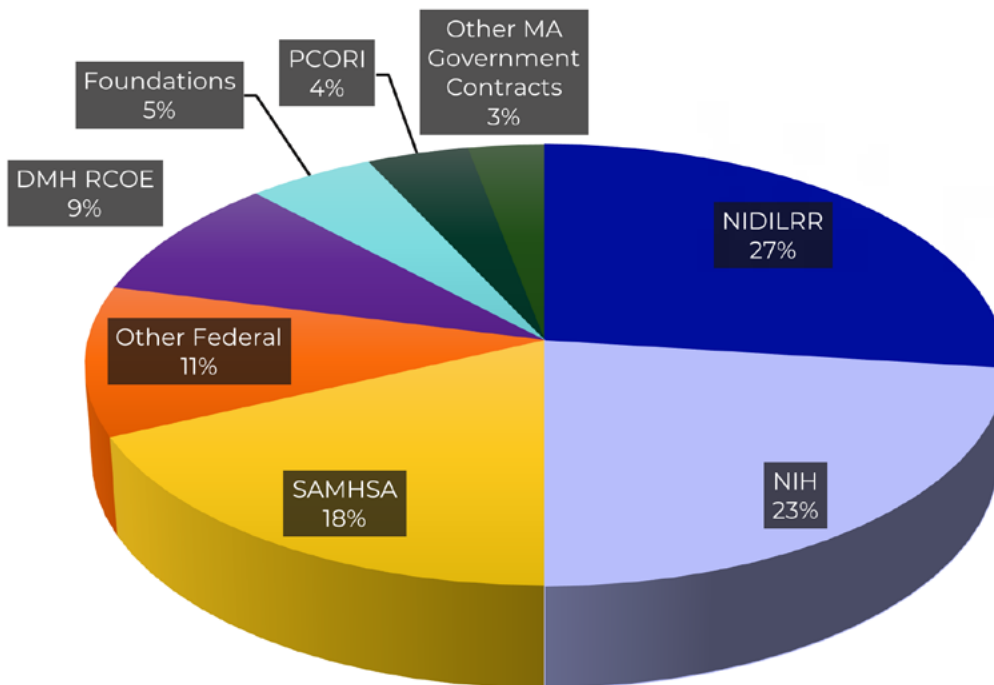
Submitted an additional 44 peer-reviewed journal articles

## iSPARC Funding Sources FY 2021

The investment that DMH makes in its funding of iSPARC as a Research Center of Excellence provides an impressive return on this investment in the Commonwealth.

Every \$1 invested by DMH in FY21 yielded a return of **nearly \$10** (\$9.97) to the Commonwealth to fund research, training, technical assistance, and service delivery.

Chart 1. Funding Sources



We are very excited about the work we have done this fiscal year. The Top 5 we're most excited about are:

1. The National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) funded **Marsha Ellison's** and **Marianne Farkas's** new [\*Center on Knowledge Translation for Employment Research \(CeKTER\)\*](#) <sup>2</sup>. This five-year project is to establish the Center and to generate new materials and methods for greater utilization of knowledge translation in services and policies to successfully promote employment outcomes for people with disabilities (see [page 16](#)).
2. The National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) funded **Kathryn Sabella's** Field Initiated Project (FIP), *Developing Implementation and Fidelity Monitoring Tools for the Bridge for Resilient Youth in Transition (BRYT) Program*. This is a collaboration of the Brookline Center and the Transitions to Adulthood Center for Research. This project will develop, test, and refine standardized products that can be used for implementation and evaluation of the Bridge for Resilient Youth in Transition (BRYT), a model program supporting students who have experienced mental health crises.
3. In collaboration with the UMass Chan Medical School interprofessional Center for Experiential Learning and Simulation (iCELS), iSPARC designed a 4-hour, simulation-based cultural humility training tailored for iSPARC staff and faculty. The training

program was delivered to three iSPARC cohorts in the spring of 2021. In total, 24 individuals from the iSPARC workforce participated in the cultural humility training. Future trainings will be offered to iSPARC faculty and staff in FY22 and FY23.

4. In FY21, **Alex Wilkins**, iSPARC postdoctoral fellow and NIAAA Diversity Scholar, submitted a *K23 proposal, Designing Deaf-MET: A Deaf-Accessible Pre-Treatment for Alcohol Use Disorder*. The proposal was awarded in FY22 by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The U.S. Deaf community – a group of more than 500,000 Americans who communicate using American Sign Language (ASL) – experiences nearly triple the rate of lifetime problem drinking compared to the general population. Yet, there are no therapy approaches that have been developed and formally tested to treat problem drinking or alcohol use disorder among Deaf clients. This study will begin to address this gap by supporting the development and preliminary validation of Deaf Motivational Enhancement Therapy (Deaf- MET), a Deaf-accessible pre-treatment for alcohol use disorder.
5. The iSPARC Communications Team developed strategies to increase our capacity to share research-based knowledge with individuals, families, providers, policymakers, and other researchers.
  - iSPARC websites received visits from 24,427 unique users with 55,505 page-views.
  - Product downloads from our websites and our *Psychiatry Information in Brief* and *Journal of Parent and Family Mental Health* e-journals totaled over 81,188 downloads—an increase of over 44% from last year (FY20 = 56,385).
  - There were 3,865 downloads of our tip sheets in other languages (3,796 Spanish and 69 Vietnamese).

# Overview

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# The iSPARC Mission

**iSPARC** is aligned with DMH’s mission to meet the mental health needs and support individuals of all ages to live, work, and meaningfully participate in their communities. iSPARC and DMH share a strong commitment to applying person-centered, family-focused, and trauma-informed approaches; developing, evaluating, and implementing evidence-based practices to ensure highest quality of care; and promoting cultural and linguistic equity of mental health services and resources.

FY21 has been a uniquely challenging year – for our Center, for the surrounding community, and for the world at large. In March 2020, most of us never would have predicted that, a full year later, the COVID-19 pandemic would still be dictating our work and personal lives. The continuation of the pandemic has meant that iSPARC staff and faculty spent this entire fiscal year working on a primarily remote basis. Not only did our Center survive these newly imposed conditions, but we have thrived at moving forward our programs of research while simultaneously adapting to our new standard of work life. In essence, this year has been a critical lesson for iSPARC in how to effectively “work together, apart.”



iSPARC’s mission is to conduct, disseminate, and support the use of research to enhance behavioral health services that promote recovery and improve quality of life. As such, we conduct this research in partnership with the people whose lives are most affected—individuals with lived experience, their families, and the providers who serve them—recognizing that those with lived experience have expertise that is essential to conduct impactful research and investigators without lived experience cannot provide that expertise. This past year has seen major advancements in how we practice community engagement via virtual platforms and has highlighted the increase in access that these platforms create for many individuals with lived experience across the Commonwealth. Our goal is to continue to leverage these platforms beyond the scope of the pandemic in order to retain these recent gains in our accessibility to the Massachusetts mental health community.

As noted above, despite the COVID-19 pandemic, Fiscal Year 2021 was another strong year for the Center.

### iSPARC Faculty & Staff:



Received **\$10,565,941** in new research funding



Submitted **22** grant applications



Were awarded **9** new grants and contracts



Published **63** peer-reviewed journal articles



Submitted an additional **44** peer-reviewed journal articles

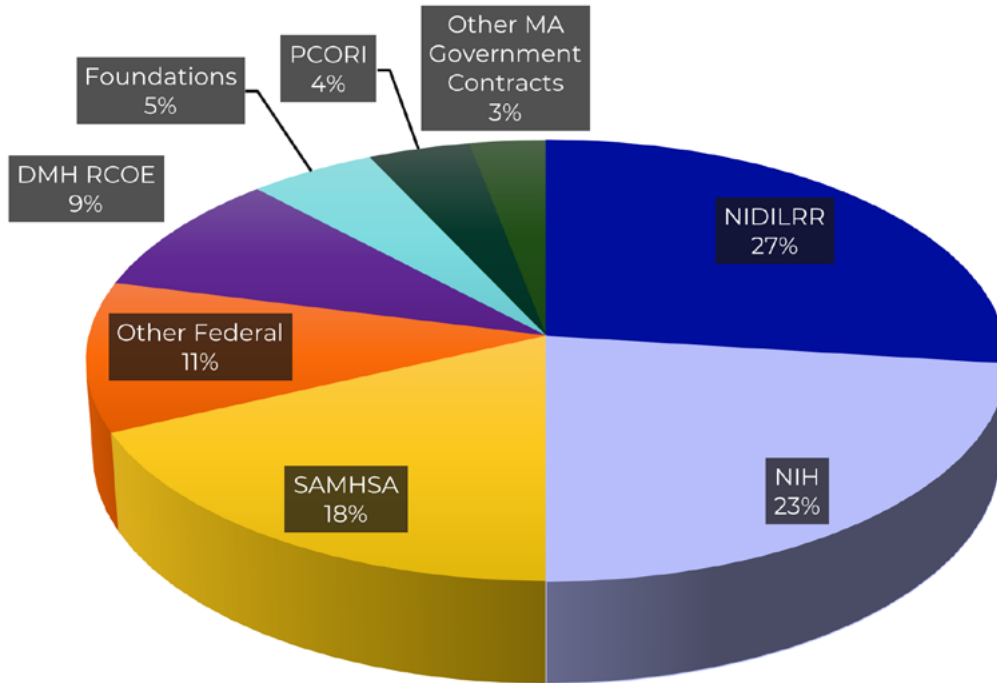
iSPARC is home to investigators from the UMass Chan Medical School Department of Psychiatry, the UMass Chan Medical School Department of Population and Quantitative Health Sciences (PQHS), and the Boston University (BU) Center for Psychiatric Rehabilitation. Our BU partners enrich the overall efforts of iSPARC with their expertise in training, knowledge translation, evidence-based practices in psychiatric rehabilitation, and engagement of adults with lived experience as partners in research activities. Our PQHS partners contribute expertise in conducting public health research that includes an active program in the engagement of racial, cultural, and linguistic groups that have been long underrepresented as research partners and beneficiaries of evidence-based and promising services.

iSPARC faculty are nationally and internationally recognized for their research in psychosocial interventions development; intervention implementation; public services and supports; clubhouse and vocational rehabilitation models; forensic/legal and human rights issues; child, parent and family mental health issues; perinatal mental health; Deaf behavioral health; transition age youth/young adults; and co-occurring disorders. Internal to UMass Chan Medical School, we collaborate with investigators across the Departments of Psychiatry, Population and Quantitative Health Sciences, Family Medicine and Community Health, Preventive and Behavioral Medicine, Obstetrics and Gynecology, Emergency Medicine, and Commonwealth Medicine. External to UMass Chan Medical School, we partner with investigators from other UMass campuses, as well as national and international institutions to optimize our resources. These relationships enable us to build a bigger and stronger iSPARC to help meet the many challenges faced by DMH, those served by DMH, and the Commonwealth more broadly.



## iSPARC Funding Sources FY 2021

iSPARC provides a positive return for the DMH investment. Every \$1 invested by DMH this fiscal year yielded a return of **nearly \$10** (\$9.97) to the Commonwealth to fund research, training, technical assistance, and service delivery:

Chart 1. Funding Sources



## 2021 Massachusetts Department of Mental Health Research Centers of Excellence Conference

On June 14, 2021, iSPARC and the Massachusetts General Hospital's [Center of Excellence for Psychosocial and Systemic Research](#)  hosted the 2021 Massachusetts DMH Research Centers of Excellence Conference. The theme of this conference was [How Stakeholder-Engaged Research Can Change Care Provision and Policy: An Inside Look at the Centers of Excellence](#) . The entire conference was hosted virtually – a first for the DMH Centers of Excellence Conferences.



As this was the first research conference for our centers since the start of the new contract, a primary goal was for DMH clients, their family members, DMH staff, and providers to learn more about our work. Additionally, we wanted the conference to be an opportunity for our Centers to learn about how our research can best support DMH, its mission, and the people served by DMH. The conference emphasized stakeholder-engaged research, including the importance of engaging persons with lived experience, their family members, and the providers and staff who serve them in all phases of the research process. The conference included opening remarks by DMH Commissioner Brooke Doyle, presentations by the Center Directors and faculty from both Centers, and a panel presentation by persons with lived experience, “Engaging Persons with Lived Experience: Successes and Challenges from the Peer Perspective.” Over 130 individuals attended the virtual conference. [Visit our website](#) to access the conference agenda, presentation slides, and recordings.

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*You are invited to the*  
 2021 Annual Massachusetts Department of Mental Health's  
 Research Centers of Excellence Conference  
**How Stakeholder-Engaged Research  
 Can Change Care Provision and Policy:**  
*An Inside Look at the Centers of Excellence*

Date: Monday, June 14, 2021  
 Time: 12:30 PM – 4:30 PM EDT  
 VIRTUAL CONFERENCE

# Public Mental Health and Implementation Research Program

All research conducted by iSPARC faculty falls under the Public Mental Health and Implementation Research Program. The program is co-directed by iSPARC Director **Maryann Davis** and **Stephenie Lemon**, Chief of the Division of Preventive Medicine within the Department of Population and Quantitative Health Sciences (PQHS).

In FY21, the major goal of this program was to nurture collaborations between iSPARC faculty and affiliated faculty members from PQHS, the Department of Psychiatry, and Boston University's Center for Psychiatric Rehabilitation. Activities to foster this collaboration included presentations and discussions of each other's work through the iSPARC Interactive Learning (iSPARC-IL) series, as well as research highlights presented during faculty meetings. Five iSPARC faculty members whose primary affiliations were not the Department of Psychiatry were also provided secondary appointments in Psychiatry to further foster collaboration. In addition, grant opportunities building on these collaborations were identified by the Grant Support Team and circulated to faculty. The majority of submitted grants were reviewed by the Grant Support Team which included several PQHS faculty members, again providing opportunities for greater collaboration between Departments. This enhanced environment has resulted in a substantial increase in the number of grants that were submitted collaboratively in FY21 – 3 collaborative grants were submitted, and 3 collaborative grants were awarded funding.

Another primary goal of the Public Mental Health and Implementation Research Program is to support the conduct of funded research. As can be expected, the activities under this goal have been substantially affected by the COVID-19 pandemic. This FY occurred entirely within the pandemic and investigators had to address a variety of challenges. Since the initial shut down of research and subsequent development of remote data collection techniques in the spring of 2020, there remained a variety of research challenges the most prominent of which was to participant recruitment. A few research projects have



been deferred until the research environment is more conducive to addressing the original research question. Numerous research studies added measures to assess the impact of the pandemic on the population or services being examined, and will thus, contribute to our knowledge of this unique time in our country.

