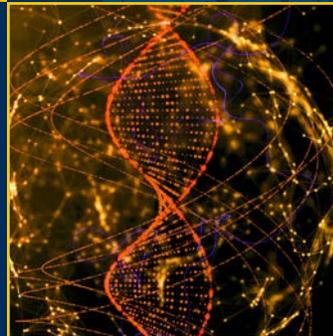




M | DEPRESSION CENTER
MICHIGAN MEDICINE



University of Michigan
Depression Center
A GLOBAL LEADER



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THE DEPRESSION CENTER BY THE NUMBERS

352 active members from **17** affiliated U-M colleges, centers, and institutes representing **24** departments

64 unique grants awarded in fiscal year 2020 related to depression, bipolar, anxiety, related illnesses or neuroscience linkages. The organizational codes and scholarly homes for these grants reside in multiple collaborating departments, colleges, schools, centers, and institutes, reflecting the university-wide breadth of the Depression Center.

\$58.5m total grant money earned by UMDC members during Fiscal Year 2020.

A LETTER FROM OUR EXECUTIVE DIRECTOR

The University of Michigan Depression Center's annual *Impact Report* is our yearly opportunity to update you — colleagues, collaborators, friends, supporters, patients, families, everyone we serve. It is one of our most-enjoyable vehicles for describing accomplishments, priorities, and barriers. And it enables us to invite you to give us feedback.

It has been a year like no other. COVID-19 has impacted every aspect of our academic, clinical, and personal lives. The Center's members adapted quickly and remarkably. When necessary, they revamped educational programs, conferences and supervisory sessions into virtual formats, adapted virtual care research protocols to Center for Disease Control (CDC) guidelines, improved telepsychiatry approaches, and did all this while transitioning non-essential staff and faculty to working from home. Societal inequities resulted in demands for change across the nation. **Yes, a year like no other... but Depression Center staff members are remarkable. It showed.**

As you will read in the pages that follow, precision health is here to stay. The Center's 352 members from 17 of U-M's schools, centers, colleges and institutes work with colleagues throughout the globe to take on the different types of depressions, bipolar illnesses, and related disorders. Their aim is nothing short of transforming the paradigm to one in which treatments are more precisely tailored to each person's underlying causes.

As the Depression Center's founder and executive director, I have been privileged to help shape these efforts. As I prepare to step down from the Director's role, I look forward to continuing selected activities as an active emeritus faculty. I have attached a personal note describing my future foci.

What a ride it has been for me — securing and planning support to construct our beautiful Rachel Upjohn Depression Center and Ambulatory Psychiatry facility; building a team, then many teams; prioritizing interdisciplinary research and innovative clinical delivery; obtaining support for six endowed professorships; fighting stigma; hosting 20 years of Depression on College Campuses programs; explaining to others what we mean by precision health; learning from an amazing staff; becoming friends with hundreds of informed and helpful donors; and collaborating with Michigan's unmatched faculty.

It is an ideal time to transition to a new Director. **The Center is poised to improve and accelerate the progress that has been made, to build upon and more rapidly translate bold research ideas into clinical and community settings.** Selected examples include deploying biomarkers of ketamine response; refining combinatorial pharmacogenomics to aid selection of the most-effective medications; using new brain stimulation approaches; treating selected postpartum depressions with newer treatments such as brexanolone; developing everyday use of mobile monitoring data, speech monitoring via smart phones, artificial intelligence, and machine learning; continuing innovative studies such as pluripotent stem cells; expanding innovative group approaches to therapy such as Mood Lifters; and expanding the Center's programs for workplace settings...into *every* workplace. For treatment and prevention, tailoring to different populations has now become mainstream: for high school and college students; military members and veterans; medical interns; athletes; infants; aging individuals; those with treatment resistance; and others. All these, of course, depend upon further expanding basic neuroscience research underpinnings. In that agenda, we are benefited by a growing number of partners. Learning from Cancer Centers that one center would never be enough, the Depression Center catalyzed the National Network of Depression Centers. Starting with 16 Universities, the NNDC has expanded to 26, and now is forging partnerships in Canada, Germany and India. Even globally, stigma *is* being beaten.

Thank you for being part of this. None of these accomplishments would have occurred without you. We are winning, but much remains to be done. With your help, the best is yet to come.



Dr. Greden and his wife Renée (forth and fifth from right) with their family.

