

AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY

W W W . A A C A P . O R G

• AACAP Catchers in the Rye Humanitarian Award	1
• AACAP Catchers in the Rye Award for Advocacy to an Individual	2
• AACAP Catchers in the Rye Award to an AACAP Component	3
• AACAP Catchers in the Rye Award to a Regional Council	4
• AACAP Simon Wile Leadership in Consultation Award	6
• AACAP Jeanne Spurlock Lecture and Award for Diversity and Culture	7
• AACAP Irving Philips Award for Prevention	9
• AACAP Norbert and Charlotte Rieger Psychodynamic Psychotherapy Award.....	10
• AACAP Norbert and Charlotte Rieger Service Program Award for Excellence.....	13
• AACAP Norbert and Charlotte Rieger Award for Scientific Achievement.....	15
• AACAP George Tarjan Award for Contributions in Developmental Disabilities	18
• AACAP Klingenstein Third Generation Foundation Award for Research in Depression or Suicide	19
• AACAP Robert Cancro Academic Leadership Award	22
• AACAP Robinson-Cunningham Award for Best Paper by a Resident	24
• AACAP Sidney Berman Award for the School-Based Study and Intervention for Learning Disorders	26
• AACAP Beatrix A. Hamburg Award for Best New Research Poster by a Child and Adolescent Psychiatry Resident	28
• AACAP Elaine Schlosser Lewis Award for Research on Attention-Deficit Disorder	29
• AACAP Pilot Research Award for Junior Faculty and Child and Adolescent Psychiatry Fellows Supported by Lilly and Company	31
• AACAP Pilot Research Award for Attention Disorders Supported by the Elaine Schlosser Lewis Fund	32
• AACAP Educational Outreach Program for Child and Adolescent Psychiatry Residents Supported by AACAP	39
• AACAP Educational Outreach Program for General Psychiatry Residents Supported by the Eli Lilly and Company	41
• AACAP Jeanne Spurlock Minority Medical Student Clinical Fellowship in Child and Adolescent Psychiatry	42
• AACAP Summer Medical Student Fellowship in Child and Adolescent Psychiatry Supported by the Campaign for America's Kids	44
• AACAP Jeanne Spurlock Research Fellowship in Child and Adolescent Psychiatry, Supported by the National Institute on Drug Abuse	47
• AACAP Fellows	48
• Acknowledgments	49

AACAP CATCHERS IN THE RYE HUMANITARIAN OF THE YEAR AWARD TO NANCY HARRIS



The AACAP Catchers in the Rye Humanitarian of the Year Award is administered by the AACAP Executive Committee. It was established in 1990 to honor those who have made significant contributions to society through support of child and adolescent psychiatry. The AACAP is honored to present the 2009 Catchers in the Rye Humanitarian of the Year Award to Nancy Harris.

It is a huge honor for me to receive the AACAP Catchers in the Rye Humanitarian Award. I am a widow who despite suffering with anorexia since my teens, was happily married for 24 years and had a successful and fulfilling career in retail.

Having personally experienced the struggles of this disease, I made up my mind 7 years ago to make a difference in the lives of children and adolescents struggling too.

My contributions, albeit not medical, will hopefully help pave the way for more research, more advanced treatments, more expansive health care coverage and more education and public awareness. I have guaranteed that all these areas will continue to advance by having raised \$2.5 million dollars to endow a Chair in Psychiatry in the field of Eating Disorders at Harvard Medical School at Massachusetts General Hospital.

I am committed to helping all those with an eating disorder to have a healthy, happy and full life. These children deserve and need our support and love.

I thank you so very much for honoring me and I will continue to work hard and be deserving of this most prestigious award. – *Nancy Harris, 2009*

Ms. Harris accepts the Catchers in the Rye Humanitarian of the Year Award at the Karl Menninger, M.D. Plenary on Wednesday, October 28, from 4:30 to 6:15 p.m.

“I keep picturing all these little kids playing some game in this big field of rye and all. Thousands of little kids, and nobody around – nobody big, I mean – except me. And I am standing on the edge of some crazy cliff. What I have to do, I have to catch everybody if they start over the cliff.” —*J.D. Salinger, The Catcher in the Rye*

AACAP CATCHERS IN THE RYE ADVOCACY AWARD TO AN INDIVIDUAL TO DAVID R. DEMASO, M.D.



The AACAP Catchers in the Rye Advocacy Award to an individual was established in 1996 to recognize an individual for their outstanding advocacy efforts on behalf of children and adolescents.

Dr. DeMaso has served as an AACAP councilor-at-large and currently is the co-chair of the Committee on Collaboration with Medical Professionals, which focuses on the enhancing the collaboration and communication between child and adolescent psychiatrists and other medical professionals. Dr. DeMaso has been at the forefront of the Massachusetts' Children's Mental Health Campaign, which has grown into a statewide coalition of 135 organizations advocating for child mental health reform. This effort led to the passage within a single legislative session of the new children's mental health law, Chapter 321 of the Acts of 2008. This law is designed to bring about improved oversight and a comprehensive and coordinated system of evidence-based mental health care that is accessible to all children, adolescents and families in Massachusetts.

My child mental health advocacy efforts have grown out of the widespread frustration with poor access to care and late identification and treatment of children with known treatable disorders; complex and fragmented “non-systems” of care for children and families; overcrowded emergency rooms boarding children in need of inpatient beds; children stuck in costly inpatient units for weeks awaiting decisions about more appropriate, community-based care; the lack of school and community-based services for want of sustainable funding; and poor integration of mental health with primary care clinicians. My efforts have been directed by the realization that no one individual can *“catch everybody if they start over the cliff,”* and that a systemic approach to addressing serious children's health issues and building partnerships with other organizations to advance this change is fundamental to both design and sustain reform. In this context, I am deeply honored by this award which is truly the reflections of countless numbers of patients, families, and colleagues across the state of Massachusetts as well as nationally with whom I have joined in an effort to keep our children *“playing some game in the big field of rye and all.”* – David R. DeMaso, M.D., 2009

“I keep picturing all these little kids playing some game in this big field of rye and all. Thousands of little kids, and nobody around – nobody big, I mean – except me. And I am standing on the edge of some crazy cliff. What I have to do, I have to catch everybody if they start over the cliff.” —J.D. Salinger, *The Catcher in the Rye*

AACAP CATCHERS IN THE RYE AWARD TO AN AACAP COMPONENT TO THE PROGRAM COMMITTEE



The AACAP Catchers in the Rye Award to an AACAP Component was established in 1996 to recognize an AACAP component for their outstanding efforts on behalf of children and adolescents. This year's award recognizes the Program Committee.

Representing the entire Program Committee, we are delighted and honored to be one of the winners of this year's Catchers in the Rye awards. The task of the Program Committee is to select wisely and fairly to assemble a program serving the wide range of needs of our members. Credit for our success is due to the substantial efforts of our committee members and to the very hard work and unfailing enthusiasm of our staff. Among the staff, special credit goes to Heidi Fordi and Jill Zeigenfus for 14 and 3 years of work with our committee respectively. Credit is also due to our predecessors who have left us great tradition and processes. In addition to the Annual Meeting, our committee is responsible for the Psychopharmacology Update Institute, Lifelong Learning Institute, and Annual Review Course. Other recent work by our staff and committee members have resulted in a successful electronic system for program submissions and review and, with this meeting, an online Proceedings Abstract with personalized scheduling. The Program Committee has also been at the forefront among medical associations in managing conflicts of interest and maintaining a scientific meeting that is free of commercial bias. It is a great pleasure to have been able to contribute in this way to our Academy which provides the professional home for us all. – *Neal D. Ryan, M.D. & Bennett L. Leventhal, M.D., 2009*

“I keep picturing all these little kids playing some game in this big field of rye and all. Thousands of little kids, and nobody around – nobody big, I mean – except me. And I am standing on the edge of some crazy cliff. What I have to do, I have to catch everybody if they start over the cliff.” —*J.D. Salinger, The Catcher in the Rye*

ACAP CATCHERS IN THE RYE AWARD TO A REGIONAL ORGANIZATION TO THE NEW ENGLAND COUNCIL OF CHILD AND ADOLESCENT PSYCHIATRY



The NECCAP has been chosen by the Assembly of Regional Organizations of Child and Adolescent Psychiatry to receive the 2009 Catchers in the Rye Award. This award recognizes the New England Council's advocacy for children in the community, legislative efforts, outstanding local arrangements efforts, led by Dr. Sharon Weinstein, M.D. and record attendance at the 2007 AACAP Annual Meeting in Boston.

Highlights of the Meeting included:

Attendance – With an attendance of over 3,700 attendees and 18% international participants, this was AACAP's largest Annual Meeting to date.

Membership – NECCAP/AACAP membership increased from 438 to 488 members during the 2006 to 2007 year of planning. This increase was due in large part to the leadership of Joan Wall, NECCAP Executive Director, and Don Condie, Chair of the Membership Committee.

Volunteers – Much of the meeting's success was due to the involvement of so many NECCAP members. Over 60 child psychiatrists volunteered, in addition to the Local Arrangement Committee members, 213 Monitors, and 15 Research Assistants.

Programs –

- Our three Practica (Eating Disorders, Consultation-Liaison, and Forensics) were enthusiastically received by sold-out groups. – *Thanks to David Herzog M.D., Dave DeMaso M.D., Steve Schlozman M.D., and Don Condie M.D. for chairing the Practica.*
- Special institutes and presentations in Psychopharmacology and School Consultation – *Thanks to Tim Wilens, M.D. and Jeffrey Bostic, M.D., Ed.D.*
- International Programs represented 60 countries. – *Thanks to Myron Belfer.*
- Professional Promotions Initiatives – *Thanks to Dave DeMas, M.D. and Donna Norris, M.D.*
- The Psychopharmacology Institute for Pediatricians – *Thanks to Dave DeMaso, M.D.*
- Many NECCAP volunteers wrote summaries of the programs for *AACAP News*.