FY22 will focus on growing further collaborative research projects, as well as building iSPARC's capacity to conduct research that addresses critical questions related racial and ethnic populations that are traditionally underrepresented in behavioral health and services research.

## Research Highlights

### Psychiatric Rehabilitation



Kathryn Sabella is site PI for the recently funded National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) [Rehabilitation Research and Training Center \(RRTC\) on Health and Function of People with Psychiatric Disabilities](#) <sup>Ⓔ</sup>. Judith Cook, Director, Center on Mental Health Services Research and Policy at the University of Illinois at Chicago, is overall PI of this 5-year project. Activities for this RRTC on Health and Function of People with


Psychiatric Disabilities include: (1) conducting a national web survey on the status of adults with psychiatric disabilities during the COVID-19 pandemic; (2) developing and testing a model for rebuilding health and wellness in the pandemic aftermath; (3) developing and testing a blended telehealth navigation intervention designed to promote access to primary health care; (4) conducting a national survey to assess the health status and health care utilization of the certified peer specialist workforce; (5) testing a virtual mental health self-management program and creating and evaluating a national certification for its providers; and (6) conducting a national web survey of the health of transition-age youth followed by a qualitative longitudinal study of disrupted transitions to normative adult roles due to the pandemic. Kathryn Sabella is the site PI and Co-Investigator on one research study, [Pivot Toward Wellness: Impact of Disrupted Life Transitions on Young Adults' Health Status & Well-Being](#) <sup>Ⓔ</sup>. This is a mixed-methods study of youth and young adults, age 16-25, to ascertain their health and behavioral health status, service use and need, and prevalence of disrupted life transitions in the aftermath of the pandemic and global recession.

- The National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) funded Kathryn Sabella's three-year project, *Developing Implementation and Fidelity Monitoring Tools for the Bridge for Resilient Youth in Transition (BRYT) Program*. This is a collaboration of the Brookline Center and the Transitions to Adulthood Center for Research. This project will develop, test, and refine standardized products that can be used for implementation and evaluation of the Bridge for Resilient Youth in Transition (BRYT), a model program supporting students who have experienced mental health crises. This development project will produce a BRYT



intervention logic model and a BRYT implementation package that includes a BRYT manual, a BRYT training and technical assistance plan and fidelity measures and protocols.



**Marsha Ellison** and **Marianne Farkas**, Director of Training, Dissemination and Technical Assistance Boston University CPR, are Co-PIs of the new National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)-funded [\*Center on Knowledge Translation for Employment Research \(CeKTER\)\*](#) . This five-year project is to establish the Center and to generate new materials and methods for greater utilization of knowledge translation in services and policies to successfully promote employment outcomes for people with disabilities. CeKTER utilizes the expertise of an advisory council comprised of professionals in implementation science, representatives of national associations of people with disabilities, as well as prominent NIDILRR disability employment researchers. Outcomes of research activities include: (1) increased expertise among NIDILRR grantees in using knowledge translation strategies to improve adoption and use of disability employment research; (2) increased readiness for person, program, or policy changes that support disability employment; (3) increased shared knowledge among NIDILRR grantees; and (4) improved employment outcomes among people with disabilities.



## Law and Psychiatry



**Gina Vincent** received funding from the National Institute of Justice (NIJ) for *Optimizing Supervision and Service Strategies to Reduce Reoffending: Accounting for Risks, Strengths, and Developmental Differences*. The purpose of this two-year project is to partner with three juvenile justice agencies in Pennsylvania, Virginia, and Wisconsin to (1) improve their capacity to accurately measure reoffending and to use data to optimize supervision practices; (2) identify youth characteristics (risk and protective factors) that most strongly predict reoffending; and (3) determine whether strengths-based services in addition risk-reduction services lead to the lower rates of reoffending. This study will gather both retrospective (N > 30,000) and prospective (N > 3,500) samples of youth who receive a risk-needs assessment at probation intake and follow them for 1.5 to 3-years to measure re-offending. The study will obtain high quality administrative data ([re]assessments of risk- needs, supervision, and reoffending), and add self-report measures of protective factors and enhanced service utilization data systems. It will use multiple measures of reoffending (e.g., new petitions and new convictions for serious reoffending) over two time-points (during and after supervision). The analytic plan institutes survival analyses that account for time at-risk to assess how much rates of reoffending differ across specific risk and protective factor domains, while controlling for the effects of supervision and services, and whether strengths-based services add value to risk-reduction services to affect

reoffending measures, while controlling for selection effects using a propensity-weighting approach. The study will also assess whether age moderates predictive domains and service responsivity. This study will yield a model that will be widely disseminated via a policy brief for better understanding and using assessment, service, supervision, and re-offense data to shape policy and practice decisions.

- **Gina Vincent** received funding from the Commonwealth of Massachusetts for two projects:
  - The Office of the Commissioner of Probation funded *Dangerousness Training and Advancing Pretrial Reform in Massachusetts*. The goal of this initial one-year project, with a potential two-year extension, is to assist the Massachusetts Probation Service and its criminal justice partners to establish research-informed policies and practices to define and identify pretrial individuals who are likely to be dangerous in the future. This project involves technical assistance, training, and instrument development.
  - The Office of the Child Advocate funded a technical assistance project to assist the MA Office of the Child Advocate and MA Department of Youth Services with developing a mental health screening and risk/needs for reoffending screening protocol for pre-file youth diversion in Massachusetts. Three sites will become part of this Diversion Lab and will receive technical assistance and training.

## Deaf Behavioral Health



The National Institute on Deafness and Other Communication Disorders funded **Melissa Anderson's R21, *Sign Here: How to Conduct Informed Consent with Deaf Individuals***. In this study, Melissa Anderson and her team will refine and test two training interventions – one for healthcare providers and one for clinical researchers – that teach professionals how to interact with Deaf individuals skillfully and sensitively, especially during the informed consent process. Results will inform a large national study that will test the effectiveness of the training interventions in real-world academic and clinical settings with a range of available training resources.

- In FY21, **Alex Wilkins**, iSPARC postdoctoral fellow and NIAAA Diversity Scholar, submitted a K23 proposal, *Designing Deaf-MET: A Deaf-Accessible Pre-Treatment for Alcohol Use Disorder*. The proposal was awarded in FY22 by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The U.S. Deaf community—a group of more than 500,000 Americans who communicate using American Sign Language (ASL)—experiences nearly triple the rate of lifetime problem drinking compared to the general population. Yet, there are no therapy approaches that have been developed and formally tested to treat problem drinking or alcohol use disorder among Deaf clients. This study will begin to address this gap by supporting the development and preliminary validation of Deaf Motivational Enhancement Therapy (Deaf-MET), a

Deaf-accessible pre-treatment for alcohol use disorder.

## Perinatal Mental Health



The Perigee Fund provided funding for the third year of the [\*Lifeline for Moms Network\*](#) <sup>Ⓔ</sup>. This funding allows Nancy Byatt and her team to continue their work developing a multistate peer network of Perinatal Psychiatric Access Programs. The Lifeline for Moms Network provides a platform for evaluating and innovating maternal mental health care, leading to vastly improved outcomes for mothers, their children, and their families. The team plans to continuously improve the quality, impact, and durability of Perinatal Psychiatry Access Programs throughout the country.

The goals of Year 3 are to: (1) facilitate peer learning and sharing of resources among aspiring, emerging, and established Perinatal Psychiatry Access Programs, and relevant partners and collaborators, across the United States; and (2) to facilitate quality improvement and program evaluation within and across programs.

- Near the end of FY20, Nancy Byatt and Tom Mackie, Associate Professor & Chair of Health Policy and Management at SUNY Downstate Health Sciences University received an Enhancement Award Focused on COVID-19 from the Patient Centered Outcomes Research Institute (PCORI) for their *Comparative Effectiveness of Perinatal Psychiatry Access Programs* project. The goals of the Enhancement Award Focused on COVID-19 Response Among Perinatal Psychiatry Access Programs are to identify: (1) barriers and facilitators to mental health care experienced by women with perinatal mood disorders and anxiety amidst COVID-19; (2) the adaptations made by Perinatal Psychiatry Access Programs in response; and (3) perceptions of those adaptations.




Two studies are newly being conducted at UMass Chan Medical School by Kimberly Yonkers as a result of her move to the Department as Chair and to iSPARC. The PCORI-funded 2-year study entitled *Support Models for Addiction Related Treatment (SMART) Trial* will compare two different approaches to help women's health clinics provide care and opioid use disorder (OUD) treatment to women before and after the birth of their child. Extension for Community Healthcare Outcomes

(ECHO) uses video training and mentoring to help clinicians treat pregnant women with OUD is being compared to collaborative care. The second study is a 5-year project funded by the National Institute on Alcohol Abuse and Alcoholism entitled *Scaling Up: A Multi-Site Trial of e-SBI for Alcohol Use in Pregnancy*. This study uses a computerized Screening, Brief Intervention and Referral to Treatment (SBIRT) model and text messages to encourage abstinence for pregnant women who use alcohol.

## Suicide Prevention




Celine Larkin and Bengisu Tulu, from Worcester Polytechnic Institute, are Co-PIs on the newly funded National Institute of Mental Health (NIMH) R34, *Technology-Assisted Systems Change for Suicide Prevention (TASCS)*. The study team, which includes Ed Boudreaux, will develop a platform for the delivery of evidence-based interventions for suicide risk during and after an emergency department visit. The TASCS will be the first health information technology designed to enable flexible delivery of the [Emergency Department Safety Assessment and Follow-up Evaluation \(ED-SAFE\)](#)  intervention components with strong fidelity and with responsiveness to the conditions and barriers present in most emergency departments.



Ed Boudreaux is the PI of the NIMH funded R01, *Telehealth to Improve Prevention of Suicide (TIPS) in EDs*. This study will rigorously evaluate whether synchronous, within-visit telemental health evaluation and intervention services can successfully overcome poor access to behavioral health and substandard suicide-related care in emergency departments (EDs), including evaluating the impact on system metrics. The study will extend their understanding of the relative added value of the ED-SAFE post-visit telephone intervention and will create knowledge about key factors related to implementation and sustainment. This will be the first study to evaluate telehealth for suicide prevention in the ED. It will use best-practices in both telemental health and suicide prevention and is designed for rapid dissemination. The team will compare three conditions across two Intervention EDs that currently do not have on-site behavioral health specialists and will include two Non-intervention EDs that will be monitored to control for macro system changes and secular trends. The TIPS will address numerous fundamental questions around the role of telehealth in suicide prevention in a highly efficient, pragmatic clinical trial, maximizing the study's scientific and public health impact and building a singular database that will serve as an enduring resource to the suicide prevention community.

## Nicotine Reduction



Colleen McKay became the new PI for the *Central Massachusetts Tobacco-Free Community Partnership* after the retirement of former Director, Tina Grosowsky. This project supports communities' efforts to lower smoking prevalence and exposure to secondhand smoke. The Central Massachusetts Tobacco-Free Community Partnership enhances state and local tobacco control efforts by exposing tobacco industry tactics, mobilizing the community to support and adopt evidence-based policies, and changing social norms that prevent youth from starting to smoke and help current smokers to quit. Funded by the [Massachusetts Department of Public Health Tobacco Cessation and Prevention Program](#) , the Partnership serves as a resource for local coalitions, health and human service agencies, municipalities, and

workplaces on tobacco intervention efforts. Program staff are available to conduct educational presentations on tobacco prevention policy; effective tobacco cessation resources; the effects of secondhand smoke on children and adults; and tobacco industry tactics that target young people.

- ▶ **Rajani Sadasivam** and Lori Pbert, Director of the Center for Tobacco Treatment Research and Training at UMass Chan, are Co-PIs of the National Institute on Drug Abuse (NIDA)-funded *Vaper to Vaper (V2V): A Multimodal Mobile Peer Driven Intervention to Support Adolescents in Quitting Vaping*. The FDA and the U.S. Surgeon General call the increasing use of e-cigarettes among U.S. adolescents an epidemic, with e-cigarette use exceeding combustible cigarette use. To address this epidemic, the goal of this R34 is to develop the Vaper-to-Vaper (V2V) multi-modal mobile peer driven intervention to assist adolescent e-cigarette users in quitting. The V2V components will include: (1) peer messaging (tailored messages pushed via texting); (2) peer coaching (asynchronous communications with trained coaches via texting); and (3) gamification (using game design to motivate participation). This Stage I project, adapting an existing intervention and feasibility/pilot testing, will provide the necessary materials and information to proceed to a subsequent large-scale Stage III R01 trial to test the efficacy of the V2V intervention in supporting adolescent e-cigarette users in quitting.

# Technical Assistance/ Consultation and External Funding Program

The iSPARC Technical Assistance/Consultation and External Funding Program is co-led by **Gina Vincent** and **Marsha Ellison**. The program is responsible for providing basic and intensive technical assistance (TA) services to MA DMH and its contracted providers. This program also houses our Communications Division, led by Marsha Ellison, described in detail on [page 24](#).

## Basic Technical Assistance

Basic TA consists of up to 16 hours of free TA services per request. Examples include seeking information about best practices/intervention models; seeking “how to” advice (e.g., how to leverage social media, how to create advisory councils, etc.); discussing grant proposal ideas; conducting literature searches/reviews; and identifying tools for supporting implementation of best practices (e.g., checklists, guides, survey formats). Basic TA can be requested by DMH leadership and the larger DMH workforce via the [iSPARC website](https://umassmed.edu/isparc) [↗](https://umassmed.edu/isparc) (umassmed.edu/isparc). **Highlights from FY21 are noted below:**

- **Kathy Herzog**, an inpatient psychologist at Taunton State Hospital, was interested in conducting outcome research with Taunton State Hospital patients who were discharged to the community. A literature review of research on outcomes among recently psychiatrically hospitalized individuals was conducted and sent to Dr. Herzog. **Kathryn Sabella** spoke with Dr. Herzog on April 5, 2021, summarizing our findings.
- After reading our Workforce Innovation and Opportunity Act (WIOA) tip sheet for family members, **Marianne Vesey**, Interim Program Director for Healthy Transitions 2 from Massachusetts DMH, wanted to explore if Career Centers can be more connected to the Access Centers and the population DMH serves. **Marsha Ellison** held a one-hour consultation on November 18, 2021, with the new Program Director, **Betsy Edes**, on the aspects of WIOA legislation, and how they pertain to the youth that may be attending the Lawrence youth drop-in center. This included a discussion of American Job Centers, JobCorps and YouthBuild, Pre-ETS, and MRC application.

