Center for Mental Health Services Research Dissemination Activities

Carl E. Fulwiler
University of Massachusetts Medical School

Let us know how access to this document benefits you.
Follow this and additional works at: https://escholarship.umassmed.edu/chr_symposium

Part of the Community Health and Preventive Medicine Commons, Mental and Social Health Commons, and the Psychiatry and Psychology Commons

Repository Citation

Creative Commons License
This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License.
This material is brought to you by eScholarship@UMassChan. It has been accepted for inclusion in Community Engagement and Research Symposia by an authorized administrator of eScholarship@UMassChan. For more information, please contact Lisa.Palmer@umassmed.edu.
CMHSR Engagement Activities

### Treatment Retention Strategies in Transition Age Youth

**PI:** Maryann Davis, PhD  
**Co-I:** Ashli Sheidown, PhD, Charles Lidz, PhD, William Fisher, PhD, Lisa Fortuna, PhD, Cynthia Christianson  
**Funding:** National Institute of Mental Health

**Description:** The purpose of this study is to test Motivational Interviewing (MI) as a treatment retention (TR) intervention among Transition Age Youth (TAY; ages 17-25). MI is a widely used intervention to enhance motivation and reduce ambivalence about change that has increased treatment adherence in older and younger age groups. MI is appealing because it can be readily added to standard therapy. MI targets motivation to change, and therapeutic alliance. The degree to which it can overcome the reduction in parental enforcement of TR in TAY and other TAY characteristics is unknown. The research will initiate development and feasibility assessment of a developmentally-sensitive TAY MI with iterative feedback from experts, clinicians, and clients, and then conduct a small pilot randomized clinical feasibility trial of the TAY MI in comparison to “services as usual.” It is the preliminary step to determine whether sufficient evidence can be found to justify a full scale clinical trial.

### Using Evidence to Improve Medicaid Mental Health Services for Massachusetts Children and Youth

**PI:** Joanne Nicholson, PhD  
**Co-I:** Kathleen Biebel, PhD, Laurel K. Leslie, MD, MPH, Susan Maciolek, MPP  
**Personnel:** Gifty Debordes-Jackson, MA  
**Funding:** W. T. Grant Foundation

**Description:** Research on effective child and adolescent mental health interventions has grown significantly over the past two decades. Through the Children's Behavioral Health Initiative (CBHI), Massachusetts’ policy makers, provider agencies, and advocacy groups are engaged in activities and decision-making on a daily basis that may involve the use of research evidence. This study examines the ways in which research evidence comes into play as children's mental health services are transformed and implemented in the provider community. Activities focus on understanding provider agencies' internal processes for using research evidence as they make decisions related to the CBHI. Products will include briefings to provider agencies and state policy makers regarding strategies for promoting the use of research evidence in the transformation of services for children and youth, and recommendations for states and other organizations involved in systems change initiatives to build effective, productive bridges among research, policy, and practice sectors.

### Disseminating Tobacco Cessation Activities in ICCD Clubhouses

**PI:** Colleen McKay, MA, CAGS  
**Co-I:** Douglas Ziedonis, MD, MPH  
**Personnel:** Valerie Williams, MA, MS  
**Funding:** American Legacy Foundation

**Description:** Almost 80 percent of people with serious mental illness smoke, consuming nearly half of all the tobacco sold in the U.S. Compared with the general population, individuals with serious mental illness are at greater risk of co-morbid health problems and premature death. Persons with mental illness account for about half of the annual death toll from smoking. Yet, many individuals with serious mental illness remain unaware of programs to help them quit smoking, and too few of those programs provide integrated approaches to tobacco cessation in mental health settings that include peer supports. We are implementing cost-effective evidence-based interventions that attempt to decrease the morbidity and mortality associated with tobacco use among people with serious mental illness that are participating in an ICCD Clubhouse.

---

**Contact Information**  
**Email:** CMHSR@umassmed.edu  
**Phone:** 508-856-5498

---

**The Dissemination Series**  
Products for a diverse audience including clinicians/providers, mental health service users and their families, and researchers.

**Psychiatry Issue Briefs**  
Issue briefs focus on translating research findings into concise, user-friendly information that is accessible to all

**Research You Can Use**  
A one-page summary of research findings and recommendations specifically developed for busy providers

**Research in the Works**  
Summarizes current and ongoing research projects

---

**Science to Service Collaboration**  
Disseminating Tobacco Cessation Activities in ICCD Clubhouses

- **Research Question/Goal:**
  - What is the research question/goal?
  - How do consumers engage in the process?
  - How do consumers engage in the process?
  - How does the research team collaborate with the community?

- **Funding:**
  - American Legacy Foundation

- **Co-I:**
  - Douglas Ziedonis, MD, MPH

- **PI:**
  - Colleen McKay, MA, CAGS

- **Personnel:**
  - Valerie Williams, MA, MS

- **Funding:**
  - American Legacy Foundation

**Description:**

- Almost 80 percent of people with serious mental illness smoke, consuming nearly half of all the tobacco sold in the U.S. Compared with the general population, individuals with serious mental illness are at greater risk of co-morbid health problems and premature death. Persons with mental illness account for about half of the annual death toll from smoking. Yet, many individuals with serious mental illness remain unaware of programs to help them quit smoking, and too few of those programs provide integrated approaches to tobacco cessation in mental health settings that include peer supports. We are implementing cost-effective evidence-based interventions that attempt to decrease the morbidity and mortality associated with tobacco use among people with serious mental illness that are participating in an ICCD Clubhouse.

---

**Twitter:** Twitter@UMassCMHSR  
**Facebook:** Facebook.com/UMassCMHSR  
**MHARN Website QR Code:**  
**CMHSR Website QR Code:**