Trainees – We thank our members for the highly successful outreach to students and trainees. We recruited over 213 Monitors, including child and adolescent psychiatry residents, adult psychiatry residents, medical students and research assistants. Thanks to Cindy Telingator, M.D., Gene Beresin, M.D., M.A., Joe Jankowski, M.D., Steve Schlozman, M.D. and the Sub-Committee members for serving as Monitor Coordinators, as well as Sejal Shah for her leadership in organizing trainees. Thanks to the Monitor Committee and AACAP for

introducing on-line registration to streamline the process. Sharon Weinstein, M.D., Cindy Teltingator, M.D. and Andrés Martin, M.D., M.P.H. were delighted to welcome the Boston med students at the Boston PsychSign Medical Student Meeting. Thanks to Steve Schlozman, M.D. who led the Mentorship Program.

Hospitality Desk – Many thanks to the Hospitality Committee and volunteers, Chair Gale Pasternack, M.D., who set a warm, gracious and welcoming tone to friends from across the world. Gale's article on "Attractions in Boston" was widely-read. Innovative collaboration with the Greater Boston Convention and Visitors Bureau again established a precedent.

The Art Show and Silent Auction – With over 40 donations from our members and outside donors, over \$4,000 was raised for the Campaign for America's Kids. Special thanks to Stu Copans, M.D., Ludwik Szymanski, M.D., Gale Pasternack, M.D. and the members of the Art Committee. The Open Mic, organized by Chuck Joy, M.D. and many local members was a lively display of talent.

Media – Media Arrangements went smoothly and professionally, with thanks to the wisdom and experience of David Fassler, M.D. The Media Committee's arrangements with outreach groups were another contribution to our coverage.

Receptions – The Presidential Reception at the Kennedy Library, with Congressman Patrick Kennedy accepting the award on behalf of his father, Senator Ted Kennedy was poignant and moving. Thanks to the Chiefs of Departments for supporting the Medical School Receptions. Thanks to Gene Beresin, M.D. and Pink Fraud and the Transitional Objects for providing music at the Opening Reception.

Special thanks to Tom Anders, M.D., Bob Hendren, D.O., Neal Ryan, M.D., Bennett Leventhal, M.D., Ginger Anthony, Heidi Buttner Fordi, and Jill Zeigenfus for their support and inspiration throughout the entire Annual Meeting.

On behalf of NECCAP, I extend our gratitude to AACAP for the 2009 Catchers in the Rye Award. As Chair of the Local Arrangements Committee of the 2007 AACAP Annual Meeting in Boston, I would like to acknowledge and thank the many members and staff for their hard work, dedication, innovative ideas, generosity and enthusiasm over the fifteen months of planning and implementing the successful AACAP Annual Meeting. – *Sharon Weinstein, M.D., 2009*

"I keep picturing all these little kids playing some game in this big field of rye and all. Thousands of little kids, and nobody around – nobody big, I mean – except me. And I am standing on the edge of some crazy cliff. What I have to do, I have to catch everybody if they start over the cliff." —*J.D. Salinger, The Catcher in the Rye*

ACAP SIMON WILE
LEADERSHIP IN
CONSULTATION AWARD
SUPPORTED BY THE
CHILD PSYCHIATRY
SERVICE AT
MASSACHUSETTS
GENERAL HOSPITAL
TO MARIANNE Z.
WAMBOLDT, M.D.



This award recognizes Dr. Marianne Z. Wamboldt for her clinical and research work related to children with atopic disorders and comorbid mood and anxiety disorders. Dr. Wamboldt currently directs the Division of Child and Adolescent Psychiatry at the University of Colorado Denver, and is Chair of Psychiatry at The Denver Children's Hospital. Her current interests include the use of complementary interventions, such as creative arts therapy or yoga, for youth with somatoform disorders.

ABSTRACT:

Objectives: Child psychiatry is currently overwhelmed with the high prevalence and acuity of pediatric mental health problems. The future of child psychiatry may better serve youth by establishing a rational system for the early identification of genetic and environmental risk factors at specific developmental stages, and the development of targeted prevention or early intervention programs. **Methods:** Selective review and synthesis of the literature on prevention strategies for childhood mental illnesses. **Results:** Evidence based programs of identification and early intervention for several specific phases of development, i.e., perinatal, early childhood, latency, and adolescence, will be presented. Interventions ranging from prenatal nutritional supplementation, early childhood nurse visitation, group therapy for children of parents stressed by either mental illness or divorce, and utility of exercise and creative arts programs will be discussed. **Conclusions:** A blueprint for the systematic assessment and identification of mental health risk factors needs to be implemented in primary care systems. Child psychiatry can best benefit the most children by developing evidence based preventive interventions for children with genetic or environmental risk factors for psychiatric problems, and working with multidisciplinary groups to implement these interventions in primary care and community settings.

Dr. Wamboldt presents, “The (Future) Role of Child Psychiatrists in Primary Care: How Do We Get There?” during the Simon Wile Symposium on Saturday, October 31 from 11:30 a.m. to 2:30 p.m.

AACAP JEANNE SPURLOCK LECTURE AND AWARD FOR DIVERSITY AND CULTURE TO DEBORAH DEAS, M.D.



The AACAP Jeanne Spurlock Lecture and Award for Diversity and Culture is named in honor of Jeanne Spurlock, M.D., a giant in child and adolescent psychiatry and in advocacy for children, adolescents and their families from all cultures. The Annual Meeting lecture and award recognizes individuals who have made outstanding contributions to the advancement of the understanding of diversity and culture in children's mental health and who contribute to the recruitment of child and adolescent psychiatry from all cultures. This year's AACAP Spurlock Lecture and Award for Diversity recipient is Deborah Deas, M.D.

ABSTRACT:

The Institute of Medicine (IOM) reports that racial and ethnic healthcare disparities exist at every level of healthcare. The IOM suggests that healthcare disparities may be addressed by increasing awareness of the problem, promoting consistency and equity of care through the use of evidence based practice, strengthening culturally competent health care approaches and improving diversity in the health care workforce. This lecture will review healthcare disparities in medicine, with particular emphasis on psychiatry. The results of a systematic diversity plan at the Medical University of South Carolina (MUSC) College of Medicine will be reviewed, as well as its implications for healthcare.

It is such an honor to be recognized with the “Jeanne Spurlock Lecture and Award for Diversity and Culture”. The award has a special significance to me because Dr. Jeanne Spurlock was one of my mentors during my residency training until her passing. I met Dr. Spurlock in 1990 at one of the American Academy of Child and Adolescent Psychiatry (AACAP) annual meetings, and she immediately pulled me aside to talk about the importance of increasing the number of minority child/adolescent psychiatrists and the tremendous impact one can have on diverse populations. The following year, I was awarded the AACAP Charter Fellow Leadership Award, and Dr. Spurlock spent a couple of hours with me over lunch chatting about the role of a child/adolescent psychiatrist and the various ways that one might contribute to eradicating disparities in psychiatry as well as educating the masses. After that lunch, there was no turning back because I knew was in the right place. Dr. Spurlock and I continued to meet over lunch at every AACAP meeting thereafter.

I completed my child/adolescent psychiatry fellowship and a fellowship in addiction psychiatry. Over the past 15 years, my career focus has been adolescent substance abuse treatment research. I am a National Institute of Health (NIH) funded researcher, and have published extensively in peer-reviewed journals. Dr. Spurlock's mentoring taught me the importance of mentoring others and identifying individuals with special talents for child/adolescent psychiatry. I have mentored

more than 25 summer research medical students and more than 90% have chosen a career in psychiatry. The Academy has recognized me with the AACAP Outstanding Mentor Award on three occasions.

Nine years ago, I was appointed Associate Dean for Admissions at MUSC College of Medicine, and later named Senior Associate Dean for Diversity and Admissions. In this role, I led the College of Medicine implementation of a strategic diversity plan to increase the healthcare workforce across the continuum including medical students, residents and faculty. The results of the diversity plan are unprecedented. The College of Medicine increased minority faculty by more than 100% (from 23 to 60), almost quadrupled minority resident physicians (16 to 58), and minority students now account for 19% of the student body. Dr. Spurlock's mentoring will never be forgotten, and the importance of making an impact remains with me. –
Deborah Deas, M.D., 2009

Dr. Deas presents, “Addressing Healthcare Disparities: The Medical University of South Carolina College of Medicine Model,” during Honors Presentation 5 on Thursday, October 29 from 1:15 to 2:05 p.m.

AACAP IRVING PHILIPS
AWARD FOR
PREVENTION TO
PENELOPE KNAPP, M.D.



The AACAP Irving Philips Award for Prevention was established in 1993 in honor of Irving Philips, M.D. Dr. Philips served as AACAP President from 1985-1987 and was renowned for his work in the field of prevention. The \$2,500 award is given annually to the child and adolescent psychiatrist and AACAP member who made significant contributions in a lifetime career, a body of work, or single paper, book, or project to the field of prevention of mental illnesses in children and adolescents. The award also enables the recipient to recognize the program that he or she believes best promotes prevention of psychiatric disorders in children and adolescents with a contribution of \$2,000. Contributions to this fund are encouraged.

In the midst of a mature career in academic medicine in the Departments of Psychiatry and Pediatrics, caring for children in a tertiary health care setting, I became activated to prevention. Aware of how far down the road of their malady my patients had come before I even met them, I began to think how much more could be done if interventions were provided sooner. I and my trainees were frustrated because of gerrymandered systems and straitened funding barred our patients from getting earlier care, or family support, or community-level services, and limited even what services we could provide at the tertiary level. So, I gravitated toward consultations and situations that allowed better understanding and influencing mental health policy. This began with working from within the University to extend contract activities to include public mental health child and adolescent service settings. In 1998, I accepted a position as Medical Director, State of California Department of Mental Health.

This position encompasses statewide responsibility for both inpatient and outpatient care for adults as well as children. As the Director/Commissioner puts it, the job description is 90% “other duties as required.” Nonetheless, he has supported my pursuit of active liaison with other departments serving children, sharing state administrative data for quality improvement studies, partnering with University centers of excellence, and, via my University role, getting important findings published.