- **Margaret Guyer**, Director of Workforce Development at DMH, emailed iSPARC to assist the MA Child Youth and Family (CYF) services. CYF was seeking information of current best practices for treating/intervening with youth who have experienced commercial sexual exploitation, as well as identifying any local experts in the treatment. **Morgan Rao** conducted a literature review which was summarized by **Marsha Ellison** and sent to Dr. Guyer. iSPARC also provided a Massachusetts Clinician List Advanced Training list on cognitive behavioral therapy for trauma and links to tip sheets/briefs and webinars conducted by Jessica Griffin.
- **Barbara Grimes-Smith**, Project Director at Community Healthlink, requested TA on developing a Consumer Advisory Board, like the iSPARC Family Advisory Board. **Marcela Hayes** met with Ms. Grimes-Smith and sent her start-up documents for initiating a consumer advisory board.
- **Amber Haney**, Youth Specialist (NCCAT) at LUK Inc., emailed asking for the contact information for the Young Adult Advisory Council at the Federation for Children with Special Needs, particularly the Central Massachusetts group. Ms. Haney is also interested in finding advisory councils that are run by young adults. **Dee Logan** sent her some information about DMH Young Adult Advisory Councils and some other options to review.
- **Heidi Holland**, Project Director at Success for Transition Age Youth, had a 1-hour conversation with **Maryann Davis** discussing a SAMHSA grant she is applying for that will focus on transition-age youth. Maryann speaks with Ms. Holland every other month to provide consultation and enhance collaboration.
- **Sue Plasse**, Director of Community Services DMH SE Area, contacted iSPARC on the behalf of the Brockton site. Brockton would like to implement a free outcome measure for their programs. They are looking for a measure that is applicable across all their programs (i.e., ACCS, PACT, Outpatient). **Marsha Ellison** gave Ms. Plasse feedback on the Recovery Assessment Scale (RAS), provided her with another tool to consider, and sent her some resources.
- **Alisa Gold**, Statewide DMH Youth/Young Adult Peer Coordinator, complimented the social media done by the Transitions ACR and expressed interest in learning more about our social media process. On March 10, 2021, **Jean Wnuk**, **Robin Tasca** and **Emma Narkewicz** met with Ms. Gold, Isabel Marchand, and Heidi Holland. They discussed how iSPARC and the Transitions to Adulthood Center for Research approach social media (e.g., use of tagging other organizations, hashtags, content strategy, using Buffer, etc.).
- **Ann Berube**, Family Support Specialist from Massachusetts PPAL, contacted iSPARC with a speaker request for their June 2, 2021 "Parents of Transition Aged Youth Meeting". **Maryann Davis** presented.

- **Maite Cintron Pastrana**, a PGY-1 Resident at UMMS, is working with **Dr. Xiaoduo Fan**. They would like to launch a peer mentorship program to connect college students with serious mental illness to other college students in Massachusetts that can support them. The program envisions providing mentors and mentees with diverse training opportunities to improve their professional and personal growth. On June 17, 2021, **Maryann Davis**, **Jon Delman**, and **Dori Hutchinson** met with **Devika Prasada**, who also works with Dr. Fan, to discuss important considerations in developing a peer mentoring program for college students with early psychosis. After the meeting, Dr. Delman sent the team additional resources and materials.
- **Meredith Ronan**, a clinical psychologist at the Worcester Recovery Center & Hospital (WRCH), contacted iSPARC on June 14, 2021, about how to proceed with patient data she has collected about positive behavior support interventions she has been using at WRCH. **Marianne Farkas** met with Dr. Ronan and assisted her with thinking through how to publish this data to communicate the successes and ensure impact.

## **Intensive Technical Assistance**

The TA/Consultation Program partnered with DMH to develop a Design Team of ten Adult Community Clinical Services (ACCS) provider personnel (e.g., clinicians, executives) to develop strategies that can enhance the implementation of the ACCS treatment planning approach. The Design Team met bi-weekly or monthly from October 2020 through June 2021. iSPARC trained the Design Team in the three primary drivers of good implementation of evidence-based practice to identify barriers to strong implementation of ACCS. The iSPARC team generated a list of barriers and the potential causes of each barrier with this group. The group determined that the primary barriers to providers using evidence-based screening and assessment instruments to develop treatment plans with fidelity were: (1) Hiring and retention; (2) coaching and supervision; (3) competency in the model by all members of the teams; and (4) need for better cross-system collaboration.

Following the identification of these primary barriers, the iSPARC team reviewed research literature for tested solutions or strategies to each of these barriers and facilitated the Design Team to identify key strategies that could be implemented within ACCS programs. This resulted in a list of over 20 strategies that could be designed and implemented with ACCS providers. After consultation with DMH, the group agreed to focus on **four key strategies** to develop and implement this year:

**Strategy 1: Develop an ACCS Hiring & Retention Interview Packet**

**Strategy 2: Develop a Peer Specialist & Recovery Coach Career Ladder, Supervisory Guidance and Bridging MH/Addiction Recovery**

**Strategy 3: Hold a Listening Session with DMH to propose solutions to gaps in filling the Licensed Alcohol and Drug Counselor (LADC) 1 position**

### Strategy 4: Develop an ACCS Orientation & Training Materials for all staff to be implemented by all provider agencies

By the end of this fiscal year, the iSPARC team began to develop these strategies in conjunction with the Design Team. In November 2021, the iSPARC team will begin initial implementation by working with providers in the Southeast region to implement these four strategies. They will evaluate and revise the materials as necessary and then roll out these tools to the remaining ACCS providers region by region.

## External Funding

The External Funding component of the program is developing infrastructure and resources to build iSPARC’s capacity to provide fee-for-service TA, training, and consultation. The program’s goal is to leverage the expertise of our faculty and staff members to generate revenue and build growth. The team convened the primary faculty who provide training and TA services several times over the course of the year. To generate more TA revenue iSPARC needs to have more faculty and staff available to assist with these projects.

In FY21, the TA Team hired a half-time program implementation specialist consultant - Mary Ann Preskul-Ricca. Ms. Preskul-Ricca has been assisting with ACCS for the first several months of working at iSPARC. In FY22, she will be ready to assist with generating TA contracts, assisting with the development of scopes of work, and providing project management to a few TA projects.

## Communications Highlights



iSPARC has developed state-of-the art dissemination strategies, including web-based and social media campaigns, to ensure that our work is disseminated as quickly and effectively as possible. The goal of this dissemination is to speed the translation of research findings about effective psychosocial services into actual practice in the community.

## FY21 By the Numbers

- iSPARC published 16 issue briefs and tip sheets (see Appendix B).
- iSPARC faculty and staff gave 124 presentations (international, national, and local) to a total of approximately 8,270 people.
- iSPARC websites received 31,818 visits from 24,427 unique users with 55,505 page-views.
- Product downloads from our websites and our [Psychiatry Information in Brief](#) and [Journal of Parent and Family Mental Health](#) e-journals totaled over 81,188 downloads—an increase of over 44% from last year (FY20 = 56,385).
- There were 3,865 downloads of our tip sheets in other languages (3,796 Spanish and 69 Vietnamese).
- There were 1,245 views of our American Sign Language translation videos on our YouTube Channel.
- Facebook pages reached 1,774 “likes” – an increase of 195 “likes” since last year (FY20 = 1,579).
- Our Facebook reach, or the number of people who saw any content from our pages or about our pages, for all our Centers was 127,733.
- Our Twitter pages had 1,825 followers – an increase of 395 followers (FY20 = 1,430).
- Our new LinkedIn page (started March 2021) had 281 page views and 64 followers.
- The Transitions to Adulthood Center for Research’s Instagram account had 238 followers.
- Our videos on YouTube have had 50,720 lifetime views, which is an increase of 6,088 views compared to last year (FY20 = 44,632).
- We had 10,360 members on the iSPARC mailing lists, an increase of 3,778 since last year (FY20 = 6,582).

## Highlights from Communications activities include:

iSPARC hosted the 2021 Annual DMH Research Centers of Excellence Conference on June 14, 2021. This was the first conference with our new sister center, the Center of Excellence for Psychosocial and Systemic Research at Massachusetts General Hospital. The theme for the 2021 conference was [How Stakeholder-Engaged Research Can Change Care Provision and Policy: An Inside Look at the Centers of Excellence](#). There were remarks from Brooke Doyle (Commissioner of DMH), overviews of both Centers, presentations from researchers from both Centers, and a panel presentation about how each Center engages persons with lived experience in their work. The Conference was held virtually with over 130 attendees, which included DMH staff, persons with lived experience, family members,



providers, and clinicians.

In addition to the individual presentations outlined below, in FY21, iSPARC sponsored these Massachusetts conferences and forums: **11th Annual Asian American Mental Health Forum; the 2020 Annual Raise the Bar HIRE! Conference;** and the **2020 NAMI Mass Annual Convention.**

	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
<i>August 2020</i>	<i>Melissa Anderson</i>	<i>Treating Trauma and Addiction in the Deaf Community</i>	<i>Mental Health Interpreter Training, Alabama Department of Mental Health</i>
	<i>Celine Larkin</i>	<i>Suicide Prevention in Acute Care Settings: Striving for Wraparound Care</i>	<i>Wisconsin Epic Users Group Meeting on Suicide Prevention</i>
	<i>Nancy Byatt</i>	<i>Increasing Access to Perinatal Mental Health Care by Building the Capacity of Front-Line Medical Providers</i>	<i>Texas Child Mental Health Care Consortium Meeting.</i>
<i>September 2020</i>	<i>Melissa Anderson</i>	<i>Leveraging Community Engagement to Design Deaf-Accessible Evidence-Based Therapies</i>	<i>September 2020 UMass Chan Medical School Department of Psychiatry Grand Rounds</i>
	<i>Gina Vincent</i>	<i>Racist Algorithms or Systemic Problems? Risk Assessments &amp; Racial Disparities</i>	<i>UMass Chan Medical School Law &amp; Psychiatry Seminar</i>
	<i>Nancy Byatt</i>	<i>Closing Gaps in Perinatal Mental Health Care: The Evaluating Lifelines4moms (ELM) Study</i>	<i>PCORI Annual Meeting's Plenary Session on Increasing Access to Perinatal Mental Healthcare: Health System, Workforce, and State Policy Approaches to Improving Outcomes</i>
	<i>Enola K. Proctor</i>	<a href="#"><u>Implementation Science: A Path to Improving Care</u></a>	<i>iSPARC &amp; PQHS Research Seminar</i>

	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
<i>October 2020</i>	<i>Gina Vincent</i>	<i>Racist Algorithms or Systemic Problems? Risk Assessment and Racial Disparities</i>	<i>DMH Certified Juvenile Court Clinicians Training</i>
	<i>Kathryn Sabella</i>	<i>How to Engage Young Adults in Clubhouses</i>	<i>Genesis Clubhouse, Inc.</i>
	<i>Melissa Anderson &amp; Alex Wilkins</i>	<i>Intro to Working with Deaf Sign Language Users in the Healthcare System</i>	<i>UMass Chan Medical School Language Access Clerkship</i>
	<i>Tiffany Moore Simas &amp; Nancy Byatt</i>	<i>How to Develop and Implement a Perinatal Psychiatry Access Program to Increase the Capacity of Front-line Providers to Address Perinatal Mental Health and Substance Use Disorders</i>	<i>2020 International Marcé Society for Perinatal Mental Health Biennial Scientific Meeting</i>
	<i>Colleen McKay</i>	<i>Update from the Program for Clubhouse Research</i>	<i>2020 USA Clubhouse Conference</i>
	<i>Jean Wnuk &amp; Dee Logan</i>	<i>Social Media: Recruiting, Listening, and Disseminating Knowledge</i>	<i>KTDRR's 2020 Virtual Knowledge Translation Conference</i>
	<i>Aaron Bergman &amp; Nancy Byatt</i>	<i>Working to Dismantle Racism &amp; Reduce Health Disparities While Integrating Care for Perinatal Mental Health Conditions into Maternal and Child Health Care Settings</i>	<i>Shades of You, Shades of Me Multicultural Maternal Mental Health Conference</i>

	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
<i>November 2020</i>	<i>Daniel Amante</i>	<i>The Smoking and Diabetes Entanglement. No ifs ands or Butts! 3 Reasons to Give Your Veterans Tt Quit: Smoking's Effects on COPD, Diabetes, and Cognitive Impairment</i>	<i>VISN 1: VA New England Healthcare System clinical providers</i>
	<i>Rajani Sadasivam</i>	<i>mHealth Interventions for Smoking and Tobacco Use Cessation webinar</i>	<i>Morehouse School of Medicine, HI-BRIDGE Solutions</i>
<i>December 2020</i>	<i>Celine Larkin</i>	<i>Cultural Tailoring of a Texting Intervention to Increase Uptake of Smoking Cessation Support Services in Vietnam</i>	<i>13th Annual Conference on the Science of Dissemination and Implementation in Health</i>
	<i>Colleen McKay &amp; Marsha Ellison</i>	<a href="#"><u><i>Career and Technical Education for Students with Emotional Disturbance</i></u></a>	<i>U.S. Department of Labor's Office of Disability Employment Policy (ODEP) SSI Youth Solutions initiative</i>
<i>January 2021</i>	<i>Sally Rogers</i>	<i>Recovery-oriented Initiatives at the Center for Psychiatric Rehabilitation: Projects and Lessons from over 40 Years</i>	<i>iSPARC iSPARC-IL</i>
	<i>iSPARC Family Advisory Board (FAB)</i>	<a href="#"><u><i>Tips and Tricks to Developing and Sustaining a Family Advisory Board webinar</i></u></a>	<i>iSPARC Webinar</i>
<i>February 2021</i>	<i>Nancy Byatt</i>	<i>Improving Maternal Mental Health Care Through Connection, Shared Vulnerability and Science</i>	<i>Department of Psychiatry and Behavioral Sciences, Northwestern University, Feinberg School of Medicine</i>