The University of Michigan will remain a special “home” for Renée, me, our children, Dan, Sarah, and Leigh, and our grandchildren. Our collective “Go Blue” loyalties run deep. I have been asked by many about my future plans (thank you for caring!). With Renée's endorsement and help, I will continue selected activities as an Active Emeritus Professor, focusing on ongoing precision health, pharmacogenomics research, college-student depressions, suicide risk reduction efforts as a member of the State of Michigan Suicide Prevention Commission, and helping however I can with philanthropy endeavors to aid the University, Department of Psychiatry, Depression Center and the National Network of Depression Centers. I am immensely proud of our amazing progress. I hope you are as well. But we *all* still have so much to do. For as long as my “voice” is valued, I feel compelled to use it. Your voices are needed as well. With collective efforts, we *will* conquer. Thank you.”
—Dr. John Greden

John Greden, M.D.

Rachel Upjohn Professor and Emeritus Professor of Psychiatry
Founder and Director, University of Michigan Comprehensive Depression Center
Emeritus Research Professor, Michigan Neuroscience Institute
Founding Chair, National Network of Depression Centers

FUNDRAISING

Through a Global Pandemic

COMMITMENT, CREATIVITY AND RESILIENCE

are helping U-M Depression Center faculty and staff navigate through these transitional waters. We have adapted delivery of services to virtual platforms and added safety precautions. Our educational events and support groups are offered online, and our researchers are advancing discovery from socially-distanced labs.

Like the rest of us, members of our dedicated **development team** are adjusting to new work routines and strategies — not to mention a changed world with shifting priorities.

COVID-19, market and economic instabilities, emerging local needs, the necessary assimilation of virtual/telehealth care for many, and the upcoming national election are giving many across the country pause as they consider their charitable donations this year. But as needs and situations fluctuate, there are constants that still require our attention. **Providing and improving care for depression and related mental health conditions is as vital a need as ever.**

WE NEED YOUR PARTNERSHIP TO ADVANCE MENTAL HEALTH.

Here are some ways you can help:

Participate in Research > Visit umhealthresearch.org to find mental health studies that are currently recruiting participants.

Attend a Virtual Event > You can find support groups, lectures and other online events by visiting psych.med.umich.edu/events.

Host a (Virtual) Gathering > Gather your friends and raise awareness about our programs, research and treatment options. Contact teammentalhealth@umich.edu to discuss how to host an evening with U-M experts on a mental health topic.

Fundraise on our Behalf > Send an email to digitalfundraising@umich.edu to learn about our online fundraising tools, and how to support the Depression Center in honor of a loved one, for a special occasion (birthday, anniversary, etc.) or simply to make a difference. Every bit helps!

Give > If your situation allows, you can help support our mission by making an extra gift or making your annual gift early. Give online by visiting depressioncenter.org/giving or reach out to one of us directly to discuss giving opportunities.

Thank you for all you do for Michigan Medicine and beyond!



CLOCKWISE FROM
TOP LEFT:

Courtney Metzger
ASSISTANT DIRECTOR OF
DEVELOPMENT, PSYCHIATRY

Trisha Langkos
PROJECT COORDINATOR

Nancy Davis
DIRECTOR OF
DEVELOPMENT,
DEPRESSION CENTER

Lisa Fabian
SR. ASSOCIATE DIRECTOR,
HEINZ C. PRECHTER
BIPOLAR RESEARCH
PROGRAM

SOUNDBITES

Depression Center FACULTY IN THE NEWS



Bridge Magazine

"What is my future? How Michigan teens and young adults deal with isolation"

ELIZABETH KOSCHMANN, PH.D.

"If you are a young person living in Detroit, you are far more likely to know someone who has been sick, someone who has been hospitalized, someone who has died. (...) That creates both a traumatic experience for these people, a sense of grief but also an ever-present sense of fear."



NPR — *"Beyond Protests: 5 More Ways To Channel Anger Into Action To Fight Racism"*

POLLY GIPSON, PH.D.

"You know that old adage: 'Don't talk about race and politics at the dinner table.' Well, we've got to get out of that. (...) Yes. It's uncomfortable. (...) But we can't avoid things that are uncomfortable — because this is part of the problem of why we're not as far along as we should be in eliminating racial injustices."



NBC News — *"'I gave this to my dad': COVID-19 survivors grapple with guilt of infecting family"*

MICHELLE RIBA, M.D., M.S.

"You can't use the facts you have now to go back and judge yourself back then," Riba said. "In retrospect it looks easy now, but it wasn't easy back then. People were getting on planes, still going to events and restaurants. They didn't know."