Building on this opportunity, I have been able to obtain or deploy funding for a number of projects to prevent or treat emerging child psychopathology. These projects have been carried out in the mental health system, in the public health system, with the health care services department, with University partners, with national organizations, and in multi-state collaborative projects. At the same time, I have kept grounded by continued part time consulting and teaching

Such projects are not scripted by existing policy nor do they come with the territory of the Medical Director position. They are impossible to do alone, and given silo-ed

funding, usually impossible to do within a department. They are possible only by bridging activities of different departments and institutions, and this is possible only by building relationships across usual boundaries. It is essential to keep one's sights on a vision of prevention, and to adjust the focus when necessary. Pilot programs are only as good as the path, or way they pilot; that way must include structural change for sustained funding or maintenance of effort. Examples are building personnel and administrative infrastructure to serve preschool children with mental health disorders, promoting change in policy requirements for standardized screening for well child visits, for screening for pre-conception and prenatal risk, for recognition and treatment of postpartum and maternal depression. Achieving and sustaining such structural and funding modifications allows us to change "business as usual" so that prevention is more possible, and we can meet the maladies that afflict our children early on their way to producing preventable suffering. – *Penelope Knapp, M.D., 2009*

Dr. Knapp presents, "Meet the Malady on Its Way: The Case for Prevention of Psychopathology," during Honors Presentation 2 on Thursday, October 29 from 8:00 to 8:50 a.m.



AACAP NORBERT AND CHARLOTTE RIEGER PSYCHODYNAMIC PSYCHOTHERAPY AWARD TO LENORE C. TERR, M.D.



The AACAP Rieger Psychodynamic Psychotherapy Award, supported by the Norbert and Charlotte Rieger Foundation, provides \$4,500 to recognize the best published or unpublished paper written by a member of AACAP. The winning paper addresses the use of psychodynamic psychotherapy in clinical practice and fosters development, teaching and practice of psychodynamic psychotherapy in child and adolescent psychiatry.

Receiving the AACAP Norbert and Charlotte Reiger Award in Psychotherapy has been both a great honor and a pleasant surprise for me. Though I have employed play, art, and talk with children for all of my professional life—and have worked on questions of treatment for the later part of that same life—I have always been an eclectic clinician, adhering to fundamental Freudian principles while utilizing any other reasonable technique that is effective. In the case of psychic trauma, which has been the research focus of my career, I found I could be innovative as well as replicative. Traumatized children and teens need talk, play (and sometimes medication) that go past what Freud and his followers were able to do with their focus on the “inner” individual. In granting me their “psychodynamic psychotherapy” award, the Rieger Committee showed all of us in child/adolescent psychiatry that they are willing, as well, to move creatively into new realms of talking cures beyond Freud. – *Lenore C. Terr, M.D., 2009*

Summary: In doing psychotherapy with children who have been traumatized, three mechanisms of recovery are essential—*abreaction* (emotional expression regarding the event[s]), *correction* (fantasized or real actions aimed at changing similar events), and *context* (thinking the event through with perspective and understanding). In today’s lecture, I will deal only with context, the newest and least well-understood treatment principle of the three.

The talk is divided into three sections: (1) how new *contexts* appear normally during child development; (2) how *context* appeared in the normal children and adolescents in my studies of the Challenger and Columbine disasters; and (3) how *context* was used clinically in five of my cases of childhood trauma. Whether a child plays or talks in therapy and whether a child is medicated or not, *context* enables the youngster to understand how his or her trauma fits into the worlds of history, nature, spirituality, personal ambition, the arts—in fact, wherever the child’s interests lie. *Context* helps a child master trauma in one extremely important way—by forming a new and broader perspective on a trauma, the child becomes able to see the ordeal as an episode in life—not as the central theme to his entire life.

This talk in written form will appear in the 2009 (Vol. 64) edition of the *Psychoanalytic Study of The Child*. It is dedicated to the memory of Paulina Kernberg, M.D. I wish to express my deep gratitude to the Norbert & Charlotte Reiger Foundation and the Psychodynamic Psychotherapy Committee of the Academy for granting me this distinctive honor.

Dr. Terr's presentation has been canceled and will be rescheduled for AACAP's 57th Annual Meeting, October 26-31, 2010 in New York, NY.

AACAP NORBERT AND CHARLOTTE RIEGER SERVICE PROGRAM AWARD FOR EXCELLENCE TO W. PETER METZ, M.D. AND THE COMMUNITIES OF CARE PROGRAM AT THE UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL



The 2009 Norbert and Charlotte Rieger Service Program Award for Excellence recognizes W. Peter Metz, M.D., and the Communities of Care program in the Department of Psychiatry of the University of Massachusetts Medical School. Dr. Metz is Clinical Professor of Psychiatry and Pediatrics at UMass Medical School and UMass Memorial Medical Center.

Dr. Metz has been interested and involved in community-based systems of care for many years, leading to his initiation and continuous leadership of Communities of Care over the past 10 years, as well as within professional and educational organizations. He has been a member of the Work Group on Community-Based Systems of Care since 2003 where he has been an active participant in multiple projects, including presenting work on systems of care at AACAP and the American Association of Directors of Psychiatry Residency Training meetings, as well as publishing in this area. As a former child psychiatry division director and residency training director at UMass, he has been active in promoting System of Care training and administrative activities at UMass Medical School and UMass Memorial Medical Center.

The award honors Dr. Metz's initiation and continuous leadership over the past 10 years of Communities of Care (CoC). The mission of CoC is to promote the healthy development of youth with serious emotional disturbance (SED) and their families by application of the values, principles, and practices of a system of care orientation through family-driven, youth-guided service delivery; training and education including implementation of evidence-based practices; and evaluation and research. Supported by two 6-year Substance Abuse and Mental Health Administration service grants and by multiple State and private contracts, CoC has promoted System of Care values, principles, practices, and outcome measurement, with an emphasis on wraparound service delivery, to approximately 800 youth and their families. The training arm of CoC, the Training and Learning Collaborative, has provided training and coaching in strength-based, collaborative work with families to over 20 organizations and over 2,000 individuals at the local, state and national levels from a wide range of backgrounds including youth and family members, and professionals in social work, psychology, nursing, and pediatrics/psychiatry/child psychiatry.

Through the course of its development, Communities of Care has been an increasingly important resource to the Commonwealth of Massachusetts regarding its progression towards implementation of a state-wide capacity for provision of intensive home and community-based services through the Child Behavioral Health Initiative (CBHI), as a result of the Rosie D class action law suit filed against the State. Dr. Metz was an expert witness at the trial and he has served on the State-

level oversight body for this effort, the CBHI Advisory Council, since its inception, and is co-chair of the of the CBHI committee on Culturally Competent Best and Promising Practices.

Dr. Metz presents, “Communities of Care: Ten Year Experience with Supporting the Establishment of a System of Care,” during Honors Presentation 3 on Thursday, October 29 from 9:00 to 9:50 a.m.

AACAP NORBERT AND CHARLOTTE RIEGER AWARD FOR SCIENTIFIC ACHIEVEMENT TO JOHN T. WALKUP, M.D.



The AACAP Rieger Award for Scientific Achievement is supported by the Norbert and Charlotte Rieger Foundation. This award of \$4,500 recognizes the best paper published in the Journal of the American Academy of Child and Adolescent Psychiatry from June 2008-June 2009.

This award recognizes John T. Walkup, M.D., for his paper, “Randomized Controlled Trial of a Paraprofessional-Delivered In-Home Intervention for Young Reservation-Based American Indian Mothers,” published in the June 2009 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*.

It is a great honor to accept the Norbert and Charlotte Rieger Award for Academic Achievement on behalf of our tribal partners, the White Mountain Apache Tribe and the Navajo Nation, and the faculty and staff of the Center for American Indian Health at the Johns Hopkins Bloomberg School of Public Health. American Indian youth and their families face the greatest health disparities of any minority or ethnic group in the United States. Despite these overwhelming challenges to American Indian communities, our tribal partners have not lost hope or resolve. Indeed, the Apache and Navajo have demonstrated a constellation of strengths and traditions that were critical to success of this project and to the dissemination of these interventions to other Native communities.

The Navajo Nation occupies 27,000 square miles in the states of Arizona, New Mexico, and Utah. Navajoland (Diné Bikéyah) is one of the most beautiful and fascinating location in all of North America. The total Navajo population is ~300,000 with upwards of 180,000 living on reservation lands. The Navajo people are one of the most culturally rich indigenous American Indian populations, having preserved their language, culture and national identity despite a history of military, political and cultural oppression. The Navajo Nation, whose seat of government is in Window Rock Arizona, was established as a sovereign nation in the 1920’s.

The White Mountain Apache Reservation occupies over 2,600 square miles in east-central Arizona Tribe and is roughly the size of Delaware. Reservation lands are some of the most beautiful high mountain plains lands that include large elevation changes from the Salt River Canyon at 2600 feet to the summit of Mount Baldy, one of the sacred peaks of the White Mountain Apache, at 11,400 feet. The White Mountain Apache tribe has ~15,000 members with the majority of the population living in and around Whiteriver, the seat of Tribal government. Much like the Navajo the Apache have a complex traditional culture that centered on the Apache language and traditional ceremonies and rituals.

The Center for American Indian Health at the Johns Hopkins Bloomberg School of Public Health was founded in 1991, and has a 30 year history of collaboration with Indian reservations/tribes. The implementation of the Center's mission—to work in partnership with tribes to raise the health status and self-sufficiency of American Indians to the highest possible level through research, training and service—has reached members of more than 30 tribes from at least 20 states across the U.S. The Center's administrative and academic headquarters are in Baltimore and Albuquerque, with nine research and service sites on reservation lands in AZ and NM, staffed by more than 45 American Indian paraprofessionals, nurses and other health professionals.

As with any large scale research project there are many people to thank for their part in this project's success: the leadership of the Navajo Nation (President Joe Shirley, Jr.) and White Mountain Apache Tribe (Chairman Ronnie Lupe, Vice Chair Woman Margaret Baha-Walker) and their respective tribal councils whose commitment to family and community provided the foundation of support on which we built the Family Spirit intervention; the doctors and nurses from the Indian Health Service who so strongly supported our efforts to improve the lives of teen mothers and their children; and the tribal review boards including the Navajo Nation Human Research Review Board lead by Ms. Beverly Becenti-Pigman and the White Mountain Apache Division of Health Programs lead by Judy DeHose. We also want to thank the young Navajo and Apache women who volunteered to participate in this project as their efforts have the chance to change the outcomes of young American Indian women and their children for generations.