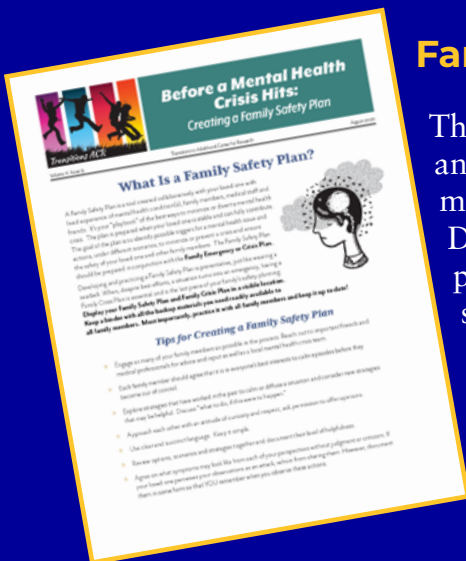
	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
	<i>Celine Larkin</i>	<i>Dr. Imposter or: How I Learned to Stop Worrying and Love Implementation Science</i>	<i>iSPARC iSPARC-IL</i>
	<i>Nancy Byatt</i>	<i>Improving Maternal Mental Health by Building the Capacity of Front-Line Medical Providers</i>	<i>2021 Texas Collaborative for Healthy Mothers and Babies (TCHMB) Annual Summit Meeting</i>
<i>March 2021</i>	<i>Melissa Anderson</i>	<i>Trauma Therapy in the Time of COVID-19</i>	<i>2021 ADARA Virtual Conference</i>
	<i>Gina Vincent</i>	<i>Racist Algorithms or Systemic Problems? Risk Assessments &amp; Racial Disparities webinar</i>	<i>Multi-Health Systems Inc. (MHS)</i>
	<i>Emily McCaffrey &amp; Debbie Nicolellis</i>	<i>HYPE: Helping Young Adults on the Path to Employment with “Adulting” Skills for School and Work</i>	<i>2021 DMH Central MA Success-Fest 5 Virtual Conference</i>
	<i>Melissa Anderson</i>	<i>Wellness and Self-Care for People with Hearing Loss</i>	<i>Hearing Loss Association of America, Plymouth Chapter</i>
	<i>Colleen McKay</i>	<i>Results from the 2020 Clubhouse Profile Questionnaire: Brain Injury Clubhouses</i>	<i>2021 International Brain Injury Clubhouse Association Meeting</i>
<i>April 2021</i>	<i>Maryann Davis, Gwen White, &amp; Johanna Bergan</i>	<i>Making Change Stick: Implementing Bolder Policies to Enhance the Lives of Young Adults</i>	<i>University of Maryland School of Social Work Training Institutes</i>
	<i>Melissa Anderson</i>	<i>Keynote: Deaf Mental Health Care: Where We’ve Been and Where We’re Going</i>	<i>Mental Health Symposium for Deaf/DeafBlind Youth</i>

	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
	<i>Celine Larkin</i>	<i>“Then What Do I Do?”: A Formative Evaluation of Zero Suicide Implementation in Integrated Primary Care Clinics</i>	<i>54th Annual Conference of the American Association of Suicidology</i>
	<i>Melissa Anderson</i>	<i>Deaf Qualitative Health Research: Leveraging Technology to Conduct Linguistically- and Socio-politically Appropriate Methods of Inquiry</i>	<i>UMass Chan PQHS Qualitative Methods Course</i>
	<i>Tiffany Moore Simas, Nancy Byatt, &amp; Arlene Remick</i>	<i>Addressing Perinatal Mental Health Conditions in Obstetric Settings</i>	<i>2021 ACOG Annual Clinical and Scientific Meeting</i>
	<i>Melissa Anderson</i>	<i>Signs of Safety</i>	<i>Massachusetts Statewide Quarterly Meeting of the Independent Living Programs for Deaf and Hard of Hearing People</i>
<b>May 2021</b>	<i>Melissa Anderson, Celine Larkin, &amp; Dee Logan</i>	<i>Common Challenges in Participatory Action Research: Setting the Stage for Stakeholder Engagement</i>	<i>iSPARC iSPARC-IL</i>
	<i>Celine Larkin</i>	<i>Working Together to Prevent Suicide: Lessons from Diverse Stakeholders in a Large Health Care System</i>	<i>2021 MA Suicide Prevention Virtual Conference</i>
	<i>Nancy Byatt</i>	<a href="#"><u><i>Closing Gaps in Perinatal Mental Health Care by Building the Capacity of Frontline Providers webinar</i></u></a>	<i>iSPARC Webinar</i>

	<i>Presenter</i>	<i>Presentation Title</i>	<i>Forum/Location</i>
	<i>Celine Larkin</i>	<i>Sexual and Physical Abuse History in Emergency Department Patients: Risk Factors and Associations with Suicidality</i>	<i>2021 Society for Academic Emergency Medicine Virtual Conference</i>
	<i>Nancy Byatt</i>	<i>Perinatal Mood and Anxiety Disorders: Detection, Assessment, and Treatment Until Symptom Remission</i>	<i>Baystate Medical Center's Department of Obstetrics and Gynecology</i>
<b>June 2021</b>	<i>Melissa Anderson, Alex Wilkins, &amp; Sheri Hostovsky</i>	<i>Deaf Community Engagement</i>	<i>UMass Chan PQHS Community Engagement in Research Course</i>
	<i>Paul Cherchia, Dorothy Hutchinson, Debbie Nicolellis, Vanessa Klodnick, &amp; Rebecca Johnson</i>	<a href="#"><u><i>Going Virtual: How 3 Young Adult Focused Services Pivoted to Virtual Platforms in 2020 webinar</i></u></a>	<i>iSPARC Webinar</i>
	<i>Melissa Anderson &amp; Alex Wilkins</i>	<i>Deaf ACCESS: Adapting Consent through Community Engagement and State-of-the-art Simulation</i>	<i>Paving the Way to Health Care Access Conference</i>
	<i>Melissa Anderson, Celine Larkin, &amp; Dee Logan</i>	<i>Community Engagement at iSPARC</i>	<i>UMass Chan PQHS Community Engagement in Research Course</i>
	<i>Marsha Ellison &amp; Colleen McKay</i>	<i>Career and Technical Education for Students with Emotional Disturbance paper presentation</i>	<i>U. S. Department of Labor Office of Disability Employment Policy (ODEP) SSI Youth Solutions Virtual Conference</i>
	<i>Kathryn Sabella</i>	<i>Creating Opportunities for Youth with Mental Illness: A Focus on Transition and Employment webinar</i>	<i>Youth Employment Solutions (YES!) Center</i>

# Stakeholder Engagement Program

The Stakeholder Engagement Program is co-led by **Melissa Anderson, Celine Larkin, and Dee Logan**. Partnership with persons with lived mental health experience, their family members, and the providers who serve them is critical to all phases of iSPARC research, training, and dissemination. A major part of this engagement is achieved through the guidance of three advisory boards—the Family Advisory Board (FAB), the Young Adult Advisory Board (YAB), and the Mental Health Experienced & Years of Understanding (MHE & YOU) Advisory Board.



## Family Advisory Board

The Family Advisory Board (FAB) is facilitated by **Marcela Hayes and Jean Wnuk**. The board met 10 times in FY21 and has 8 members, including a representative from Family Run Executive Director Leadership Association (FREDLA). In addition to providing consultation on proposed and existing research studies, the FAB published the tip sheet, *Before a Mental Health Crisis Hits: Creating a Family Safety Plan* , in FY21.

## Young Adult Advisory Board

The Young Adult Advisory Board (YAB) has two young adult Co-Chairs and 10 active members. In FY21, the YAB met nine times to review iSPARC knowledge translation projects and research projects. In collaboration with the iSPARC Communications team, the YAB assisted with developing 19 memes that are created by and for young adults with mental health conditions as part of our RRTC Memes project and provided feedback on our RRTC Comic project .



## Mental Health Experienced & Years of Understanding Advisory Board

The Mental Health Experienced & Years of Understanding Advisory Board (MHE & YOU) ran their 10th annual May is Mental Health Awareness Month campaign in May 2021. Recognizing that many people are struggling with their mental health during the COVID-19 pandemic, the team held a photo contest on “What is Your Favorite Healthy coping strategy you have used/found to help your mental health this year?” The MHE & YOU asked individuals to submit images on the theme of what healthy coping strategies they have used during this past year. All contest entries are posted on the [MHE & YOU’s website](#) [🔗](#).



## Other Stakeholder Engagement Activities

In addition to supporting the activities of the stakeholder advisory boards, in FY21, the co-leaders of the Stakeholder Engagement Program accomplished the following activities:



In response to the COVID-19 pandemic and the shift to remote work approaches, **Celine Larkin**, **Dee Logan** and **Melissa Anderson** published a tip sheet on [\*Top Tips for Running a Virtual Advisory Board\*](#) <sup>2</sup>. This tip sheet offers guidance about how to run an advisory council in a virtual modality. It also talks about the benefits and reduced barriers of hosting a virtual council instead of in person.






- Based on FY20 Participatory Action Research – Planning and Assessment Tool (PAR-PAT) results, the Stakeholder Engagement team identified core areas where iSPARC investigators struggled to meaningfully engage individuals with lived experience—specifically, grant proposal preparation, data analyses, and dissemination. To address these common gaps, **Melissa Anderson**, **Celine Larkin**, and **Dee Logan** presented an interactive workshop, *Common Challenges in Participatory Action Research: Setting the Stage for Stakeholder Engagement*, at the May 19, 2021 iSPARC Interactive Learning (iSPARC-IL) Series.
- **Sally Rogers** from the BU Center for Psychiatric Rehabilitation collaborated with the Stakeholder Engagement team to develop a training product on ethics in research that will be used to train advisory board members. **Melissa Anderson**, **Celine Larkin**, and **Dee Logan** created vignettes of the end users of the products to promote person-centered design of the product. Dr. Rogers drafted the script, which was revised by the Stakeholder Engagement Program with input from iSPARC’s Young Adult Advisory Board and Family Advisory Board. Filming of the video took place in June 2021. Editing and other parts of the training product will be completed in FY22.
- Throughout FY21, the Stakeholder Engagement team worked to develop a new advisory board for persons with lived experience of a mental health condition. Recruitment materials and member responsibilities were developed. Recruitment for the new board has begun in FY22.

Across iSPARC, FY21 highlights of contributions from persons with lived experience include:



In July 2020, iSPARC published the tip sheet, [\*Should I Attend College in the Fall? Questions for Students with Mental Health Conditions to Consider\*](#) <sup>2</sup>, which was conceived and co-written by one of our Family Advisory Board facilitators. This tip sheet presents questions that are intended to help students with mental health conditions, their supporters, and loved ones make decisions about whether the student should return to college in the fall.

- The Family Advisory Board’s tip sheet, [\*Before a Mental Health Crisis Hits: Creating a Family Safety Plan\*](#) , was published in **August 2020**. A Family Safety Plan is a tool created collaboratively with a loved one with lived experience of mental health condition(s), family members, medical staff, and friends. It is a family’s “playbook” of the best ways to minimize or divert a mental health crisis.
- In **October 2020**, the Stakeholder Engagement Program met with members of Edwin Boudreaux’s team to discuss opportunities for participatory action research with individuals affected by suicide as part of a NIMH P50 focused on leveraging technology for suicide prevention. They discussed the potential development of advisory boards and hiring of a community consultant on upcoming studies of suicide prevention in healthcare settings.
- In **January 2021**, **Marcela Hayes, Jean Wnuk, and Irene Grzybowski** presented the webinar [\*Tips and Tricks to Developing and Sustaining a Family Advisory Board\*](#) . This webinar was co-presented by iSPARC’s Family Advisory Board co-facilitators and one board member. The webinar discussed the purpose and the value of utilizing Stakeholder Engagement Groups. They shared tools for successful recruitment of board members and strategies to keep members engaged, even when meetings are 100% virtual. They described the successes and challenges they have experienced with our Family Advisory Board.
- From **February 2021 through May 2021**, Deaf Community Advisor, **Sheri Hostovsky**, presented an online educational series on Facebook - [\*Trauma and Addiction / Safety and Recovery\*](#) .
- In **May 2021**, **Melissa Anderson’s** research team hired four Deaf Community Advisors for their new grant, *Sign Here: How to Conduct Informed Consent with Deaf Individuals* (NIDCD R21). They hired Nayo Lim Franck, Reena Banerjee, Felicia McGinnis, and Rhys McGovern to guide the study. Across the two-year project, these Deaf Community Advisors will work remotely (Zooming in both nationally and internationally) to help the team design focus groups, analyze and interpret qualitative data, prepare for filmmaking, and run a pilot clinical trial.
- From **May 2021 to August 2021**, **Celine Larkin** co-led the development and teaching of a semester-long course (CTS608 Community Engagement in Research) for graduate students in the Department of Population and Quantitative Health Sciences at UMass Chan Medical School:

  - **Melissa Anderson, Alex Wilkins, and Sheri Hostovsky** were guest lecturers for this course in **June 2021** and presented about *Deaf Community Engagement*.
  - **Melissa Anderson, Celine Larkin, and Dee Logan** were guest lecturers for this course in **June 2021** where they presented about *Community Engagement at iSPARC*.



- In **June 2021**, **Melissa Anderson** and **Alex Wilkins** presented *Deaf ACCESS: Adapting Consent through Community Engagement and State-of-the-art Simulation* at the 2021 Paving the Way to Health Care Access Virtual Conference.
- In **June 2021**, **Melissa Anderson**, **Tim Riker**, and **Alex Wilkins** published “[Application of the truth and reconciliation model to meaningfully engage deaf sign language users in the research process](#)” in *Cultural Diversity & Ethnic Minority Psychology*.

# Diversity, Equity, and Inclusion at iSPARC

Under the guidance of **Melissa Anderson** and the iSPARC Workforce Enrichment Program, each iSPARC Program promotes racial and ethnic equity in the work that they undertake. Examples include consulting with diversity experts to cultivate a more inclusive workforce, specifically recruiting interns and early career researchers from historically underrepresented groups and supporting team members to participate in cultural humility training.

## **Racial and Ethnic Equity Evaluation Plan**

To effectively capture these efforts and consistently measure progress over time, in FY20 iSPARC, the MGH COE, and DMH began developing a Racial and Ethnic Equity Evaluation Plan for use across both Centers of Excellence. DMH engaged Ms. Alexandra Alden, a Northeastern University graduate student intern, to identify available evaluation instruments and construct a framework for evaluating racial equity for both COEs. Ms. Alden presented this work to DMH and both COEs in a comprehensive report entitled “The Racial and Ethnic Equity Evaluation Plan for the Centers of Excellence: A Department of Mental Health Initiative.”