The New Yorker

"The Emotional Evolution of Coronavirus Doctors and Patients"

SRIJAN SEN, M.D., PH.D.

"There's an increase in concern for patients, a feeling of not being able to do as much as they normally would," Sen said. "Then there's the added concern for themselves and their families. On one hand, they feel, 'This is why I became a doctor.' On the other, it's 'I'm putting myself, my spouse, and my children at risk.'"



Crain's Detroit Business

"COVID's heavy toll: Depression, suicides, opioid overdoses increase in pandemic era"

JOHN GREDEN, M.D.

"We have a collision of things underway. The combination is toxic. Some people have preexisting depression, bipolar and anxiety conditions. They are intensified because of the pandemic, job loss, social isolation and sleep disturbances. (...) If there are brain changes, which is something nobody seems to acknowledge, that intensifies anxiety and depression. There are all these social consequences of staying at home and keeping safe distances from people when they have job and financial worries. We won't know fully until this is over."



Psychology Today

"Why We Can't Breathe — Three reasons breathing is harder for Black people right now."

RIANA ELYSE ANDERSON, PH.D.

"In short, there are three reasons why breathing is harder for many Black people right now than in the past: **1.** COVID-19: Yes, just a reminder that the inequality in so many things (...) has also led to Black people contracting, transmitting, and perishing from this respiratory system-attacking disease at higher rates than others. (...) **2.** Intentional restriction of air: Whether it's a banned chokehold or kneeling on a person's neck, the forceful and intentional deprivation of air most certainly limits the ability of Black people subjected to it to get air into their lungs. **3.** Constant triggering of the sympathetic nervous system: Our fight-fright-or-flight mechanism, which is a useful system for both determining the severity of a threat and then acting on it, is a part of the sympathetic nervous system (or SNS). (...) But if Black people are constantly on guard from every news story, siren, or police encounter, the SNS may be consistently activated, leading to eroded physiological and psychological processes (...)"



The Conversation

"COVID-19 and telehealth may be changing how much you know about your therapist"

ADRIENNE LAPIDOS, PH.D.

"With the advent of COVID-19, video visits have become commonplace practically overnight, with one survey reporting that 76% of respondents now solely provide remote services. For patients and therapists alike, carefully curated self-disclosures can now show cracks when, through their webcams, they enter one another's homes."



Knowable Magazine

"The new neuroscience of stuttering"

SOO-EUN CHANG, PH.D.

Chang has been trying to understand why about 80 percent of kids who stutter grow up to have normal speech patterns, while the other 20 percent continue to stutter into adulthood. Stuttering typically begins when children first start stringing words together into simple sentences, around age 2. Chang studies children for up to four years, starting as early as possible, looking for changing patterns in brain scans.



IVY F. TSO, PH.D.

Named 2020 Frances and Kenneth Eisenberg Scholar for Her Research on **Biomarkers in Bipolar Disorder**

IVY F. TSO, PH.D., hopes to identify a diagnostic biomarker of bipolar disorder by studying electrical brain signals through a project to be supported with a 2020 Frances and Kenneth Eisenberg Scholar Award of \$50,000 per year, over the next two years.

“Electrophysiological Signature of Affective Response Inhibition in Bipolar Disorder: Development of a Biomarker” uses electroencephalography (EEG) to **study brain signals to uncover biological mechanisms of bipolar disorder and guide the development of novel treatment.** This research is based on a graduate school pilot study Dr. Tso conducted in collaboration with Drs. Patricia Deldin and Melvin McInnis and the Heinz C. Prechter Bipolar Research Program team, which identified distinctive brain wave patterns on the scalps of patients with bipolar illness when measured by EEG. The team found that they were able to use the patterns of brain waves to distinguish those with bipolar disorder from those with other psychiatric disorders or from healthy people without psychiatric disorders. This suggests that electrical brain signals carry **unique disease-related information** that could serve as a **diagnostic biomarker** for bipolar disorders. Because EEG is much more cost-effective than other types of brain scans like MRIs, this research could be readily applied in outpatient clinical settings. Dr. Tso’s Eisenberg Scholar award will allow her to **improve the accuracy of these earlier findings and prove this approach is reliable over time.**

Dr. Tso is an assistant professor of psychiatry and an adjunct assistant professor of psychology at the University of Michigan. She received her Ph.D. in clinical psychology and completed her postdoctoral fellowship at U-M. Her general research interest is in the areas of

psychopathology and affective neuroscience with a current focus on the psychological and brain mechanisms of social information processing in schizophrenia and bipolar disorder. Dr. Tso uses behavioral, neuroimaging, and neuromodulation methods in her studies. Ultimately, she hopes to **develop novel cognitive training and brain stimulation interventions** to improve functional outcomes in patients.