Most importantly, we want to thank our Apache and Navajo staff who worked tirelessly with the young mothers and children in this project. Their commitment to prepare these young mothers for parenthood was inspiring. We are indebted to the leadership of Mathu Santosham, founding Director for the Center for American Indian Health at Hopkins, and Allison Barlow, Director of Behavioral Health within the Center, whose vision and dedication allow all of us who worked on this project to be successful. Thanks goes to our Baltimore and Albuquerque staff who work day to day behind the scenes to allow the work in the field to go smoothly.

We would also like to thank our families who understood the tremendous need for research to improve the lives of Native Americans and who made sacrifices so that we could travel and work long hours.

We particularly wanted to thank the Academy. It is heartening to know that clinical research can be recognized for its science, innovation and implications for improving the lives of children and families.

Doug Novins, MD wrote a terrific editorial in JAACAP about our work and captured as well as anyone the challenge and the opportunities of community based participatory research in Native Communities.

Thanks also goes to those agencies and foundations who funded this project without them this work would not have been possible: Substance Abuse and Mental Health Services Administration (SAMHSA Grant #'s: UD1SP08860; UD1SP09588); the Ford Foundation, Anne E. Casey Foundation and C.S. Mott Foundation. – *John T. Walkup, M.D., 2009*

Dr. Walkup presents, “Community- Based Participatory Research in Native American Communities,” during Honors Presentation 1 on Thursday, October 29 from 7:00 to 7:50 a.m.

AACAP GEORGE TARJAN
AWARD FOR
CONTRIBUTIONS IN
DEVELOPMENTAL
DISABILITIES TO PETER
SZATMARI, M.D.



This award recognizes a child and adolescent psychiatrist and AACAP member who has made significant contributions in a lifetime career or single seminal work to the understanding or care of those with mental retardation and developmental disabilities. These contributions must have national and/or international stature and clearly demonstrate lasting effects. The contributions may be in areas of teaching, research, program development, direct clinical service, advocacy or administrative commitment. This award provides \$1,000 to the recipient.

This year's recipient of the George Tarjan Award is Peter Szatmari, M.D., Head of Psychiatry at McMaster University.

I have been very extremely fortunate to have had several wonderful mentors and colleagues that have helped me throughout my career. David Taylor showed me that a career in developmental disabilities could be intellectually exciting. Dan Offord instilled in me a desire to ensure that advocacy and social justice were an integral part of my career as a clinician-scientist. Marshall Jones taught me to think critically and managed to combine the skills of a mentor and a colleague at the same time, a rare ability. Kathleen Merikangas taught me the rudiments of genetic epidemiology and has never ceased to emphasize the importance of the phenotype in unlocking the genetics of complex disorders. My friends and colleagues at the Offord Centre for Child Studies have provided me a secure base and together we have worked on many exciting opportunities. Susan Bryson has worked with me for over twenty-five years and has brought an intellectual perspective to our work that I have always deeply admired. I can only briefly mention my many colleagues in the Autism Genome Project and the Canadian Pathways Study who have taught me so much and whose friendship and guidance I deeply value. In the end though, I must thank the children with ASD and their families for sharing both their successes and their tragedies with me. Those experiences have given me both with the questions to pursue and the insights into the answers of those questions. Working with these families has provided me with the motivation to persevere even if it sometimes feels as if the answers become more elusive as we gain in understanding.

– Peter Szatmari, M.D., 2009

Dr. Szatmari presents, “Autism Spectrum Disorders: The Disease, the Illness and the Predicament,” during Honors Presentation 9 on Saturday, October 31 from 9:30 to 10:20 a.m.

AACAP KLINGENSTEIN
THIRD GENERATION
FOUNDATION AWARD
FOR RESEARCH IN
DEPRESSION OR
SUICIDE TO MANI N.
PAVULURI, M.D., PH.D.



The AACAP Klingenstei Third Generation Foundation Award for Research in Depression or Suicide is supported by the Klingenstei Third Generation Foundation. The award gives \$5000 for the best paper on depression/and/or suicide published in the JOURNAL OF AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY during the past year.

This award recognizes: Mani N. Pavuluri, M.D., Ph.D. for her paper “Neurocognitive Function in Pediatric Bipolar Disorder: Three-Year Follow-up Shows Cognitive Development Lagging Behind Healthy Youth,” published in the March 2009 issue of the *Journal of American Academy of Child and Adolescent Psychiatry*.

ABSTRACT:

Objective: Longitudinal follow-up of neurocognitive functioning in individuals with pediatric bipolar disorder (PBD) was conducted to characterize the developmental trajectory of cognitive disabilities in this disorder. **Method:** Patients with PBD (n = 26) and healthy controls (HC) (n = 17) (mean age = 11.66 ± 2.70 years) completed cognitive testing at baseline, and then again at a three year follow-up. Groups were matched at baseline on age, sex, race, parental socioeconomic status, general intelligence and single word reading ability. The PBD group received treatment guided by a standardized medication algorithm over the three year period. A battery of neuropsychological tests was administered to assess attention, executive function, working memory, verbal memory, visual memory, and visuo-spatial perception at baseline and follow-up. **Results:** At baseline and follow-up, patients showed deficits in all the examined domains. At three year follow-up, developmental progress in executive functions and verbal memory was significantly less in patients with PBD than HC. Improvement on attention, working memory, visual memory and visuospatial perception tasks in patients with PBD was comparable to that of HC, but patients with PBD remained impaired in all domains relative to HC. **Conclusions:** The developmental delay in some neurocognitive functioning in PBD suggests that the illness disrupts cognitive development with potential life-long implications for reduced functional ability. Treating bipolar symptoms does not appear to prevent the lag in cognitive development. This dysmaturation may be a direct effect of the illness on brain function, or it may represent indirect consequences of psychopathology or medications on cognitive development. *J. Am. Acad. Child Adolesc. Psychiatry* 2009, 48(3):299-307

I am touched by the generosity of the Klingenstei Foundation and thankful for the team in our Academy that chose to include and select our paper for this distinction. I feel privileged to receive this award and I celebrate the reasoning behind it, for it is meant to impact the way we think of cognitive function in child psychiatry.

This publication is the end result of countless hours of testing, data collection, analyses and discussions amongst my team, which includes brilliant people such as, Drs. Amy West, Scot Hill, Kittu Jindal and John Sweeney let alone all of the research assistants, parents and children who endured days of testing! It is all worth it if we can collectively make a difference in the way our research informs clinical practice and helps seriously ill children.

It is high time we consider cognitive function as an “extended phenotype.” We have *DSM* criteria to identify the clinical symptoms of mania and depression that lead to medication and psychological treatment to modulate affect. However, there is no forum for recognizing the frequently associated with neurocognitive dysfunction, let alone treatment. The American Journal of Psychiatry (2006) published our results which showed that medication to treat bipolar diathesis did not alleviate cognitive impairment. Our findings, documented in Biological Psychiatry (2006), further underscored that neurocognitive impairment impacted academic functioning which could cripple chances of success for children at school. By this time, I was getting desperate to see if optimal medication management and psychotherapy over 3 years would show some progress. That led to the current study in our Academy Journal (JACAAP). Unfortunately, executive functions and verbal memory did not change over time in patients. An equally alarming fact was, despite similar degree of improvement in patients with bipolar disorder and healthy controls on attention, working memory, visual memory and visuospatial perception tasks, patients continued to do poorly relative to healthy peers with their baseline cognitive functioning being much lower than their healthy peers.

We are continuing to examine the interlinked social cognition with talented colleagues such as Drs. Lindsay Schenkel, Rachel Jacobs, Lisa Stanford and Deborah Little. So far, we found that bipolar youths are unable to recognize affect accurately (also documented by intramural NIMH team led by Dr. Leibenluft), figure out the meaning of situations (Theory of Mind), and accurately recall what they read, all of which are worse in relation to negative emotions. This opened up another door of inquiry: exactly how are cognitive control and cognitive brain circuitry linked to affect regulation and brain affective circuitry. Therefore, with the help of our cognitive neuroscientist Dr. Alessandra Passarotti (who incidentally wrote the first paper in NeuroImage on face recognition circuitry in healthy children) and so many others, we designed exciting new paradigms to probe these brain circuits supporting cognitive and affective functions, and their interface. I feel so fortunate to be in a position to continue this line of research to probe how emotions and thinking influence each other, and find biomarkers of illness and treatment in bipolar disorder in developing children and adolescents.

I am thankful to Dr. Sweeney who demands top flight science in analyses and interpretation. He often instructs me that what we put down on paper remains in print for years to read and “if it makes sense to just the four best neuroscientists in the world that you want to impress, that be it!” I would like to add that, as a Child Psychiatrist, I want our findings to help scientists and clinicians alike to consider potential cognitive impairment while educating families and teachers, and aim for a better climate for intervention although these hard-wired biological problems are stubborn to reverse. Recognizing cognitive problems and reaching out to these children with compassion is like recognizing the women’s right to vote! – *Mani N. Pavuluri, M.D., Ph.D., 2009*

Dr. Pavuluri presents, “Neurocognitive Dysfunction in Bipolar Disorder: A Child’s Right to be Understood,” during Honors Presentation 7 on Saturday, October 31 from 7:30 to 8:20 a.m.

ACAP ROBERT CANCRO
ACADEMIC
LEADERSHIP AWARD
TO DANIEL WALL



The Robert Cancro Academic Leadership Award recognizes a currently serving General Psychiatry Training Director, Medical School Dean, CEO of a Training Institution, Chair of a Department of Pediatrics, or Chair of a Department of Psychiatry for his or her contributions to the promotion of child and adolescent psychiatry.

This award recognizes Daniel Wall, President and CEO of the Emma Pendleton Bradley Children's Psychiatric Hospital.

I am honored to receive this award and I am grateful to my colleagues at Bradley Hospital and the Brown Medical School for their nomination. I never expected such recognition because my career development has been unique, to say the least. While pursuing a finance career in the late 1960's, majoring in accounting and needing a part time job, I was exposed to the field of mental health as a minimum wage "mental health worker" in an adult psychiatric hospital. This experience was not only personally rewarding but also caused me to decide to pursue a career in healthcare finance. Upon graduation from college I went to work as an entry level accountant in a general community hospital, realizing that I needed to utilize my education to increase my earning power, but I continued to work part time in mental health with the hope that someday I could pursue a finance position in the mental health arena. As my career progressed in health care finance I was exposed over 15 years to every aspect of hospital financial administration and was fortunate to have the opportunity to join Bradley Hospital in 1988 as its Chief Financial Officer. My grassroots familiarity with the mental health environment in combination with my healthcare financial experience proved invaluable as I led the hospital through a positive financial turnaround without major disruption to quality of services provided. My success as CFO led me to be appointed CEO/President in 1992.