Across FY21, iSPARC, the MGH COE, Margaret Guyer-Deason, and Kathy Sanders worked together to draw from Ms. Alden’s report and refine a streamlined assessment battery, feasible procedures for conducting these assessments, and developed specific targets for each Center. This process also involved input from BIPOC peer consultants at the MGH COE. This collaborative process resulted in a comprehensive evaluation plan across four primary domains:

1. Equitable Research
2. Equitable Continuous Quality Improvement
3. Equitable Stakeholder Engagement

#### 4. Equitable Center Operations and Workforce Development

In **February 2021**, at the completion of the evaluation plan's development, it was determined that each Center would begin to implement aspects of the plan that made the most sense within their unique Center and institutional context. At iSPARC, we chose to implement three subdomains within Equitable Center Operations and Workforce Development:

- (1) **Recruitment and Hiring:** As part of the efforts described above, an Equitable Recruitment and Hiring Checklist was developed. In FY21, iSPARC began piloting this tool as hiring opportunities arose by providing a copy to hiring managers. Future goals in this subdomain include the staffing of an Equitable Recruitment and Hiring Team, whose members will provide iSPARC faculty and staff with concrete resources and support to increase the rate of recruitment of BIPOC individuals to the iSPARC workforce.
- (2) **Overall Demographic Data and (3) Work Culture:** We continued to collect annual data on the diversity, inclusion, and engagement of our Center's faculty and staff. FY21 strengths and areas for improvement are summarized below.

#### FY21 Strengths

##### *Workforce Diversity*

- 25% of iSPARC staff and faculty identify as an individual with a disability, as **compared to only 4%** of the Worcester County workforce.
- 52% of staff and faculty identify as an individual with lived mental health experience.
- 72% of staff and faculty identify as a family member of a person with lived mental health experience.

##### *Inclusion and Engagement*

- More than **90%** of staff and faculty reported that “I feel that my work contributes to the mission of iSPARC.”
- 83% of staff reported that they had “opportunities at iSPARC to develop professionally” in the past year. *This was a 15% increase from our 2020 survey!*
- 64% of staff reported that they “receive support for working with diverse groups and working in cross-cultural situations.” *This was a 19% increase from our 2020 survey!*

## FY21 Areas for Improvement

### *Workforce Diversity*

- 83% of iSPARC staff and faculty identify as White, non-Hispanic/Latino. This finding is consistent with 84% within the Worcester County population; however, our Center’s goal is to oversample from populations that have been traditionally underserved and underrepresented.
- Only 7% of the iSPARC workforce identifies as a member of the Baby Boomer generation (birth years 1945 – 1964).

### *Inclusion and Engagement*

- Less than 30% of staff and faculty reported that they are “confident that [their] accomplishments are compensated similar to others who have achieved their goals.”
- Less than 60% of staff and faculty reported that they “believe iSPARC manages diversity effectively.”

To address FY21 areas for improvement, iSPARC has continued to receive consultation from Margarita Alegría, PhD, Chief of the Disparities Research Unit at the Massachusetts General Hospital and Professor in the Departments of Medicine and Psychiatry at Harvard Medical School. Based on Dr. Alegría’s guidance, one major activity was undertaken in FY21—the implementation of simulation-based cultural humility training program, described below.

## iSPARC Cultural Humility Training Program

iSPARC collaborated with the UMass Chan Medical School interprofessional Center for Experiential Learning and Simulation (iCELS) to design a 4-hour, simulation-based cultural humility training tailored for iSPARC staff and faculty. The training program was initially piloted with participants **Melissa Anderson** and **Amanda Costa** in October 2020; feedback from this pilot informed a final training program, which was delivered virtually to three iSPARC cohorts in the spring of 2021. In total, 24 individuals from the iSPARC workforce participated in the cultural humility training.



Feedback from the training sessions was highly positive. **All 24 participants agreed or strongly agreed that:**

- This workshop enhanced my communication skills.
- I learned something new about my own biases through this workshop.
- I would recommend this workshop to other teams.
- I felt that I was treated with respect.

## Qualitative evaluation results noted:

- | *“ Super helpful workshop. I really enjoyed the opportunity to get feedback in a supportive environment!*
- | *“ I learned that I definitely have implicit bias. I also learned that many of my strengths in communication are pretty good, but I should be mindful of when I get to "imparting knowledge" mode.*
- | *“ ALL aspects of our communication are important - verbal, non-verbal, implicit, and explicit. And that I may bring with me feelings and bias that I am unaware of.*
- | *“ I found the simulation very helpful, especially getting the opportunity to redo the situation and apply constructive feedback.*
- | *“ Making mistakes is how you learn, giving feedback is important.*

## DEI in Communications Activities



In FY21, there were a total of 3,865 downloads of our written briefs and tip sheets in other languages (3,976 Spanish; 69 Vietnamese).



There were 1,245 total video views of our American Sign Language translation products.

# Successful Collaborations with DMH and Other State Agencies

Partnerships are more critical than ever, given the increasingly collaborative and multidisciplinary nature of mental health services research. As described in the Technical Assistance/Consultation and External Funding Program section on [page 21](#)), one of the key components of iSPARC's current Research Center of Excellence is our provision of intensive and basic technical assistance to DMH and other state agencies. As such, many of our significant collaborations are described in that section. In addition to those technical assistance-related collaborations, iSPARC faculty and staff successfully collaborate with DMH and other state agencies to further the missions of these organizations and to better meet the needs of the citizens of the Commonwealth. Highlights of such collaborations are outlined in this section.

## **Helping Youth on the Path to Employment (HYPE) Course**

The course is based on the Helping Youth on the Path to Employment (HYPE) career development intervention developed by **Michelle Mullen**. The HYPE manual articulates support strategies to help young adults return to or maintain meaningful roles in school and work. The HYPE Team implemented a 12-week HYPE Course for any young adult in MA with lived experience who is interested in working toward school or work goals. The course is co-facilitated by young adults with lived experience to provide peer-to-peer support and learning opportunities.

During FY21, iSPARC's contract on Transition Age Youth & Young Adult Career Development & Peer Trainings with DMH's Division of Child, Youth and Family Services the three courses and all work on the project were conducted virtually due to the COVID-19 pandemic. The HYPE team made significant adjustments to the HYPE Course curriculum in August 2020, adding several elements based on the feedback of both participants and the young adult facilitator. The HYPE Team began a sustainability effort to provide more capacity within Massachusetts to offer the HYPE Courses. In FY21, the HYPE team partnered with YouForward to train four of their staff on how to deliver the HYPE courses. YouForward is an organization that supports young adults ages 16 to 25 in Lawrence and Haverhill who are experiencing mental health challenges. YouForward will launch their own HYPE courses in August 2021.



In October 2020, the HYPE team also began to evaluate the HYPE courses. Participants were asked to fill out evaluations at three time periods: pre-course, post-course during session 6, and a 3-month follow-up.

The HYPE team continues to work to finalize the Facilitator's Guides for all 3 courses, making edits based on experience this year and on feedback received by YouForward. Editing and finalization of HYPE Materials for use in future agency training will continue in FY22.

## Healthy Transitions Evaluation Project (HT2)

In FY20 Alexis Henry and Kathryn Sabella were awarded a 5-year, \$360,000 sub-contract for the MA DMH's Healthy Transitions Initiative, funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The UMass Donahue Institute is the lead agency, contracting with researchers from the UMMS Division of Commonwealth Medicine carrying out all evaluation activities.

During FY21, the HT2 evaluation team met with Sue Wing and the HT2 providers on a regular basis. The COVID-19 pandemic slowed the engagement of new young adults in HT2 activities. Virtual groups were started at the sites and as time went on the sites were able to see young adults in-person again. The evaluation team collaborated with the providers at each site to develop new evaluation data tools that can be administered remotely and capture new remote activities that are being conducted. After the data collection tools were finalized, they were put into an electronic database and an online user guide was developed for all providers. Kathryn Sabella and Betsy Edes, DMH Project Director, met weekly to streamline data collection tools and processes.



## The Central Massachusetts Tobacco-Free Community Partnership

In FY21, Colleen McKay became the Project Coordinator of the Central Massachusetts Tobacco-Free Community Partnership. The Central Massachusetts Tobacco-Free Community Partnership supports communities' efforts to lower smoking prevalence and

exposure to secondhand smoke.

Tobacco use is the #1 cause of preventable death and disability in Massachusetts. More than 9,000 residents die every year from the effects of tobacco – one person every hour of every day. Thousands more are disabled by tobacco use, suffering with chronic illness and pain.

The Central Massachusetts Tobacco-Free Community Partnership program enhances state and local tobacco control efforts by exposing tobacco industry tactics, mobilizing the community to support and adopt evidence-based policies, and changing social norms that prevent youth from starting to smoke and help current smokers to quit. These comprehensive efforts reduce death and disability from tobacco use. Funded by the Massachusetts Department of Public Health Tobacco Cessation and Prevention Program, the Community Partnership serves as a resource for local coalitions, health and human service agencies, municipalities, and workplaces on tobacco intervention efforts.

Program staff are available to conduct educational presentations on tobacco prevention policy; effective tobacco cessation resources; the effects of secondhand smoke on children and adults; and tobacco industry tactics that target young people.

## Deaf-Accessible Question. Persuade. Refer. (QPR) Training



In FY21, **Melissa Anderson** collaborated with DMH and filmmaker Bryan Horch to create a Deaf-accessible version of the "Question. Persuade. Refer." suicide-prevention training. Collaborative script writing occurred throughout FY21, which relied on narrative storytelling as a key teaching strategy. Professional filmmaking took place in August and September 2021.

The filmmaking team focused on creating an authentic final training product by hiring Deaf actors and film directors with lived experience of depression and suicide attempts.

# Faculty Development Program

The iSPARC Faculty Development Program is co-led by **Stephenie Lemon**, **William McIlvane**, and **Kathryn Sabella**. The primary aims of this program are to support iSPARC faculty members' overall professional development goals, as well as increase their chances of successfully obtaining funding for their programs of research. The main activities of this program are outlined below.

## **Faculty Coaching**

Each year, iSPARC faculty members are offered the opportunity to meet with seasoned faculty (e.g., Stephenie Lemon, William McIlvane, Maryann Davis) to obtain individualized guidance on their professional development path. Coaches review the faculty member's curriculum vitae and, during an in-person meeting, provide their insights on areas of relative strength and areas for targeted growth.

## **Professional Development Training Opportunities**

In addition to the individualized coaching described above, the Faculty Development Program coordinates group training opportunities based on faculty members' shared professional development goals. These goals are identified using the nominal group technique, which is a structured variation of a small-group discussion to reach consensus. The structured process prevents the domination of the discussion by a single person, encourages all group members to participate, and results in a set of prioritized solutions or recommendations that represent the group's preferences.

In FY21, iSPARC faculty identified leadership skills as a priority area for professional development. As such, both faculty and senior staff members began participating in Dare to Lead training beginning in July 2021. Based on the research of Dr. Brené Brown, Dare to Lead is an empirically based courage-building program that asserts that the world is in need of braver leaders. In the absence of courageous leadership, we are plagued with problems such as: Inability to have Tough Conversations; Difficulties with Inclusivity, Diversity, and Equity; Lack of Innovation & Creativity; Cultures full of Shame & Blame; Poor Work/Life Balance; etc.

The most significant finding from Brené's latest research is that courage is a collection of four skill sets that are teachable, measurable, and observable. The Dare to Lead program focuses on developing these four courage-building skills:

1. Rumbling with Vulnerability
2. Living Into Your Values
3. Braving Trust
4. Learning to Rise from Failures

The Dare to Lead program delivers new language, operationalized values, and practical tools and frameworks that help leaders and teams better navigate a rapidly changing world. Trainees learn the research behind Dare to Lead and applications to catalyze a movement of courage, trust and resiliency within their personal lives, workplaces, and communities.

## **iSPARC Seed Grant**

The purpose of the iSPARC Seed Grant is to provide members of iSPARC and their collaborators with seed money to conduct research activities that will bolster a specific federal grant application. Maximum funding in the amount of \$10,000 is made for one award for a 12-month period.

The proposal can focus on an area of study that is new to the researcher or can be an extension of an existing study (e.g., gather data from a different participant population, add a follow-up data collection phase to an existing baseline sample). The intention of iSPARC seed grants is to enhance the researcher's likelihood of success for obtaining federal research grant funding in an area that matches their career goals and the mission of iSPARC.

Awardees are required to receive ongoing mentorship from a senior member of the iSPARC faculty. Preference is given to projects that address underrepresented populations and/or implementation science themes. Ideally, the research should also map onto the MA Roadmap to Behavioral Health Reform.

## iSPARC Grant Support Team

During FY21, the team met regularly to provide iSPARC faculty with scientific and content expertise on their developing grant proposals to strengthen their submissions and increase likelihood of funding. The twice-monthly meetings are routinely attended by iSPARC faculty and staff with expertise in a variety of research topics and methodologies. Standing members include William McIlvane, Stephenie Lemon, Kathryn Sabella, Melissa Anderson, Dee Logan, Gina Vincent, Dan Amante, Morgan Rao, Bo Wang, and Alex Wilkins.

All iSPARC investigators are strongly encouraged to meet with the Grant Support Team as they are working on their letters of intent and grant proposals, to ensure developing research ideas receive as much input and review as possible prior to submission. During these meetings, investigators receive feedback on all aspects of their research and evaluation grants, including research questions, background and rationale, scientific methods, and level of community engagement. Faculty and staff can select when their grants are reviewed, and individual grants can be reviewed multiple times throughout the development process.

In addition to assisting with grant proposal development, the Grant Support Team also helps with the submission process and tracks grant proposals that have been reviewed, submitted, and funded.

In FY21, the Grant Support Team reviewed a total of 8 grant proposals across 16 meetings, 2 of which have been funded thus far.