“Social cognition is a major determinant of functional outcome in severe mental illnesses. I have established an independent research program that combines multiple innovative and state-of-the-art methods to investigate the cognitive and neural bases of socio-emotional abnormalities in psychosis and related disorders. This work has made significant discoveries in the mechanistic understanding of these illnesses and helped develop new-generation therapeutics to improve patient outcome,” says Dr. Tso.

Dr. Tso is a licensed clinical psychologist and the clinical and training director of the *Program for Risk Evaluation and Prevention (PREP)* for youth with early signs of psychosis and serious mental illnesses. She is actively involved in the clinical care of patients, training and supervision of practicum students, postdoctoral fellows, and clinical staff, and educational outreach in the community.

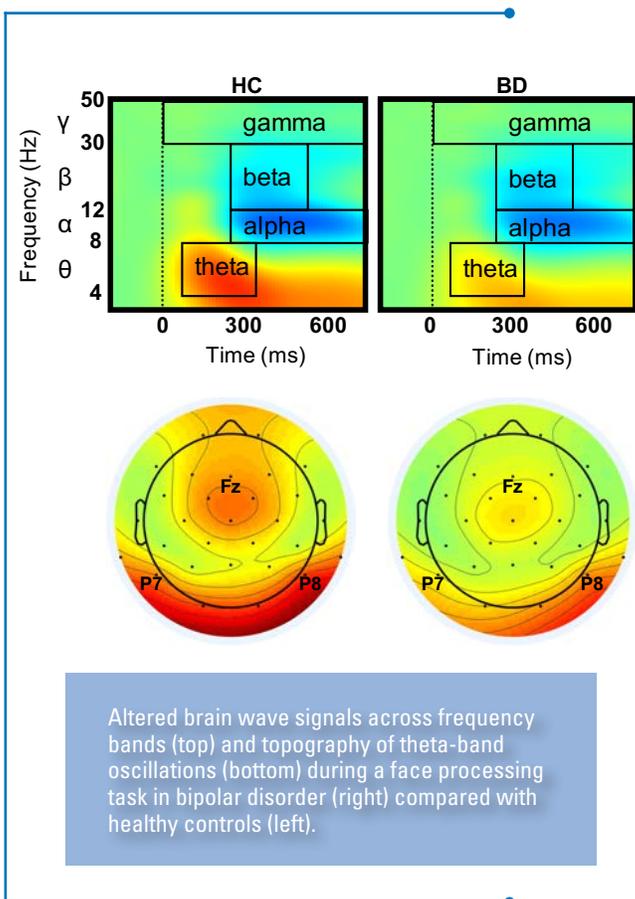
Over the years, Dr. Tso has received \$150,000 of grant support from the Depression Center to further her research. In addition to the 2020 **Eisenberg Scholar Award** (\$100,000), she was the 2015 recipient of the **Rachel Upjohn Scholar Award** (\$50,000, which was later matched by a **Michigan Institute for Clinical & Health Research (MICHHR) pilot grant** for another

\$50,000). Two of Dr. Tso’s three postdoctoral mentees (Drs. Cynthia Burton and Taka Suzuki) have also received an **Oscar Stern STAR** (strategic translational research) award to help jump start their own independent research.

“My work, as well as my mentees’ work, has significantly benefited from the Depression Center’s support. I am grateful and feel incredibly honored to have received such generous support in the formative years of my career. This support enables me to translate innovative (but unproven) research ideas into promising pilot data for larger federal grants. The research supported by the Depression Center has not only advanced my own career, but has also allowed my mentees to explore and develop their own.”



LEFT TO RIGHT:
Taka Suzuki, Ph.D.; Saige Rutherford, BS;
Ivy Tso, Ph.D.; Pan Gu, BSc; Tyler Grove, Ph.D.;
and Carly Lasagna, BA



The **Frances and Kenneth Eisenberg Scholar Awards** aim to expand the number of innovative research projects focused on understanding causes of depressions and bipolar illnesses and develop personalized, precise treatments that target each individual's unique profile. The Eisenbergs attended the University of Michigan and are active volunteers and generous supporters across many areas of the university.