I believe that the most important thing a CEO can contribute to an academic child psychiatric institution is to create an intellectually stimulating environment, where decision making is clear, organization structure is communicated, financial information is available and transparent, mission priorities are stated clearly and evidenced with resource allocation, all employees are respected for their contributions, trusted and treated fairly, risk and change are encouraged and employees ideas drive the organizational direction (as opposed to my potentially narrow focus as a finance based thinker). Disagreements and conflicts of resource allocation need to be addressed directly, and I often find myself being the family therapist as I attempted to keep the team together and stay focused on the bigger team mission, not always easy with analytical child psychiatrists and other clinically trained staff. This environment creates job satisfaction, pride in being part of a

quality academic enterprise, career opportunities, high morale, and a willingness to sacrifice when needed during difficult financial periods. I've learned that motivated and creative human beings need more than just financial reward to maximize their potential and contribution. They need leadership that is inclusive, respectful and supportive through good times and bad. – *Daniel Wall, 2009*

Mr. Wall presents, “Pitching Defense and the Three Home Run Homer: Managing the Braldey Dynasty,” during the Residency Program Directors’ Luncheon on Friday, October 30 from 12:30 to 2:00 p.m.



AACAP ROBINSON CUNNINGHAM AWARD FOR BEST PAPER BY A RESIDENT TO HANNA STEVENS, M.D., PH.D.



The AACAP Robinson Cunningham Award for the Best Paper by a Resident is named after J. Franklin Robinson, M.D., and James M. Cunningham, M.D., two former AACAP Presidents who dedicated their lives to improving and expanding psychiatric services for children. This award recognizes an outstanding paper on some aspect of child and adolescent psychiatry started during residency and completed within three years of graduation.

This award recognizes Dr. Stevens for her paper, "Risk and Resilience: Early Manipulation of Macaque Social Experience and Persistent Behavioral and Neurophysiological Outcomes," published in the February 2009 issue of the *Journal of American Academy of Child and Adolescent Psychiatry*.

ABSTRACT:

Objective: To review the contributions of research on non-human primates, specifically macaque monkeys, to the understanding of early social stress and its effects on behavior and neurophysiology. **Method:** Review and synthesis of two bodies of work on macaque monkeys and early social manipulation: peer-rearing and variable foraging demands. The literature was searched with Medline using key terms Macaque, Variable Foraging, Peer Rearing. The reference lists of these articles were also used to generate potential studies for review. **Results:** Non-human primate macaques show similarities to humans in their social development and functioning. Peer-rearing of young macaques and rearing of young macaques with mothers experiencing variable foraging conditions both result in increased anxious, impulsive, and aggressive temperament and behavior, more reactive stress physiology, altered neurotransmitter functioning, and immune and metabolic changes. Functional variants of specific genes that code for neuromodulators are mediators of these effects. **Conclusions:** Disrupted social relationships during macaque rearing contribute to the risk of developing emotional and neurophysiological disturbance. In the face of such disruption, certain genotypes contribute to resilience. This can be alternately stated that for animals of high-risk genotypes, resilience is conferred by quality relationships during rearing. This interaction of genetics with early social environment also applies to child mental health, implicating biological mediators identified in macaques as contributing to more complex outcomes in humans.

I feel very honored to be receiving the Robinson-Cunningham award from AACAP. I am proud to be affiliated with the work summarized in the review that is recognized in this award and grateful that I had the opportunity to write it. It was a pleasure to work on this review with one of my most important mentors, Jim Leckman, and my generous and wise colleagues, Stephen Suomi and Jeremy Coplan. I could not have written this review without the guidance, innovative vision

and hard work of all those who have been involved in creating the Integrated Residency Programs in Child, Adult and Research Psychiatry. When I started in the Solnit Integrated Program at Yale School of Medicine 5 years ago, I was excited about the possibility of conducting neuroscience research to help elucidate childhood psychiatric disorders but I had little insight into how I would do this. Fittingly, this paper and the process of writing it reflect my own research and clinical development through residency. My progress began thanks to the guidance of my training directors, Dorothy Stubbe and Andrés Martin, who provided me with excellent experiences in adult and child psychiatry early in my residency. Working with young children and mothers with mental illness with my great mentors, Nancy Close and Neill Epperson, informed my interest in using model systems of early childhood experience to understand behavioral disorders of childhood. At the same time, I was fortunate to begin working with my research mentor, Flora Vaccarino who gave me an excellent developmental neuroscience framework and furthered my interest in understanding external influences on neurodevelopment. I met my co-authors at a small “Risk and Resilience” conference at Yale, heard their presentations on macaque models of early social stress, and was asked to report on this ground-breaking work using both my child psychiatric and neuroscience perspectives. In some of the protected research time within my training pathway, I was able to read this literature and summarize much of the work that has arisen from Dr. Suomi and Dr. Coplan’s two exciting model systems. Motivated by questions about the HPA axis raised by this work, I developed my own research project to study the impact of prenatal stress on brain development and the interaction of genetic factors with prenatal stress. I hope to be able to translate my own research findings as was done in this macaque review—to have relevance for making clinical decisions with young families and contributing to child psychiatry’s understanding of risk factors and resiliency with a more comprehensive understanding of neurodevelopment. – *Hanna Stevens, M.D., Ph.D., 2009*

AACAP SIDNEY BERMAN
AWARD FOR THE
SCHOOL-BASED STUDY
AND INTERVENTION
FOR LEARNING
DISORDERS AND
MENTAL HEALTH TO
SHERYL KATAOKA,
M.D., M.S.



Albert Abramson, President of the Abramson Family Foundation, established The Berman Fund for the Study and Treatment of Learning Disabilities and Mental Illness to honor Dr. Sidney Berman for his dedication to child and adolescent psychiatry and research on learning disabilities. A founding member of the Academy, Dr. Berman was a President of AACAP (1969-1971).

This award recognizes Sheryl Kataoka, M.D., M.S., for her outstanding research aimed at improving the access to and quality of mental health care for ethnic minority children and their families through school-based services. Dr. Kataoka has been investigating methods of delivering evidence-based mental health care in schools to students in both general and special education. Her research has led to a greater understanding of the role of schools in decreasing disparities in mental health care for ethnic minority children and their families.

Dr. Kataoka was one of the original investigators to help develop and evaluate the Cognitive-Behavioral Intervention for Trauma in Schools program (CBITS), an evidence-based treatment program for traumatized youth who have been exposed to a wide variety of violence in their community. Initially developed for a multicultural student population, CBITS has now been disseminated in schools across the U.S. and internationally and has been recognized as one of the leading school-based trauma interventions. Most recently, Dr. Kataoka, along with colleagues Dr. Audra Langley from UCLA, Drs. Bradley Stein and Lisa Jaycox from RAND and Dr. Marleen Wong from USC conducted a year long CBITS Learning Collaborative sponsored by the National Child Traumatic Stress Network, which led to five sites across the country using a quality improvement method to adopt and implement CBITS for hundreds of students with posttraumatic stress symptoms. Recently funded by NIMH as part of the American Recovery and Reinvestment Act, Dr. Kataoka will build upon this Learning Collaborative experience to further examine how schools can best implement evidence based interventions such as CBITS.

ABSTRACT:

Objective: There is growing evidence that mental health and school functioning are intertwined, yet all too often our mental health interventions narrowly focus on symptom reduction with little attention to functional outcomes important to students and families, such as classroom behavior and academic progress. In adults, psychiatric treatments have been linked to improvements in employment and quality of life, but little data is available on similar outcomes for child mental health interventions. **Method:** Greater collaboration is needed between educators and mental health professionals to better understand the relationship between education and mental health and to develop interventions that support students on multiple domains.

Result: This presentation will review the historical trends of mental health services in schools and the research evidence that supports school-based interventions in the context of the school environment. An example of a community-academic partnership with a local school district will be described as well as potential opportunities for providing services that meet the educational as well as mental health needs of children. **Conclusion:** Future research is needed to further develop interventions that broadly support students in schools and the long-term impact as they transition into adulthood.

Dr. Kataoka presents, “Making the Grade: Partnering with Schools to Support Students,” during Honors Presentation 4 on Thursday, October 29 from 12:15 to 1:05 p.m.

AACAP BEATRIX A.
HAMBURG AWARD FOR
THE BEST NEW
RESEARCH POSTER BY
A CHILD AND
ADOLESCENT
PSYCHIATRY RESIDENT
TO LIWEI HUA, M.D.,
SUPPRTED BY THE
GREENWALL
FOUNDATION



The AACAP Beatrix A. Hamburg Award for the Best New Research Poster by a Child and Adolescent Psychiatry Resident was established in 1996 through a grant from the Greenwall Foundation in honor of Beatrix A. Hamburg, M.D., a trustess of the foundation. Dr. Hamburg was the President of the Williams T. Grant Foundation and is a Fellow of the AACAP. This award of \$1,000 honors her commitment to the education and development of young investigators.

This award recognizes Dr. Hua for her poster, “Do Differences Exist in Psychosocial Functioning, Familiality, and Psychiatric Comorbidity Between Bipolar Disorder Youth With and Without Psychotic Features?”

It is an honor to have been chosen to receive the Beatrix A. Hamburg award for my project with my mentor Timothy Wilens, M.D., at the Massachusetts General Hospital in the Department of Child and Adolescent Psychiatry. I was fortunate enough to have met Dr. Wilens during my interview at MGH, and since then, he has been exceedingly supportive of my desire to engage in clinical research. Without his encouragement and guidance, I could not have completed this project. In addition, Ms. Patricia Wong and Ms. MaryKate Martelon offered invaluable help with the data analysis and reporting of this work. Dr. Janet Wozniak also offered her support and expertise on multiple occasions. Finally, I must thank my training director, Dr. Eugene Beresin, for constantly cheering me on and encouraging my research interests. I am grateful to AACAP for giving me this wonderful opportunity to present this work. – *Liwei Hua, M.D., 2009*

Dr. Hua presents, “Do Differences Exist in Psychosocial Functioning, Familiality, and Psychiatric Comorbidity Between Bipolar Disorder Youth With and Without Psychotic Features?” during New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.