- Behavioral Health Outcomes in ASD: Potential and Empowerment (BE HOPE) – NIH P50 – Jean Frazier
- Bridge for Resilient Youth in Transition (BRYT): Developing Supports for High School Students Returning to School after an Extended Absence due to Mental Health Challenges – IES – Kathryn Sabella
- The Clubhouse Model as an Intervention to Address Social Isolation and Loneliness Among People with Severe Mental Illness – NIDILRR DRRP – Colleen McKay
- Designing Deaf-MET: A Deaf-Accessible Pre-Treatment for Alcohol Use Disorder – NIH K – Alex Wilkins (*funded FY22*)
- Electronic Nicotine Delivery Systems (ENDS) – NIH R01 – Maryann Davis & Rajani Sadasivam
- Perinatal Psychiatry Access Programs: Evaluating Patient-, Provider-, and Program-level Outcomes Across the US – CDC SIP – Nancy Byatt (*funded FY22*)

- Thriving Campus; Improving College Student Access to Mental Health Services – STTR – Maryann Davis
- Translating Evidence to Support Transitions – Career and Technical Education for Students with Emotional Disturbance (TEST-CTE) – IES – Marsha Ellison

# Fulfillment of the DMH Contract

Fiscal Year 2022 is off to a great start. Several new grants have already received funding, and we continue to explore innovative opportunities to help us diversify our funding portfolio. We continue our commitment to the shared DMH and iSPARC 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 partnering with DMH!

## Research Activity

These numbers represent both ongoing and new iSPARC research during Fiscal Year 2021:

Performance Measure	Accomplished in Fiscal Year 2019	Accomplished in Fiscal Year 2020	Accomplished in Fiscal Year 2021
Number of research projects approved by DMH <sup>1</sup>	28	28	38
Number of research proposals submitted & approved by an IRB <sup>2</sup>	15	16	23
Number of grants submitted <sup>3</sup>	30	24	22
Number of grants approved for funding <sup>4</sup>	9	14	9

1. The number of ongoing iSPARC research projects during the fiscal year.

2. The total number of projects that had IRB approval during the fiscal year.

3. The total number of grant applications that iSPARC 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.

4. 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 iSPARC 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 2021 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 iSPARC, the UMass Chan Department of Psychiatry, and the UMass Chan Medical School).

Performance Measure	Accomplished in Fiscal Year 2019	Accomplished in Fiscal Year 2020	Accomplished in Fiscal Year 2021
External funding obtained	\$9,922,840	\$8,224,124	\$10,565,941

## Summary of Publications

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

Performance Measure	Accomplished in Fiscal Year 2019	Accomplished in Fiscal Year 2020	Accomplished in Fiscal Year 2021
Number of papers submitted & accepted for publication	105	118	116 <sup>5</sup>

5. This number does not include self-published tip sheets and research briefs.

## Summary of Other Dissemination Efforts

iSPARC continued to conduct trainings and give presentations at a wide variety of venues throughout Fiscal Year 2021. The following numbers represent the efforts of iSPARC to distribute and disseminate information to DMH state and provider clinical workforce as well as individuals with lived experience and family members.

Performance Measure	Accomplished in Fiscal Year 2019	Accomplished in Fiscal Year 2020	Accomplished in Fiscal Year 2021
Number and types of forums used by iSPARC to share information with DMH State and provider clinical workforce, individuals with lived experience & family members	54	53	33
Number of state and provider workforce members, individuals with lived experience and family members with whom research information was shared <sup>6</sup>	3,651	4,281	1,887 <sup>7</sup>

6. This represents the number of individuals attending iSPARC faculty and staff presentations at conferences, webinars, and trainings in Massachusetts during FY21. This does not include Massachusetts individuals accessing research information through other iSPARC mechanisms (i.e., website, listservs, and social media).

7. Due to the ongoing COVID-19 pandemic, the number of state and local dissemination opportunities were limited in FY21. Those events that did occur were virtual and seemed to have less attendance. iSPARC faculty and staff presented nationally to more than 8,500 individuals in FY21.

# Appendix A

NEW iSPARC FUNDED RESEARCH

**Title:** Rehabilitation Research and Training Center (RRTC) on Health and Function of People with Psychiatric Disabilities

**Site PI:** Kathryn Sabella, PhD

**Funding:** National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)

**Budget:** \$96,625

**Time Frame:** 9/1/2020-8/31/2025

**Description:** Site Principal Investigator, Co-Investigator on one research study: *Pivot Toward Wellness: Impact of Disrupted Life Transitions on Young Adults' Health Status & Well-Being*. A mixed methods study of youth and young adults, age 16-25, to ascertain their health and behavioral health status, service use and need, and prevalence of disrupted life transitions in the aftermath of the pandemic and global recession.

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**Title:** Developing Implementation and Fidelity Monitoring Tools for the Bridge for Resilient Youth in Transition (BRYT) Program

**PI:** Kathryn Sabella, PhD

**Funding:** National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)

**Budget:** \$598,632

**Time Frame:** 9/1/2020-8/31/2023

**Description:** A development field-initiated project to further specify the BRYT program, a transition program to help high school students returning from an extended absence due to mental health, and develop a cohesive BRYT implementation package.

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**Title:** Center on Knowledge Translation for Employment Research (CeKTER)

**PIs:** Marianne Farkas, ScD and Marsha Langer Ellison, PhD

**Funding:** National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)

**Budget:** \$980,036

**Time Frame:** 9/1/2020-8/31/2025

**Description:** The goal of this project is to establish the Center on Knowledge Translation for Employment Research (CeKTER) and to generate new materials and methods for greater utilization of knowledge translation in services and policies to successfully promote employment outcomes for people with disabilities. The Center utilizes the expertise of an advisory council comprised of professionals in implementation science, representatives of national associations of people with disabilities, as well as prominent NIDILRR disability employment researchers. Center research activities include: (1) conducting a scoping review of NIDILRR employment research; (2) comparatively testing the effectiveness of dissemination modalities; (3) developing and evaluating a capacity building strategy to strengthen knowledge translation expertise; (4) delivering this strategy for broader utilization; (5) co-producing numerous and varied informational products with researchers and stakeholders; (6) broad dissemination of these products;

and (7) conducting communities of practice with NIDILRR employment research grantees. Outcomes of these research activities include: (1) increased expertise among NIDILRR grantees in using knowledge translation strategies to improve adoption and use of disability employment research; (2) increased readiness for person, program, or policy changes that support disability employment; (3) increased shared knowledge among NIDILRR grantees; and (4) improved employment outcomes among people with disabilities. Center products include: research syntheses and briefs; plain language summaries; best practice guidelines; varied information products including tip sheets, briefs, webinars, TED talk, and Ask the Expert sessions; CeKTER website; a technical assistance portal; a tailored strategy for developing expertise in knowledge translation strategies and a resulting toolkit and coaching guide; a knowledge translation training academy; and a web-library of courses on knowledge translation.

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**Title:** Comparative Effectiveness of Perinatal Psychiatry Access Program-COVID Supplement

**PIs:** Thomas I. Mackie, PhD, MPH & Nancy Byatt, DO, MS, MBA

**Funding:** Patient-Centered Outcomes Research Institute (PCORI) - COVID-19-Related Enhancement

**Time Frame:** 10/1/2020-9/30/2022

**Description:** COVID-19 has increased mood and anxiety disorders during and after pregnancy. It has also changed the delivery of health care. In response, Perinatal Psychiatry Access Programs have created new approaches to help providers manage mood and anxiety disorders during and after pregnancy. With this enhancement, the research team will:

- Learn what affects the ability to identify and treat mood and anxiety disorders during and after pregnancy;
- Collect and sort the new approaches used by Perinatal Psychiatry Access Programs across the nation; and
- Assess the feasibility and relevance of the approaches based on input from patients, providers, and community partners.

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**Title:** Optimizing Supervision and Service Strategies to Reduce Reoffending: Accounting for Risks, Strengths, and Developmental Differences

**PI:** Gina Vincent, PhD

**Funding:** Department of Justice, National Institute of Justice

**Budget:** \$600,000

**Time Frame:** 1/1/2021-12/31/2023

**Description:** The purpose of this project is to partner with three juvenile justice agencies in Pennsylvania, Virginia, and Wisconsin to (1) improve their capacity to accurately measure reoffending and to use data to optimize supervision practices; (2) identify youth characteristics (risk and protective factors) that most strongly predict reoffending; and (3) determine whether strengths-based services in addition risk-reduction services lead

to the lower rates of reoffending. This study will gather both retrospective (N > 30,000) and prospective (N > 3,500) samples of youth who receive a risk-needs assessment at probation intake and follow them for 1.5 to 3-years to measure re-offending. The study will obtain high quality administrative data ([re]assessments of risk- needs, supervision, and reoffending), and add self-report measures of protective factors and enhanced service utilization data systems. It will use multiple measures of reoffending (e.g., new petitions and new convictions for serious reoffending) over two time-points (during and after supervision). The analytic plan institutes survival analyses that account for time at-risk to assess how much rates of reoffending differ across specific risk and protective factor domains, while controlling for the effects of supervision and services, and whether strengths-based services add value to risk-reduction services to affect reoffending measures, while controlling for selection effects using a propensity-weighting approach. The study will also assess whether age moderates predictive domains and service responsivity. This study will yield a model that will be widely disseminated via a policy brief for better underdoing and using assessment, service, supervision, and re-offense data to shape policy and practice decisions.

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**Title:** Lifeline for Moms Network (Year 3)

**PI:** Nancy Byatt, DO, MS, MBA

**Funding:** Perigee Fund

**Budget:** \$545,000

**Time Frame:** 2/13/2021-2/12/2022

**Description:** The Perigee Fund awarded Nancy Byatt and her team a third year of funding to continue their work developing a multistate peer network of Perinatal Psychiatric Access Programs. The Lifeline4Moms Network provides a platform for evaluating and innovating maternal mental health care, leading to vastly improved outcomes for mothers, their children, and their families. The team plans to continuously improve the quality, impact, and durability of Perinatal Psychiatry Access Programs throughout the country. The goals of this network are (1) Facilitate peer learning and sharing of resources among aspiring, emerging, and established Perinatal Psychiatry Access Programs, and relevant stakeholders, across the United States; and (2) Facilitate quality improvement and program evaluation within and across programs.

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**Title:** Sign Here: How to Conduct Informed Consent with Deaf Individuals

**PI:** Melissa Anderson, PhD

**Funding:** National Institute on Deafness and Other Communication Disorders

**Budget:** \$458,692

**Time Frame:** 3/1/2021-2/28/2023

**Description:** The U.S. Deaf community – a minority group of more than 500,000 people who use American Sign Language (ASL) – is one of the most understudied and underserved populations within our nation’s healthcare system. Reasons for this underrepresentation include lack of language access and feelings of mistrust toward the medical community. In this study Dr. Anderson and her team will refine and test two

training interventions – one for healthcare providers and one for clinical researchers – that teach professionals how to interact with Deaf individuals skillfully and sensitively, especially during the informed consent process. Results will inform a large national study that will test the effectiveness of the training interventions in real-world academic and clinical settings with a range of available training resources. The intervention that will be tested and adapted was designed through a two-year collaboration between UMass Chan Medical School and the local Deaf community – community forums, focus groups, and an intervention development team inclusive of Deaf researchers, filmmakers, and laypeople. The resulting prototype intervention a 30-minute training film titled *Sign Here: How to Conduct Informed Consent with Deaf Research Participants* has not yet been refined based on critical input from the target audience (hearing clinical research personnel); not been formally evaluated for efficacy; nor adapted to meet the needs of hearing healthcare providers and medical/nursing students. They propose to conduct a series of focus groups with key stakeholders to refine, expand, and finalize two distinct versions of the Sign Here training film one for clinical researchers and one for healthcare providers. After the final interventions are complete, they will conduct two concurrent pilot randomized controlled trials (RCTs) to test the feasibility, acceptability, and preliminary efficacy of the two training interventions. 40 research personnel and 40 healthcare providers will be randomized to receive (1) the version of the Sign Here training film tailored to their professional role or (2) an “intervention as usual” condition (i.e., standard NIH guidance on how to communicate informed consent to Deaf or hard-of-hearing individuals). Results will potentially validate products of immediate value: two highly-accessible, easy-to-disseminate training films to promote the inclusion of Deaf individuals in our nation’s healthcare system and clinical research endeavors. Results will also inform the design of a large, multi-institution study that will explore the real-world scalability of the Sign Here training interventions in academic medical schools across the nation. The long-term objectives of our research program are to increase the number of Deaf people engaged as research participants, as well as increase the number of Deaf people engaged as research team members.

**Title:** Juvenile Diversion Pilot Project

**PI:** Gina Vincent, PhD.

**Funding:** Commonwealth of Massachusetts / Office of the Child Advocate

**Budget:** \$44,097

**Time Frame:** 6/2021-11/2022

**Description:** This is a technical assistance project to assist the MA Office of the Child Advocate and MA Department of Youth Services develop a mental health screening and risk/needs for reoffending screening protocol for pre-file youth diversion in Massachusetts. Three sites will become part of this Diversion Lab and will receive technical assistance and training.

**Title:** Dangerousness Training and Advancing Pretrial Reform in Massachusetts

**PI:** Gina Vincent, PhD

**Funding:** Commonwealth of MA / Office of the Commissioner of Probation

**Budget:** \$133,865

**Time Frame:** 7/1/2021-6/30/2024

**Description:** The goal of this initial one-year project with a potential two-year extension is to assist the Massachusetts Probation Service and its criminal justice partners to establish research-informed policies and practices to define and identify pretrial individuals who are likely to be dangerous in the future. This project involves technical assistance, training, and instrument development.