About Dr. Tso's MiSCAN (Michigan Social Cognitive and Affective Neuroscience) lab:

THE MiSCAN lab investigates the cognitive and neural bases of social processes that are altered and interfere with social functioning in psychiatric disorders. The overarching goal of lab members is to develop innovative brain-based interventions to effectively improve functioning and quality of life of people living with psychiatric illnesses. Visit the lab website to learn more about the different research areas, selected publications, how to become a research participant, and to stay up-to-date on news coming out of Dr. Tso's research: sites.lsa.umich.edu/ivytsolab.



My primary clinical interest

is psychotic disorders, especially the schizophrenia-bipolar psychosis spectrum, with a special focus on early detection and evidence-based psychosocial treatments. I am regularly asked by colleagues and clinicians in Psychiatry, other clinical departments, and in the community, to consult on diagnostic assessment and evidence-based psychological interventions for psychosis.



My research examines how individuals at risk for or currently struggling with psychosis process social information by studying them with functional MRI and EEG/ERP methods. I use psychophysics, electrophysiology, neuroimaging, brain stimulation, and advanced statistical modeling to identify biobehavioral markers and develop novel treatments.

As an educator, I have mentored numerous undergraduates, post-baccalaureate research assistants, graduate students, medical students, postdoctoral fellows, psychiatry residents, and junior faculty in my lab and the PREP early psychosis clinic. I also offer educational outreach presentations on clinical and research topics on campus and in the community."
—Dr. Ivy Tso

PRECISION HEALTH RESEARCH IN CHILDREN

STARTING YOUNG & STOPPING ANXIETY EARLY

THE FEAR OF NEW EXPERIENCES is common for young children, but for the 20% who suffer from clinically significant anxiety, this fear can spiral into long-lasting negative effects.

Dr. Kate Fitzgerald, Phil F. Jenkins Research Professor of Depression and Associate Professor of Psychiatry, is working to develop new ways to intervene early in the course of anxiety. This effort builds from work in her lab and others showing that children with anxiety exhibit lower levels of **effortful control (EC)** than their non-anxious counterparts, making them less likely to directly confront fearful situations. They also exhibit a smaller error-related negativity (ERN) — a measure of brain response to errors believed to underlie effortful control. By resolving deficits of effortful control, Dr. Fitzgerald and her collaborators, Drs. Kate Rosenblum, Ph.D. (U-M) and Jason Moser (Michigan State University), reason that **children can build the “mental muscle” to overcome fears.**

Since 2017, Dr. Fitzgerald has tested her hypothesis via **‘Camp Kid Power,’** a series of interactive camps for preschoolers. Each camp included 4-6 children that have clinically significant anxiety, accompanied by their parents, who attended 4-5 camp sessions over a number of consecutive weeks. The camps consist of several short game-like exercises that teach effortful control skills, including selective attention, response inhibition, and set shifting.

At each camp, each child’s anxiety was measured before and after the camps using the Preschool Anxiety Scale (PAS). Combining their three years of data, the children’s mean PAS scores decreased from study entry to study end. In addition, the effortful control behaviors for each participating child increased from pre- to post-intervention, as did their error-related negativity (ERN). These findings are encouraging and consistent with Dr. Fitzgerald’s study aims: that the EC training provided within the camps helps increase ERN, that the EC training increases effortful control behaviors, and that it may help to decrease anxiety.

Motivated by the positive results of this study, Dr. Fitzgerald and her team are now pursuing a grant from the National Institute of Mental Health (NIMH) to expand the scale of this work.

Results of this pilot study indicate that this brief cognitive training approach engaged the intended EC neural and behavioral targets and reduced anxiety symptoms. Building on this pilot work, the current proposed project aims to replicate and extend these findings in a larger sample using a randomized controlled design. Participants in this study will be 4- to 6-year-old children with clinically significant symptoms who will be randomized into the EC training intervention or a control playgroup. Outcomes will be assessed before and after each condition, using a multi-level approach that includes neurophysiological and behavioral indices of EC, as well as clinician-rated and parent-report on child anxiety symptoms (type and severity).



LEFT TO RIGHT:
Drs. Carol Bradford, Gregory Dalack, Kate Fitzgerald, and John Greden

DR. FITZGERALD AND HER TEAM AIM TO:

1. Confirm that participation in the EC training increases ERN and improves EC behavior,
2. Test whether engagement of these brain-behavior EC targets correspond to reductions in anxiety symptoms and explore whether anxiety reduction by EC training is moderated by baseline threat reactivity measures, and
3. Identify whether greater dosage of EC training is associated with greater neuro-behavioral target engagement and reduction of anxiety symptoms.