AACAP ELAINE
SCHLOSSER LEWIS
AWARD FOR RESEARCH
ON ATTENTION-
DEFICIT DISORDER TO
JAMES J. MCGOUGH,
M.D.



The AACAP Elaine Schlosser Lewis Award for Research on Attention-Deficit Disorder supported by the AACAP Elaine Schlosser Lewis Fund was established by council in 1994. The award of \$5,000 is given annually for the best paper published in the JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY on attention-deficit disorder, written by a child and adolescent psychiatrist and published between June 2008 and June 2009. This award is named in memory of Dr. Owen Lewis's late mother, Elaine Schlosser Lewis, who was a teacher and advocate on behalf of children.

This award recognizes James J. McGough, M.D., for his paper, "CBCL Pediatric Bipolar Disorder Profile and ADHD: Comorbidity and Quantitative Trait Loci Analysis," published in the October 2008 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*.

ABSTRACT:

Objective: We used the pediatric bipolar disorder profile of the Child Behavior Checklist (CBCL-PBD) to distinguish patterns of psychiatric comorbidity and search for quantitative trait loci (QTL) in a genomewide scan of affected ADHD sibling pairs. **Methods:** 540 subjects with ADHD, ages 5 to 18, were assessed with the Schedule for Affective Disorders and Schizophrenia for School-Age Children (KSADS-PL) and CBCL. Parents were assessed with the Schedule for Affective Disorders and Schizophrenia-Lifetime Version and KSADS-PL for disruptive behavioral disorders. Comorbidity patterns were contrasted based on the CBCL-PBD profile. A QTL variance component analysis was used to identify potential genomic regions that may harbor susceptibility genes for the CBCL-PBD quantitative phenotype. **Results:** The CBCL-PBD classification was associated with increased generalized anxiety disorder ($p=.001$), oppositional defiant disorder ($p=.008$), conduct disorder ($p=.003$), and parental substance abuse ($p=.005$). A moderately significant linkage signal (multipoint maximum lod score = 2.5) was found on chromosome 2q. **Conclusion:** The CBCL-PBD profile distinguishes a subset of ADHD patients with significant comorbidity. Linkage analysis suggests certain genomic regions that merit further investigation for genes predisposing to severe psychopathology. *J. Am. Acad. Child Adolesc. Psychiatry* 2008; 47(10):1151.

I am particularly honored and privileged to have been selected by the Academy as the recipient of the 2009 Elaine Schlosser Lewis Award for Research on Attention Deficit Disorder. It was my hope in pursuing this project to find common ground among dedicated clinicians who disagree on fine points of semantics and nosology, but who remain committed to improving the lives of some of our most seriously impaired youth. Our identification of genomic regions that might harbor risk genes for severe psychopathology stands on the work of many other astute clinician-

investigators, both within the Academy and in the larger field of child mental health. I am particularly indebted to Susan Smalley, Ph.D. for her leadership of the UCLA ADHD Family Genetics Project, my other co-investigators on the UCLA team, and all our participating families. I also wish to acknowledge members of the international ADHD Molecular Genetics Network, who provide both guidance and inspiration to these efforts. Finally, this work is dedicated to the memories of Dr. Dennis Cantwell, whose passion for teaching and empirically driven ADHD research continues to inspire, and Dr. Richard Todd, who championed the analysis of quantitative traits as a means to uncover genetic risk for psychiatric disorders.

– James J. McGough, M.D., 2009

Dr. McGough presents, “Child Behavior Checklist (CBCL) Pediatric Bipolar Disorder Profile and ADHD: Comorbidity and Quantitative Trait Loci Analysis,” during Honors Presentation 8 on Saturday, October 31 from 8:30 to 9:20 a.m.



AACAP PILOT RESEARCH AWARDS FOR JUNIOR FACULTY AND CHILD AND ADOLESCENT PSYCHIATRY RESIDENTS SUPPORTED BY LILLY AND COMPANY

The following AACAP Pilot Research Awards, supported by Lilly USA, LLC encourage junior faculty and child and adolescent psychiatry residents by providing grants to support pilot research. These awards are administered through the AACAP's Office of Research, Training, and Education and the AACAP Work Group on Research, under the direction of David Shaffer, F.R.C.P, F.R.C.Psych.

The 2007 Pilot Research Award, supported by Lilly USA, LLC, provided grants of \$9,000. The recipients and their projects are:

Fadi T. Maalouf, M.D.

University of Pittsburgh and American University of Beirut

Cognitive Control and Emotion Processing Impairments in Adolescent Depression: State vs. Trait?

Mentors: David A. Brent, M.D. and Mary L. Phillips, M.D.

Jonathan E. Posner, M.D.

Oregon Health & Science University

An fMRI Study of Emotional Regulation in Adolescents with ADHD On and Off of Psychostimulants

Mentor: Bonnie J. Nagel, Ph.D.

The 2008 Pilot Research Award, supported by Lilly USA, LLC, provided grants of \$15,000. The recipients and their projects are:

Opeoluwa Akinnusi, M.D.

State University of New York at Buffalo

Physician Monitoring for Second-Generation Antipsychotic Related Metabolic Syndrome in Pediatric Patients: How Are We Doing and What Can We Do Better? A Pilot Study

Mentor: Bruce D. Miller, M.D.

Thomas Fernandez, M.D.

Yale Child Study Center

Genetic Investigation of Complex Motor Stereotypies

Mentor: Matthew W. State, M.D., Ph.D.

Andrew J. Gerber, M.D., Ph.D.

New York State Psychiatric Institute, Columbia University Medical Center, and Queens Children's Psychiatric Center

An fMRI Investigation of Social Cognitive Deficits in Young Adults with Autism

Mentor: Bradley S. Peterson, M.D.

Michelle S. Horner, D.O.

University of Pittsburgh School of Medicine, Western Psychiatric Institute and Clinic

Assessment of Sustained Positive Affect in Depression through the Lifespan

Mentor: Greg J. Siegle, Ph.D.

Roger J. Jou, M.D., M.P.H.

Yale Child Study Center

White Matter Abnormalities in Autism: Implications for Long-Range Connectivity

Mentors: Ami Klin, Ph.D., Kevin Pelphrey, Ph.D., and Antonio Y. Hardan, M.D.

Justine Julia Larson, M.D., M.P.H.

Johns Hopkins School of Medicine

Understanding Barriers to Mental Health Care for Urban, Lower Income Families

Referred From Pediatric Care Settings

Mentor: Susan dosReis, Ph.D.

Han-chun Liang M.D., M.B.A.

Western Psychiatric Institute and Clinic, University of Pittsburgh Medical Center

Using Text-Messaging to Engage Depressed Adolescents in Cognitive Behavioral Therapy Homework

Mentor: Neal D. Ryan, M.D.

The AACAP Pilot Research Award Recipients present their new research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.

AACAP PILOT RESEARCH AWARD FOR ATTENTION DISORDERS SUPPORTED BY THE ELAINE SCHLOSSER LEWIS FUND TO GHOLSON J. LYON, M.D., PH.D.



The AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund, encourages junior faculty and child and adolescent psychiatry residents to pursue research careers by supporting pilot research with a grant of \$9,000. This award is administered through the AACAP's Office of Research, Training, and Education and the AACAP Work Group on Research, under the direction of David Shaffer, F.R.C.P, F.R.C.Psych.

Gholson J. Lyon, M.D., Ph.D. is a recipient of the 2007 AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund for his project, *“Improving Tic-Related Response Inhibition: The Effects of Dexmethylphenidate in Children and Adolescents with ADHD and Chronic Tic Disorders.”* Dr. Lyon’s project took place while he was at New York University Child Study Center and New York University Langone Medical Center. His mentors include Barbara Coffey, M.D., M.S., F. Xavier Castellanos, M.D., and Douglas Woods, Ph.D.

ABSTRACT:

Objective: This is a pilot study using a Tic Suppression Paradigm (TSP) to test whether dexamethylphenidate (dMPH) can facilitate tic suppression in children and adolescents with ADHD and TD or chronic tic disorder. Our primary hypothesis is that dMPH will improve reinforced tic suppression. A secondary hypothesis is that improved tic suppression by dMPH will be mediated by changes in response inhibition as scored by the Conners Continuous Performance Test (CPT). **Method:** Tic suppression effects and change scores on the CPT were calculated and used as a mediator variable in an analysis to predict changes from baseline in tic suppression abilities across medication conditions. **Results:** 56 candidates from our Tourette clinic were screened. 6 patients consented, 5 completed testing, and 5 other patients are waiting to be scheduled for consent and testing. Findings indicated significant tic suppression in 3 subjects during the reinforced tic suppression periods, with no significant rebound effects noted. With dMPH challenge, there was no tic exacerbation, and there was a significant reduction in overall tics during baseline, which correlated with improved attentional scores as measured on CPT.

Conclusions: Preliminary results of this study indicate replication of prior studies of behavioral tic suppression in youth with TD without ADHD; in addition, our results indicate tic reduction (and not tic exacerbation) with acute dMPH challenge in children and adolescents with ADHD and TD or chronic tic disorder. These data justify further experiments with larger numbers of subjects.

Thank you very much for selecting me for the Elaine Schlosser Lewis Pilot Award. This funding has allowed us (Drs. Barbara Coffey, Xavier Castellanos, Doug Woods and me) to set up this study and obtain preliminary data, which has now led to

larger funding from the Tourette's Syndrome Association. This was also my first grant as a principal investigator, which has helped me build skills in project and grant management. I will very much need these skills, as I am now starting a full-time research faculty position at the University of Utah in Salt Lake City. I feel privileged to have been selected for this award and for being able to conduct research with children, adolescents and adults with neuropsychiatric illnesses.

– Gholson J. Lyon, M.D., Ph.D. 2009

Dr. Lyon presents his research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.



AACAP PILOT RESEARCH AWARD FOR ATTENTION DISORDERS SUPPORTED BY THE ELAINE SCHLOSSER LEWIS FUND TO YUHUAN XIE, M.D.



The AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund, encourages junior faculty and child and adolescent psychiatry residents to pursue research careers by supporting pilot research with a grant of \$9,000. This award is administered through the AACAP's Office of Research, Training, and Education and the AACAP Work Group on Research, under the direction of David Shaffer, F.R.C.P, F.R.C.Psych.

Yuhuan Xie, M.D. is a recipient of the 2007 AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund for her project, *"The Effectiveness of Videoconferencing on Teaching Parent Training Skills to Parents of Children with ADHD."* Dr. Xie is at the University of California, Davis and her mentor is Julie Schweitzer, Ph.D.

ABSTRACT:

Objectives: To evaluate the effectiveness of group parent training on ADHD treatment taught through videoconferencing via a comparison between participants using traditional face-to-face parent training sessions and a group using teleconferencing. **Methods:** Twenty three subjects were enrolled in the initial study and 19 of them finished the 12 week parent training with 11 in the face-to-face session and 8 subjects in the videoconference session. Data from the 3 subjects who didn't finish the study were not included in the analysis due to lack of data on primary outcomes. Wilcoxon rank sum tests were performed to test if the acceptance by the parent and children of the program differed between the two groups: face-to-face ($n = 11$) and videoconferencing groups ($n = 8$). Mixed models were performed to model the effect of training modality on the different groups and test the improvement after parent training. **Results:** Our results indicated that parent acceptance on the mode of the communication did not significantly differ between groups ($p = 0.30$). Similarly, the acceptance of the overall program did not differ significantly between groups ($p = 0.55$). Parent training significantly improved parent-child relationship (PRQ rating scale) in regard to use of appropriate discipline skills ($p = 0.003$) and social skills rated by parents (SSRS scale) in the areas of cooperation ($P=0.001$), self control ($P=0.02$), and hyperactivity ($p=0.006$) without differences observed between groups ($p = 0.38$ for PRQ and $P>0.05$ for SSRS). Clinical Global Impression ratings demonstrated significant change after training on the Improvement ($p < 0.001$) and Severity scores ($p = 0.02$) with no group differences detected. Similarly, significant changes were observed on the Children Global Assessment Scale ($p = 0.009$) with no between-group differences ($p = 0.14$). Current results do not show significant changes in social skills rated by teachers and the core symptoms of ADHD by Vanderbilt. **Conclusions:** Our data suggests that parent training through videoconference is well accepted and is as effective as face-to-face sessions in

improving parent child relationship as well as parent-observed social skills and global functioning in children with ADHD.

Thank for the Elaine Schlosser Lewis Award. The opportunity allowed me not only to work closely with families who have children with ADHD, but also to learn unique aspects of a clinical study. I learned a great deal about the parents' caring, love, and hope for their children as well as their difficulties and frustrations dealing with the challenges ADHD children present. The experience taught me that families with children of ADHD need comprehensive services just as what the families with other developmental disorders such as pervasive developmental disorder need. I would like to thank my mentors at UC Davis, the team of ADHD program at UC Davis MIND Institute, and my family for the great support. I hope to continue to work with the team to generate a more comprehensive intervention to reach families in remote areas. – *Yuhuan Xie, M.D., 2009*

Dr. Xie presents her research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.

*AACAP PILOT RESEARCH
AWARD FOR
ATTENTION
DISORDERS
SUPPORTED BY THE
ELAINE SCHLOSSER
LEWIS FUND TO JOAN
M. DAUGHTON, M.D.*



The AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund, encourages junior faculty and child and adolescent psychiatry residents to pursue research careers by supporting pilot research with a grant of \$15,000. This award is administered through the AACAP's Office of Research, Training, and Education and the AACAP Work Group on Research, under the direction of David Shaffer, F.R.C.P, F.R.C.Psych.

Joan M. Daughton, M.D. is a recipient of the 2008 AACAP Pilot Research Award for Attention Disorders, supported by the Elaine Schlosser Lewis Fund for her project, *“Long-Acting Stimulant Treatment of ADHD in Young Children.”* Dr. Daughton is at the University of Nebraska Medical Center and her mentor is Christopher J. Kratochvil, M.D.

ABSTRACT

Objective: 1) To evaluate the effectiveness of Ritalin LA in the treatment of ADHD in 4- and 5-year-old children; and 2) To assess the tolerability of Ritalin LA in the treatment of ADHD in 4- and 5-year-old children. **Method:** This was an open-label, 8-week pilot study. Initial dosing and titration was done with short-acting methylphenidate, with conversion to Ritalin LA once an optimal twice-daily dose was identified (with a target dose of 1mg/kg/day). Follow-up was weekly during the first month and bi-weekly during the second month. Parents received parent education training throughout the study. The primary outcome measure for this study was the ADHD-Rating Scale-IV (ADHD-RS-IV). We also obtained Conners Teacher and Parent rating scales at beginning, middle, and end of the study. **Result:** Significant reduction in ADHD-RS-IV total scores were seen as well as reduction in both subtype scores. Furthermore, a reduction in t-scores on both the Conners Parent and Teacher rating scales was seen. Adverse events included increased nail biting and significant inactivity at the higher doses of Ritalin LA. No serious adverse events occurred. No clinically significant changes were seen in any vital signs or on ECG. **Conclusion:** Ritalin LA appears to be an effective treatment for ADHD in preschool-age children with limited side effects. Careful medication titration may contribute to the effectiveness as well as tolerability seen thus far in this study. Double-blind, PBO controlled studies will need to be performed to confirm the results of this study.

I am very grateful for the opportunities the Elaine Schlosser Lewis Award has provided me. I have learned many of the intricacies of designing, executing, and evaluating a research study. It has been invaluable to work with my mentor and learn from his vast experience and knowledge. I have discovered a new set of skills which is both helpful clinically as well as in the research arena. I hope to continue to

pursue research studies which will be informative and helpful to the field of Child and Adolescent Psychiatry. – *Joan M. Daughton, M.D. 2009*

Dr. Daughton will present her research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.



AACAP EDUCATIONAL OUTREACH PROGRAM FOR CHILD AND ADOLESCENT PSYCHIATRY RESIDENTS SUPPORTED BY AACAP

The AACAP Educational Outreach Program provides the opportunity for child and adolescent psychiatry residents to receive a formal overview of the field of child and adolescent psychiatry, establish mentor relationships with child and adolescent psychiatrists, and experience the AACAP Annual Meeting. Participants are exposed to the breadth and depth of the field of child and adolescent psychiatry, including research opportunities, alternative career pathways, and various networking opportunities. Participation in this program provides participants financial assistance to attend the AACAP Annual Meeting.

Nancy Hussein Abdel-Wahab, M.D. – The Mount Sinai School of Medicine

Cathleen Marie Adams, M.D. – Brown University

Khalid I. Afzal, M.D. – The University of Chicago

Bibi Alamiri, M.D. – Massachusetts General Hospital and McLean Hospital

Jon Patrick Carlson, M.D. – Yale Child Study Center

Kristin A. Dalope, M.D. – University of Pittsburgh Medical Center

Josue De Los Santos Martir, M.D. – University of Puerto Rico

Erikka Daniene Dzirasa, M.D., M.P.H. – Duke University Medical Center

Robert William Ellis, M.D. – Creighton University

Daniel Fallon, M.D. – University of Massachusetts Medical School

David J. Grelotti, M.D. – Massachusetts General Hospital and McLean Hospital

Emily Grossell, M.D. – University of Utah

Celine A. Hamilton, M.D. – Mount Sinai School of Medicine

Hesham M. Hamoda, M.D. – Children's Hospital of Boston

David S. Hong, M.D. – Stanford University

Brooks Ryan Keeshin, M.D. – University of Utah

Jeremy Kendrick, M.D. – University of Utah

Roshni Kumar, M.D. – Children's Memorial Hospital/Northwestern-McGraw

Tae Lee, M.D. – UT Southwestern

Deep Lohia, M.D. – Long Island Jewish Medical Center

Johnny Lops, D.O. – Long Island Jewish Medical Center

Lisamar Maldonado, M.D. – Tulane University

Kelly E. Melvin, M.D. – Vanderbilt University Medical Center

Temitope Omoloye Oyegbile, M.B.B.S. – University of Rochester Child & Adolescent Psychiatry Program

Chirayu Bharat Parikh, D.O. – Long Island Jewish Medical Center

Matthew L. Prowler, M.D. – Children’s Hospital of Philadelphia

Aikiesha Nicole Shelby, M.D. – University of Louisville

Heather Lynn Shibley, M.D. – Brown University

Stephanie Vetere Sims, M.D. – Medical University of South Carolina

Henry C. Skinner, M.D. – Maine Medical Center

Suzan J. Song, M.D., M.P.H. – Stanford Child/Adolescent Psychiatry

Timothy Eric Spiegel, M.D. – University of Utah

Hanna Elizabeth Stevens, M.D., Ph.D. – Yale Child Study Center

Richelle Strauss, M.D. – RUSH University Medical Center

Kimberly J. Tseng, M.D. – University of California, San Francisco

Tamara L. Vanderwal, M.D. – Yale Child Study Center

Sarah E. Walsh, M.D. – Dartmouth-Hitchcock Medical Center

Alexander R.N. Westphal, M.D. – Yale Child Study Center

Brent Wilson, M.D. – Emory University

Genevieve Yu, M.D. – University of California, San Francisco



AACAP EDUCATIONAL OUTREACH PROGRAM FOR GENERAL PSYCHIATRY RESIDENTS SUPPORTED BY ELI LILLY AND COMPANY

The AACAP Educational Outreach Program provides the opportunity for general psychiatry residents to receive a formal overview of the field of child and adolescent psychiatry, establish mentor relationships with child and adolescent psychiatrists, and experience the AACAP Annual Meeting. Participants are exposed to the breadth and depth of the field of child and adolescent psychiatry, including research opportunities, alternative career pathways, and various networking opportunities. Participation in this program provides participants financial assistance to attend the AACAP Annual Meeting.