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# Appendix B

iSPARC DISSEMINATION PRODUCTS

## Written Products

- [How Young Adults Can Manage Loss of Income During the COVID-19 Pandemic](#)
- [Should I Attend College in the Fall? Questions for Students with Mental Health Conditions to Consider](#)
- [School Mental Health Promotion: Supporting Children Impacted by Family and Parent Mental Health Conditions](#)
- [Before a Mental Health Crisis Hits: Creating a Family Safety Plan](#)
- [School that Makes Sense Cent\\$ Taking CTE Courses](#)
- [Adulging Shorts: An Interview Tale, PART 1](#)
- [Adulging Shorts: An Interview Tale, PART 2](#)
- [Promoting the Health of Parents & Children: Addressing Perinatal Mental Health by Building Medical Provider Capacity Through Perinatal Psychiatry Access Programs](#)
- [Resiliency and the COVID-19 Pandemic: The Hidden Strengths of Those with Lived Experience of Mental Health Conditions](#)
- [Adulging Is Hard: Understanding the College-to-Career Transition and Supporting Young Adults' Emotional Wellbeing](#)
- [Top Tips for Running a Virtual Advisory Board](#)
- [Supporting Student-Led Transition Planning for Students with Emotional Disturbance](#)
- [Partnering with Community Agencies in Transition Planning for Students with Emotional Disturbance](#)
- [Ways to Mind Your Mental Health in Challenging Times: Tips for Youth](#)
- [Accessibility 101: A Researcher's Guide to Making Content Accessible](#)
- [Brain Injury Clubhouses](#)

## Webinars

- [Tips and Tricks to Developing and Sustaining a Family Advisory Board](#)
- [Closing Gaps in Perinatal Mental Health Care by Building the Capacity of Frontline Providers](#)
- [Going Virtual: How 3 Young Adult Focused Services Pivoted to Virtual Platforms in 2020](#)

## Research Seminar

- [Implementation Research for Mental Health Services: A Path to Improving Care](#)

# Appendix C

NEW iSPARC PUBLICATIONS

- Adams, Z. M., Ginapp, C. M., Price, C. R., Qin, Y., Madden, L. M., **Yonkers, K.**, & Meyer, J. P. (2021). "A good mother": Impact of motherhood identity on women's substance use and engagement in treatment across the lifespan. *Journal of Substance Abuse Treatment*, 130, 108474.
- Adams, W. E., **Rogers, E. S.\***, Edwards, J. P., Lord, E. M., McKnight, L., Barbone, M. (2021). Impact of COVID-19 on peer support specialists in the United States: Findings from a cross-sectional, online survey. *Psychiatric Services*, appips202000915.
- Amante, D. J.**, Harlan, D. M., **Lemon, S. C.**, McManus, D. D., Olaitan, O. O., Pagoto, S. L., Gerber, B. S., & Thompson, M. J. (2021). Evaluation of a diabetes remote monitoring program facilitated by connected glucose meters for patients with poorly controlled type 2 diabetes: Randomized crossover trial. *JMIR Diabetes*, 6(1), e25574.
- Anderson, M. L.**, Glickman, N. S., Wolf Craig, K. S., Sortwell Crane, A. K., **Wilkins, A. M.**, & Najavits, L. M. (2021). Developing Signs of Safety: A Deaf-accessible counselling toolkit for trauma and addiction. *Clinical Psychology & Psychotherapy*, 10.1002/cpp.2596.
- Anderson, M. L.**, Wolf Craig, K. S., **Hostovsky, S.**, Bligh, M., Bramande, E., Walker, K., Biebel, K., & **Byatt, N.** (2021). Creating the capacity to screen Deaf women for perinatal depression: A pilot study. *Midwifery*, 92, 102867.
- Blok, A. C., **Amante, D. J.**, Hogan, T. P., **Sadasivam, R. S.**, Shimada, S. L., Woods, S., Nazi, K. M., & Houston, T. K. (2021). Impact of patient access to online VA notes on healthcare utilization and clinician documentation: A retrospective cohort study. *Journal of General Internal Medicine*, 36(3), 592–599.
- Boudreaux, E. D.**, Haskins, B. L., **Larkin, C.**, Pelletier, L., Johnson, S. A., Stanley, B., Brown, G., Mattocks, K., & Ma, Y. (2020). Emergency department safety assessment and follow-up evaluation 2: An implementation trial to improve suicide prevention. *Contemporary Clinical Trials*, 45, 106075
- Boudreaux, E. D.**, Stanley, B., Green, K. L., Galfalvy, H., & Brown, G. K. (2021). A randomized, controlled trial of the safety planning intervention: Research design and methods. *Contemporary Clinical Trials*, 103, 106291.
- Byatt, N.**, Bergman, A. L., **Maslin, M.**, Straus, J., Forkey, H., Griffin, J., Griffen, A., & Moore Simas, T. A. (2020). Promoting the health of parents & children: Addressing perinatal mental health by building medical provider capacity through perinatal psychiatry access programs. *Psychiatry Information in Brief*, 17(19), 1159. <https://doi.org/10.7191/pib.1159>
- Byatt, N.**, Masters, G. A., Bergman, A. L., & Moore Simas, T. A. (2020). Screening for mental health and substance use disorders in obstetric settings. *Current Psychiatry Reports* 22(11), 62.
- Byatt, N.**, Masters, G. A., Twyman, J., Hunt, A., Hamad, C., **Maslin, M.**, & Moore Simas, T.

- A. (2021). Building obstetric provider capacity to address perinatal depression through online training. *Journal of Women's Health* (2002), 10.1089/jwh.2020.8843.
- Byatt, N., & Yonkers, K. A. (2021, April). Addressing maternal mental health: Progress, challenges, and potential solutions. *Psychiatric News*, 56(4). <https://doi.org/10.1176/appi.pn.2021.4.7>
- Carreiro, S., Newcomb, M., Leach, R., Ostrowski, S., Boudreaux, E. D., & Amante, D. (2020). Current reporting of usability and impact of mHealth interventions for substance use disorder: A systematic review. *Drug and Alcohol Dependence*, 2015, 108201.
- Clark, C. R., Haas, J. S., Lemon, S. C., Freund, K. M., Burns White, K., Marotta, C., Wint, A. J., LeClair, A. M., Lloyd-Travaglini, C., Xiao, V., Casanova, N., & Battaglia, T. A. (2021). RE: How the Coronavirus Disease-2019 May Improve Care: Rethinking Cervical Cancer Prevention. *Journal of the National Cancer Institute*, 113(1), 103–104.
- Davis-Martin, R. E., Alessi, S. M., & Boudreaux, E. D. (2021). Alcohol use disorder in the age of technology: A review of wearable biosensors in alcohol use disorder treatment. *Frontiers in Psychiatry*, 12, 642813.
- DeMatteo, D., Hart, S. D., Heilbrun, K., Boccaccini, M. T., Cunningham, M. D., Douglas, K. S., Dvoskin, J. A., Edens, J. F., Guy, L. S., Murrie, D. C., Otto, R. K., Packer, I. K., & Reidy, T. J. (2020). Death is different: Reply to Olver et al. (2020). *Psychology, Public Policy, and Law*, 26(4), 511–518.
- Dimeff, L. A., Jobs, D. A., Koerner, K., Kako, N., Jerome, T., Kelley-Brimer, A., Boudreaux, E. D., Beadnell, B., Goering, P., Witterholt, S., Melin, G., Samike, V., & Schak, K. M. (2021). Using a tablet-based app to deliver evidence-based practices for suicidal patients in the emergency department: Pilot randomized controlled trial. *JMIR Mental Health*, 8(3), e23022.
- Drawbridge, D. C., Truong, D., Nguyen, N. T., Lorenti, V. L., & Vincent, G. M. (2021). Risk-need-responsivity: Evaluating need-to-service matching with reach, effectiveness, adoption, implementation, maintenance. *Behavioral Sciences & the Law*, 39(1), 106-122.
- Ellison, M. L., Chinman, M., Schutt, R., McCarthy, S., Mitchel-Miland, C., & Smelson, D. (2020, July). *Examining the Impact of Peer Specialist Services on Housing and Behavioral Health among Veterans Residing in HUD-VASH*. Research Brief. VA National Center on Homelessness Among Veterans. Retrieved from [https://content.govdelivery.com/attachments/USVHACENTER/2020/07/28/file\\_attachments/1505595/Ellison\\_ImpactPeerSpecialistServices\\_VeteransHUD-VASH\\_July%202020.pdf](https://content.govdelivery.com/attachments/USVHACENTER/2020/07/28/file_attachments/1505595/Ellison_ImpactPeerSpecialistServices_VeteransHUD-VASH_July%202020.pdf)
- Etingen, B., Amante, D. J., Martinez, R. N., Smith, B. M., Shimada, S. L., Richardson, L., Patterson, A., Houston, T. K., Frisbee, K. L., & Hogan, T. P. (2020). Supporting the implementation of connected care technologies in the veterans health administration: Cross-sectional survey findings from the veterans engagement with technology collaborative (VET-C) Cohort. *Journal of Participatory Medicine*, 12(3), e21214.

- Faro, J. M., Arem, H., Heston, A. H., Hohman, K. H., Hodge, H., Wang, B., Lemon, S. C., Houston, T. K., & Sadasiam, R. S. (2020) A longitudinal implementation evaluation of a physical activity program for cancer survivors: LIVESTRONG® at the YMCA. *Implementation Science Communications* 1, 63.
- Faro, J. M., Mattocks, K. M., Mourao, D., Nagawa, C. S., Lemon, S. C., Wang, B., Cutrona, S. L., & Sadasivam, R. S. (2021). Experiences and perceptions of referrals to a community-based physical activity program for cancer survivors: A qualitative exploration. *BMC Health Services Research*, 21(1), 358.
- Faro, J. M., Mattocks, K. M., Nagawa, C. S., Lemon, S. C., Wang, B., Cutrona, S. L., & Sadasivam, R. S. (2021). Physical activity, mental health, and technology preferences to support cancer survivors during the COVID-19 pandemic: Cross-sectional study. *JMIR Cancer*, 7(1), e25317.
- Faro, J. M., Nagawa, C. S., Orvek, E. A., Smith, B. M., Blok, A. C., Houston, T. K., Kamberi, A., Allison, J. J., Person, S. D., & Sadasivam, R. S. (2021). Comparing recruitment strategies for a digital smoking cessation intervention: Technology-assisted peer recruitment, social media, ResearchMatch, and smokefree.gov. *Contemporary Clinical Trials*, 103, 106314.
- Forray, A., & Yonkers, K. A. (2021). The collision of mental health, substance use disorder, and suicide. *Obstetrics and Gynecology*, 137(6), 1083–1090.
- Fowler, C. H., & Rao, M. (2020). School that makes sense cent\$: Taking CTE courses. *Psychiatry Information in Brief*, 17(16), 1156. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss16/1>
- Gibson, L., Fahey, N., Hafer, N., Buchholz, B., Dunlap, D., Murphy, R., Achenbach, C., Stone, C., Cleeton, R., O’Neal, J., Frediani, J., Vos, M., Brand, O., Nayee, R., Wells, L., Lam, W., Martin, G., Manabe, Y., Robinson, M., Broach, J., ... McManus, D. (2021). The RADx tech clinical studies core: A model for academic based clinical studies. *IEEE Open Journal of Engineering in Medicine and Biology*, 2, 152–157.
- Goff, S. L., Moran, M. J., Szegda, K., Fioroni, T., DeBanate, M., & Byatt, N. (2020). Development and pilot testing of an adaptable protocol to address postpartum depression in pediatric practices serving lower-income and racial/ethnic minority families: contextual considerations. *Implementation Science Communications*, 1, 66.
- Golden, L., Moser, J., Vella-Ripley, A., MacPhee, J., Schwartz, V., Levin, L., & Biebel, K. (2020). Adulthood is hard: Understanding the college-to-career transition and supporting young adults’ emotional wellbeing. *Psychiatry Information in Brief*, 17(21), 1161. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss21/1>
- Grossi, L. M., Green, D., Cabeldue, M., & Pivovarova, E. (2020). Assessing feigning with the Feigning Evaluation INtegrating Sources (FEINS) in a forensic psychiatric sample. *Psychological Services*, 10.1037/ser0000513

- Haas, J. S., **Lemon, S. C.**, Freund, K. M., Battaglia, T. A., & Translating Research Into Practice (TRIP) Consortium Writing Group. (2021). Outside our walls: the case for city-wide collaboration to reduce disparities. *Journal of General Internal Medicine*, 36(1), 211–213.
- Helfand, B. K. I., D'Aquila, M. L., Tabloski, P., Erickson, K., Yue, J., Fong, T. G., Hsieh, T. T., Metzger, E. D., Schmitt, E. M., **Boudreaux, E. D.**, Inouye, S. K. and Jones, R. N. (2021). Detecting Delirium: A system review of identification instruments for non-ICU settings. *Journal of the American Geriatrics Society*, 69(2), 547-555.
- Kavanaugh, A., & **Grisso, T.** (2020). *Evaluations for sentencing of juveniles in criminal court*. New York: Oxford University Press.
- Kawasaki, H. N., de Silva, M. F., de Rose, F. S., Postalli, L. M., Garcia, L. T., de Souza, D. G., & **McIlvane, W. J.** (2020). A case history on shaping technique development: Dynamic stimulus control shaping. *Psychological Record*.
- Keepers, G. A., Fochtmann, L. J., Anzia, J. M., **Benjamin, S.**, Lyness, J. M., Mojtabai, R., Servis, M., Walaszek, A., Buckley, P., Lenzenweger, M. F., Young, A. S., Degenhardt, A., & Hong, S. H. (2021). *The American psychiatric association practice guideline for the treatment of patients with schizophrenia, 3rd ed.* Washington, DC: American Psychiatric Press.
- Keepers, G. A., Fochtmann, L. J., Anzia, J. M., **Benjamin, S.**, Lyness, J. M., Mojtabai, R., Servis, M., Walaszek, A., Buckley, P., Lenzenweger, M. F., Young, A. S., Degenhardt, A., Hong, S. H., & (Systematic Review) (2020). The American psychiatric association practice guideline for the treatment of patients with schizophrenia. *The American Journal of Psychiatry*, 177(9), 868-872.
- Krystal, J. H., Alvarado, J., Ball, S. A., Fortunati, F. G., Hu, M., Ivy, M. E., Kapo, J., Olson, K. D., Rohrbaugh, R. M., Sinha, R., Tebes, J. K., Vender, R. J., **Yonkers, K. A.**, & Mayes, L. C. (2021). Mobilizing an institutional supportive response for healthcare workers and other staff in the context of COVID-19: The Yale experience. *General Hospital Psychiatry*, 68, 12–18.
- Larkin, C.**, **Logan, D. G.**, & **Anderson, M. L.** (2020). Top tips for running a virtual advisory board. *Psychiatry Information in Brief*, 17(22), 1162. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss22/1>
- Larkin, C.** (2021). Ways to mind your mental health in challenging times: Tips for youth. *Psychiatry Information in Brief*, 18(1), 1166. Retrieved from <https://escholarship.umassmed.edu/pib/vol18/iss1/1>
- Leahy, D., **Larkin, C.**, Leahy, D., McAuliffe, C., Corcoran, P., Williamson, E., & Arensman, E. (2020). The mental and physical health profile of people who died by suicide: Findings from the Suicide Support and Information System. *Social Psychiatry and Psychiatric Epidemiology*, 55(11), 1525–1533.

- Leahy-Lind, S., & Simons, G.** (2020). Resiliency and the COVID-19 pandemic: The hidden strengths of those with lived experience of mental health conditions. *Psychiatry Information in Brief*, 17(20), 1160. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss20/1>
- Lerman Ginzburg, S., **Lemon, S. C.**, Romo, E., & Rosal, M. (2021). Social support and strain and emotional distress among Latinos in the northeastern United States. *BMC Psychology*, 9(1), 40.
- Logan, D. G.** (2020) How young adults can manage loss of income during the COVID-19 pandemic. *Psychiatry Information in Brief*, 17(13), 1153. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss13/1>
- López-Cepero, A., Frisard, C., **Lemon, S. C.**, & Rosal, M. C. (2020). Emotional eating mediates the relationship between food insecurity and obesity in Latina women. *Journal of Nutrition Education and Behavior*, 52(11), 995–1000.
- Lundsberg, L. S., Cutler, A. S., Stanwood, N. L., **Yonkers, K. A.**, & Gariepy, A. M. (2020). Association of pregnancy contexts with depression and low social support in early pregnancy. *Perspectives on Sexual and Reproductive Health*, 52(3), 161–170.
- MacDonell, K. K., Dailey, R., Gibson-Scipio, W., **Wang, B.**, Dinaj-Koci, V., & Bruzzese, J. M. (2021). Exploring barriers to medication adherence among African American emerging adults with uncontrolled asthma. *Health Education & Behavior: The Official Publication of the Society for Public Health Education*, 10901981211001345.
- Martinez, R. N., Smith, B. M., Etingen, B., Houston, T. K., Shimada, S. L., **Amante, D. J.**, Patterson, A., Richardson, L. M., Vandenberg, G., Cutrona, S. L., Quintiliani, L. M., Frisbee, K. L., & Hogan, T. P. (2021). Health-related goal setting and achievement among veterans with high technology adoption. *Journal of General Internal Medicine*.
- Maru, M., **Rogers, E. S.\***, Nicolellis, D., Legere, L., Placencio-Castro, M., Magee, C., & Harbaugh, A. G. (2021, May 20). Vocational peer support for adults with psychiatric disabilities: Results of a randomized trial. *Psychiatric Rehabilitation Journal*.
- Masters, G. A., Asipenko, E., Bergman, A. L., Person, S. D., **Brenckle, L.**, Moore Simas, T. A., Ko, J. Y., Robbins, C. L., & Byatt, N. (2021). Impact of the COVID-19 pandemic on mental health, access to care, and health disparities in the perinatal period. *Journal of Psychiatric Research*, 137, 126-130.
- McIlvane, W. J.**, Gerard, C. J., & Smelson, D. (2020). Behavioral technologies of teaching at 50: New opportunities and new challenges. *Experimental Analysis of Human Behavior Bulletin*, 32, 60-65.
- McIlvane, W. J.**, Iversen, I. H., Lattal, K. A., Lionello-DeNolf, K. M., & Petersdottir, A. I. (2021). An appreciation of Murray Sidman's science and his impact. *Journal of the Experimental*

*Analysis of Behavior*, 115(1), 4-12.

- McKay, C., & Ellison, M. (2021). *Career and Technical Education for Students with Emotional Disturbance*. (White Paper). Available from [https://www.dol.gov/sites/dolgov/files/ODEP/pdf/SSI\\_Youth\\_McKay\\_Final\\_Proposal.pdf](https://www.dol.gov/sites/dolgov/files/ODEP/pdf/SSI_Youth_McKay_Final_Proposal.pdf)
- McKay, C. E., Young, J., Johnson, C., & Seel, R. T. (2021). Brain injury clubhouses. *Psychiatry Information in Brief*, 18(3),1168. Retrieved from <https://escholarship.umassmed.edu/pib/vol18/iss3/1>
- Meyer, S. M., Landry, M. J., Gustat, J., Lemon, S. C., & Webster, C. A. (2021). Physical distancing ≠ physical inactivity. *Translational Behavioral Medicine*, 11(4), 941–944.
- Millner, U. C., Rogers, E. S.\*, Bloch, P., Costa, W., Pritchett, S., Woods, T., Teixeira, C., & Hintz, K. (2020). Unpacking the meaning of work for individuals living with serious mental illness. *Journal of Career Development*, 1-18.
- Mullen, M. G., & Wnuk, J. (2020). Should I attend college in the fall? Questions for students with mental health conditions to consider. *Psychiatry Information in Brief*, 17(14), 1154. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss14/1>
- Munoz, C. G., Perrault, R. T., & Vincent, G. M. (2021). Probation officer assessments of risk when the youth look different: Contributions of structured professional judgment to the racial bias debate. *Youth Violence and Juvenile Justice*, 19(2), 206-226.
- Munson, M. R., Jaccard, J. J., Scott Jr, L. D., Narendorf, S. C., Moore, K. L., Jenefsky, N., Cole, A., Davis, M., Gilmer, T., Shimizu, R., Pleines, K., Cooper, K., Rodwin, A. H., Hylek, L., & Amaro, A. (2020). Engagement intervention versus treatment as usual for young adults with serious mental illness: A randomized pilot trial. *Pilot and Feasibility Studies*, 6, 107.
- Murray, A. (2021). Accessibility 101: A researcher's guide to making content accessible. *Psychiatry Information in Brief*, 18(2), 1167. Retrieved from <https://escholarship.umassmed.edu/pib/vol18/iss2/1>
- Murray, A., Pivovarova, E., Klitzman, R., Stiles, D. F., Appelbaum, P., & Lidz, C. W. (2021). Reducing the single IRB burden: Streamlining electronic IRB systems. *AJOB Empirical Bioethics*, 12(1), 33-40.
- Nagawa, C. S., Faro, J. M., Menon, A. J., Ito Fukunaga, M., Williams, J. H., Mourao, D., Emidio, O. M., Davis, M., Pbert, L., Cutrona, S. L., Houston, T. K., & Sadasivam, R. S. (2021). Written advice given by African American smokers to their peers: Qualitative study of motivational messages. *JMIR Formative Research*, 5(4), e21481.
- O'Hea, E. L., Creamer, S., Flahive, J. M., Keating, B. A., Crocker, C. R., Williamson, S. R., Edmiston, K. L., Harralson, T., & Boudreaux, E. D. (2021). Survivorship care planning,

quality of life, and confidence to transition to survivorship: A randomized controlled trial with women ending treatment for breast cancer. *Journal of Psychosocial Oncology*, 1–21.

Olmstead, T. A., Martino, S., Ondersma, S. J., Gilstad-Hayden, K., Forray, A., & Yonkers, K. A. (2021). The short-term impact on economic outcomes of SBIRT interventions implemented in reproductive health care settings. *Journal of Substance Abuse Treatment*, 120, 108179.

Olmstead, T. A., Yonkers, K. A., Forray, A., Zimbrea, P., Gilstad-Hayden, K., & Martino, S. (2020). Cost and cost-effectiveness of three strategies for implementing motivational interviewing for substance misuse on medical inpatient units. *Drug and Alcohol Dependence*, 214, 108156.

Packer, I. K., & Grisso, T. (2021). The designated forensic professional program in Massachusetts. In K. Heilbrun, H. J. Wright II, C. Giallella, & D. David DeMatteo (Eds.), *University and public behavioral health organization collaboration: Models for success in justice contexts*. New York: Oxford University Press.

Peacock-Chambers, E., Paterno, M. T., Kiely, D., Fioroni, T., Byatt, N., & Friedmann, P. D. (2021). Engagement in perinatal outpatient services among women in recovery from opioid use disorders. *Substance Abuse*.

Pivovarova, E., Min, H. S., & Friedmann, P. D. (2020). Impact of extended release naltrexone on health-related quality of life in individuals with legal involvement and opioid use disorders. *Substance Abuse*.

Reznek, M. A., Larkin, C. M., Scheulen, J. J., Harbertson, C. A., & Michael, S. S. (2021). Operational factors associated with emergency department patient satisfaction: Analysis of the Academy of Administrators of Emergency Medicine/Association of Academic Chairs of Emergency Medicine national survey. *Academic Emergency Medicine*.

Rogers, E. S. \*, Millner, U. C., Ludlow, L., Lord, E. M., & Russinova, Z.\* (2021). Development of a comprehensive inventory of community participation for individuals with psychiatric disabilities. *Psychiatric Rehabilitation Journal*, 44(1), 51-62.

Sabella, K. (2021). Factors that hinder or facilitate the continuous pursuit of education, training, and employment among young adults with serious mental health conditions. *Psychiatric Rehabilitation Journal*, 10.1037/prj0000470.

Schutt, R. K., Schultz, M., Mitchell-Miland, C., McCarthy, S., Chinman, M., & Ellison, M. (2021). Explaining service use and residential stability in supported housing: Problems, preferences, peers. *Medical Care*, 59(Suppl 2), S117–S123.

Schwartz, A. E., Rogers, E. S.\*, & Russinova, Z.\* (2021). Predictors of community-based employment for young adults with intellectual disability and co-occurring mental health conditions. *Disability & Rehabilitation*.

- Schwartz, A. E., Young Adult Mental Health/Peer Mentoring Research Team, Kramer, J. M., Rogers, E. S.\*, McDonald, K. E., & Cohn, E. S. (2020). Stakeholder-driven approach to developing a peer mentoring intervention for young adults with intellectual/developmental disabilities and co-occurring mental health conditions. *Journal of Applied Research in Intellectual Disabilities: JARID*, 33(5), 992–1004.
- Sebela, A., Byatt, N., Formanek, T., & Winkler, P. (2021). Prevalence of mental disorders and treatment gap among Czech women during paid maternity or parental leave. *Archives of Women's Mental Health*, 24(2), 335–338.
- Serowik, K. L., Yonkers, K. A., Gilstad-Hayden, K., Forray, A., Zimbrea, P., & Martino, S. (2021). Substance use disorder detection rates among providers of general medical inpatients. *Journal of General Internal Medicine*, 36(3), 668–675.
- Simon, G., Matarazzo, B. B., Walsh, C. G., Smoller, J., Boudreaux, E., Yarborough, B., Shortreed, S., Coley, R. Y., Ahmedani, B., Doshi, R., Harris, L. I., & Schoenbaum, M. (2021). Reconciling statistical and clinicians' predictions of suicide risk. *Psychiatric Services*, 72(5), 555-562.
- Slade, M., Rennick-Egglestone, S., Llewellyn-Beardsley, J., Yeo, C., Roe, J., Bailey, S., Smith, R. A., Booth, S., Harrison, J., Bhogal, A., Penas Morán, P., Hui, A., Quadri, D., Robinson, C., Smuk, M., Farkas, M.\*, Davidson, L., van der Krieke, L., Slade, E., Bond, C., Nicholson, J., Grundy, A., Charles, A., Hare-Duke, L., Pollock, K., & Ng, F. (2021). Recorded mental health recovery narratives as a resource for people affected by mental health problems: Development of the Narrative Experiences Online (NEON) intervention. *JMIR Formative Research*, 5(5), e24417.
- Sreedhara, M., Goulding, M., Valentine Goins, K., Frisard, C., & Lemon, S. C. (2020). Healthy eating and physical activity policy, systems, and environmental strategies: A content analysis of community health improvement plans. *Frontiers in Public Health*, 8, 580175.
- Transitions to Adulthood Center for Research.** (2020). Adulting shorts: An interview tale, part 1. *Psychiatry Information in Brief*, 17(17), 1157. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss17/1>
- Transitions to Adulthood Center for Research.** (2020). Adulting shorts: An interview tale, part 2. *Psychiatry Information in Brief*, 17(18), 1158. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss18/1>
- Transitions to Adulthood Center for Research.** (2020). Before a mental health crisis hits: Creating a family safety plan. *Psychiatry Information in Brief*, 17(15), 1155. Retrieved from <https://escholarship.umassmed.edu/pib/vol17/iss15/1>
- Varzgani, F., Tulu, B., Djamshidi, S., Frost, E., Wang, Z., Wang, . . . Larkin, C. (2021). Suicide prevention through smartphone applications: A systematic review of literature. *AMCIS 2021 Virtual Conference Proceedings*, 29. [https://aisel.aisnet.org/amcis2021/healthcare\\_it/](https://aisel.aisnet.org/amcis2021/healthcare_it/)

[sig\\_health/29](#)

- Vax, S., Farkas, M.\*, Russinova, Z.\*, Mueser, K. T., & Drainoni, M. L. (2021). Enhancing organizational readiness for implementation: Constructing a typology of readiness-development strategies using a modified Delphi process. *Implementation Science*, 16, 61.
- Vax, S., Gidugu, V., Farkas, M.\*, & Drainoni, M. L. (2021). Ready to roll: Strategies and actions to enhance organizational readiness for implementation in community mental health. *Implementation Research and Practice*, 2.
- Viljoen, J. L., & Vincent, G. M. (2020). Risk assessments for violence and reoffending: Implementation and impact on risk management. *Clinical Psychology: Science and Practice*, e12378.
- Vincent, G. M., Perrault, R. T., Drawbridge, D. C., Landry, G. O., & Grisso, T. (2021). Risk-need-responsivity meets mental health: Implementation challenges in probation. *Criminal Justice and Behavior*, 48(9), 1187-1207.
- Vincent, G. M., & Viljoen, J. L. (2020). Racist algorithms or systemic problems? Risk assessments and racial disparities. *Criminal Justice and Behavior*, 47(12), 1576-1584.
- Wang, B., Liu, F., Deveaux, L., Ash, A., Gosh, S., Li, X., Rundensteiner, E., Cottrell, L., Adderley, R., & Stanton, B. (2021). Adolescent HIV-related behavioural prediction using machine learning: A foundation for precision HIV prevention. *AIDS (London, England)*, 35(Suppl 1), S75-S84.
- Wurcel, A. G., Reyes, J., Zubiago, J., Koutoujian, P. J., Burke, D., Knox, T. A., Concannon, T., Lemon, S. C., Wong, J. B., Freund, K. M., Beckwith, C. G., & LeClair, A. M. (2021). “I’m not gonna be able to do anything about it, then what’s the point?”: A broad group of stakeholders identify barriers and facilitators to HCV testing in a Massachusetts jail. *PLoS One*, 16(5), e0250901.
- Yonkers K. A. (2021). Treatment of psychiatric conditions in pregnancy starts with planning. *The American Journal of Psychiatry*, 178(3), 213-214.

\* Publications by our Boston University Center for Psychiatric Rehabilitation Collaborators are not included in iSPARC publication counts.