Straight Line Arla, M.D. – Maine Medical Center

Avanti Bergquist, M.D. – University of Washington

Pedro M. Bustamante IV, M.D. – Baylor College of Medicine

LaRae M. Copley, M.D., Ph.D. – Ohio State University

Arman Danielyan, M.D. – University of Cincinnati

Maria Elizabeth de Brito McGee, M.D., M.S., M.P.H. – Georgetown University Hospital

Jose Antonio Franco, M.D. – University of Puerto Rico School of Medicine

Hon Lung Ho, M.D., M.P.H. – University of Colorado Denver

Anju Hurria, M.D., M.P.H. – University of California, San Diego

Kavita Rajnikant Kadiwar, M.D. – UPMC-Western Psychiatric Institute and Clinic

Anna J. Kerlek, M.D. – New York University School of Medicine

Natasha Marrus, M.D., Ph.D. – Washington University in Saint Louis

Nakita Moore, M.D. – Scott & White Memorial Hospital

Sybil M. Mouzon, M.D. – Montefiore Medical Center

Deepak Prabhakar, M.D., M.P.H. – Wayne State University-Detroit Medical Center

Justin Kuhns Spooner, M.D. – Tulane University

Chad Michael Sylvester, M.D., Ph.D. – Washington University School of Medicine

Cecil Ray Webster, Jr., M.D. – Baylor College of Medicine

Kevin Jackson Whitley, M.D. – University of Alabama at Birmingham

David W. Williams, M.D. – University of Colorado Denver



AACAP JEANNE SPURLOCK MINORITY MEDICAL STUDENT CLINICAL FELLOWSHIPS IN CHILD AND ADOLESCENT PSYCHIATRY

The AACAP Jeanne Spurlock Minority Medical Student Fellowship in Child and Adolescent Psychiatry, supported by the Center for Mental Health Services, named in honor of Jeanne Spurlock, M.D., in recognition of her lifetime of opening doors for colleagues from diverse backgrounds and fostering career advances. The summer fellowship of up to \$3,500 encourages outstanding minority medical students to pursue careers in child and adolescent psychiatry. The fellowship provides exposure to the state-of-the-art treatment and consultation services of child and adolescent mental disorders. The fellowships are administered through AACAP's Office of Research, Training, and Education and the AACAP Committee on Diversity and Culture, under the direction of Andrés Pumariega, M.D.

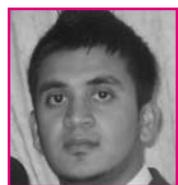
This year's recipients, along with their mentors and project titles, are:

**Benjamin N. Angarita**

Weill Cornell Medical College

Mentor: Theodore Shapiro, M.D.

Project: *Brain Derived Neurotrophic Factor (BDNF) and Cumulative Risk Factors Differentially Relate to Anxiety*

**Ahmed R. Kham**

University of Illinois at Chicago

Mentor: Mani Pavuluri, M.D., Ph.D., FRANZCP

Project: *Effects of Feedback and Reward on Behavioral Control Tasks in Children with Pediatric Bipolar Disorder*

**Janelle W.Y. Lum**

Mount Sinai School of Medicine

Mentor: Alexander Kolevzon, M.D.

Project: *Improvement of an Educational Tool for the Early Detection of Autism Spectrum Disorders*

**Shanti R. Mitchell**

SUNY Upstate Medical University

Mentor: Mani Pavuluri, M.D., Ph.D., FRANZCP

Project: *Psychosocial Treatment for Adolescent Bipolar Disorder: "Rock 'N' RAINBOW"*



Barbara Robles

Baylor College of Medicine

Mentor: Ayesha Mian, M.D.

Project: *Pediatric Mental Health and Hollywood: A Love-Hate Relationship*



Jessica W. Wang

Weill Medical College of Cornell University

Mentor: Ju-Wei Hsu, M.D.

Project: *Social Impairment in Autism and Other Developmental Disorders: Lessons From a Taiwan Population*

The Jeanne Spurlock Minority Medical Students Clinical Fellows present their new research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.



AACAP SUMMER MEDICAL STUDENT FELLOWSHIP IN CHILD AND ADOLESCENT PSYCHIATRY, SUPPORTED BY THE CAMPAIGN FOR AMERICA'S KIDS

The AACAP Summer Medical Student Fellowships offer a chance for medical students to explore a career in child and adolescent psychiatry, gain valuable work experience, and meet leaders in the child and adolescent psychiatry field. The fellowship opportunity provides up to \$3,500 for 12 weeks of clinical or research training under a child and adolescent psychiatrist mentor. The fellowships are administered through the AACAP's Office of Research, Training, and Education and Work Group on Training and Education under the direction of Jeffrey Hunt, M.D., and Dorothy Stubbe, M.D.

This year's recipients are:

Amil Allen

Vanderbilt University Medical School

Mentor: Susanna Quasem, M.D.

Project: *Temperamental Differences in Amygdala Habituation to Novel, Neutral Faces*



Emily B. Allen

University of Connecticut

Mentor: Bradley Peterson, M.D.

Project: *Incidental Findings On Brain Magnetic Resonance Imaging in Autism Spectrum Disorder*



Alexander Cardenas

Stanford University School of Medicine

Mentor: Shashank Joshi, M.D.

Project: *The Clinician and the Supporting Alliance in the Context of Implementing a School-Wide Positive Behavioral Interventions and Supports Intervention*



Natasha Hunter

Brown University Alpert School of Medicine

Mentor: Jeffrey Hunt, M.D.

Project: *What Do Genetic Researchers Think Psychiatrists Need to Know?*



Juliana Lopez

University of Illinois at Chicago

Mentor: Edwin Cook, M.D.

Project: *Clinical Phenotyping of Chromosome 15 Duplication Syndrome*



Catherine W. Oldenkamp

Mayo Medical School

Mentor: David Mrazek, M.D.

Project: *An Analysis of the Clinical Usefulness of Psychiatric Pharmacogenomic Testing in Children and Adolescents*



Claire E. Randall

University of Texas Health Center at San Antonio

Mentor: Thomas Matthews, M.D.

Project: *Incorporating Art Into Pediatric Psychotropic Medication Management Appointments*



Catharyn A. Turner

University of Iowa Carver College of Medicine

Mentor: Chadi Calarge, M.D.

Project: *Does Iron Status in Childhood Predict Response to Psychostimulant Treatment in Children with ADHD?*



Raina Vachhani

University of Michigan Medical School

Mentor: Noeline Nakasujja, M.D.

Project: *Depression and Anxiety in Caregivers of HIV-Positive Ugandan Children*



Shane Shucheng Wong

Stanford University School of Medicine

Mentor: Victor Carrion, M.D.

Project: *An Investigation Into the Effects and Related Treatment Implications of Trauma Among School-Aged Children Who Experience Community Violence*

The AACAP Summer Medical Student Fellows present their new research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.

AACAP JEANNE
**SPURLOCK RESEARCH
FELLOWSHIP IN CHILD
AND ADOLESCENT
PSYCHIATRY,
SUPPORTED BY THE
NATIONAL INSTITUTE
ON DRUG ABUSE**

The Jeanne Spurlock Minority Medical Student Fellowship in Child and Adolescent Psychiatry, supported by the National Institute on Drug Abuse (NIDA), named in honor of Jeanne Spurlock, M.D., in recognition of her lifetime of opening doors for colleagues from diverse backgrounds and fostering career advances. The summer fellowship of up to \$3,500 encourages outstanding minority medical students to pursue careers in drug abuse and addiction research in child and adolescent psychiatry. The fellowship provides exposure to the state-of-the-art treatment and consultation services of child and adolescent mental disorders and drug abuse and addiction. The fellowships are administered through AACAP's Office of Research, Training, and Education and the AACAP Committee on Diversity and Culture, under the direction of Andrés Pumariega, M.D.

This year's recipients, along with their mentors and project titles, are:



Lauren A. Teverbaugh

University of Illinois at Chicago

Mentor: Warren Ng, M.D.

Project: *Substance Use Among a Population of Inner-City Perinatally Infected HIV Youth*



Landon T. Williams

Brody School of Medicine at East Carolina University

Mentor: Lesly Mega, M.D.

Project: *The Impact of Dopamine Transport Inhibition Using Amfonelic Acid on the Adolescent Brain in a Nicotine Exposure Paradigm*



Yonatan N. Yohannes

Robert Wood Johnson Medical School

Mentor: Theodore Petti, M.D.

Project: *Coping Skills, Hospitalizations, and Pain Management in Sickle Cell-Related Crisis in Youth Diagnosed with Sickle Cell Disease: An Outpatient Sample*

The AACAP Jeanne Spurlock Minority Medical Student Research Fellows present their new research during the New Research Poster Session 6 on Saturday, October 31 from 9:00 to 11:30 a.m.



ACAP FELLOWS

The following AACAP members were elected to Fellowship between November 2008 and September 2009.

Richard Spiegel, M.D.

Scottsdale, Arizona

Member of AACAP since October 8, 1996

Boris Rubinstein, M.D.

Hastings on Hudson, New York

Member of AACAP since May 1, 1996

Joan Plotkin-Han, M.D.

Chesterfield, Virginia

Member of AACAP since November 22, 1995

Dorothy Stubbe, M.D.

Hamden, Connecticut

Member of AACAP since August 26, 1996

Jerome Liebowitz, M.D.

Scarsdale, New York

Member of AACAP since February 29, 1996

William A. Sonis, M.D.

Philadelphia, Pennsylvania

Member of AACAP since October 2, 1995

Timothy Gibbs, M.D.

Edina, Minnesota

AACAP Member since September 12, 1995

Muhammad Azeem, M.D.

Rocky Hill, Connecticut

AACAP Member since September 7, 1999

ACKNOWLEDGMENTS

The American Academy of Child and Adolescent Psychiatry expresses appreciation to the following organizations and AACAP Funds.

AACAP Sidney Berman Award Fund
AACAP Campaign for America's Kids
AACAP Robert Cancro Award Fund
AACAP Beatrix A. Hamburg Award Fund
AACAP Klingenstein Third Generation Foundation Award Fund
AACAP Irving Phillips Fund
AACAP Rieger Award Fund
AACAP Elaine Schlosser Lewis Fund
AACAP Jeanne Spurlock Award Fund
AACAP George Tarjan Fund
AACAP Robinson Cunningham Award Fund
AACAP Simon Wile Fund

AstraZeneca LP
Eli Lilly and Company
Shire Pharmaceutical Inc.

The Klingenstein Third Generation Foundation
Grove Foundation
The Norbert and Charlotte Reiger Foundation
National Institute on Drug Abuse
Substance Abuse and Mental Health Services Administration

Honors Book Editor, Rob Grant
Assistant Editor, Amanda Greenberg