By evaluating how changes in neuroscience-derived targets relate to changes in anxiety symptoms, this work is responsive to the NIMH request for experimental therapeutics and addresses an urgent need for the design of interventions to reduce anxiety in young children.

Research coordinator
Melissa Hall



THE HEINZ C. PRECHTER BIPOLAR RESEARCH PROGRAM'S COVID-19 STUDY



“It’s like non-bipolars get a taste of what it’s like to be us. Anxiety, depression, fear... This pandemic has taught them a glimpse of how we live and that you can’t just “snap out of it” or “turn off” those feelings. For us, it just heightens what we have and makes us fight twice as hard to find balance. Especially when our support system is off its rails.”

—STACEY, Prechter Program participant, with her dog

THE SARS-COV PANDEMIC and subsequent COVID illness has affected everyone in substantial ways. In Michigan, the Governor’s public health orders required people to stay at home for five weeks this spring. The **Heinz C. Prechter Bipolar Research** data team, led by biostatistician Peisong Han, Ph.D., and data scientist Anastasia Yocum, Ph.D., asked their longitudinal study research participants to help them **investigate the effects of this isolation**. Participants answered a newly developed **COVID impact scale survey** among other sleep and mood surveys at regular time intervals throughout this spring and summer. The research aim was not only to study the baseline effects of the stay-at-home order, but also to study the trajectory of any effects longitudinally.

560 individuals participated in the study. About 75% of participants reported a change in their routines. About 21% of participants had a change in their family income/employment at the end of April. That family income/employment change dropped to about 15% at the end of May. About 6% of participants had a change in their food access. Approximately 32%, 12%, and 42% of participants reported a change in their medical health care access, mental health treatment access, and social supports access, respectively. Just less than half of the participants experienced pandemic-related stress by the end of April. This number dropped slightly to 38% at the end of May.

Four of the Prechter Program participants personally experienced COVID symptoms. Two of them were admitted to Michigan Medicine. One of them explained their experience as *“Life changing, spent six weeks at that University of Michigan hospital [and was] discharge[d] with a walker so I can start learning to walk again.”*

Thanks to the enthusiastic participation, the research team was able to definitely state that **this mandate to stay-at-home had a greater significant effect on participants with bipolar disorder when compared to healthy controls** in measurements relating to change in routines, change in family income/employment, change in access to social supports, experiencing pandemic-related stress, time it took to fall asleep, sleep duration and quality, and standard mood measurements.

While distress was experienced in both healthy controls and persons with bipolar disorder, healthy controls seemed to recover faster than persons with bipolar disorder. From the end of April to the end

of May, both the average PHQ-9 [a measure of depression symptoms] and the average GAD-7 [a measure of anxiety symptoms] scores dropped slightly, and the percentages of participants who fell asleep in less than 30 minutes, who had a good sleep quality, and who didn’t take sleep medications, all increased slightly, showing that all participants’ stress and anxiety level eased slightly from April to May within the pandemic.

However, for those with bipolar disorder, there was not much improvement into the middle and the end of May, whereas the healthy controls showed a steady improvement.

The Prechter bipolar research team hopes that these results will enable clinicians to better understand the effect of the COVID-19 pandemic and the potential impact of isolating stay-at-home orders on persons with bipolar disorder. This knowledge can help guide treatment decisions during the current pandemic and in future health crises.

M | HEINZ C. PRECHTER BIPOLAR RESEARCH PROGRAM
MICHIGAN MEDICINE

To learn more about the Prechter Program’s ongoing studies into the mechanisms of bipolar disorder, including new collaborations with the Sleep and Circadian Research Lab, please visit prechterprogram.org.

SPOTLIGHT

PRECISION HEALTH

ONE SIZE TREATMENT DOES NOT FIT ALL

PRECISION HEALTH IS AN EMERGING FIELD that aims to tailor treatment to each unique individual, rather than something that treats all patients. Through measuring genetics, environment and lifestyle, the goal is to determine optimal treatment and prevention strategies for various health conditions. Precision health has enormous potential to advance treatment, accelerate recovery, and improve patient outcomes. The Depression Center has a number of initiatives underway.

THE INTERN HEALTH STUDY and Identifying Real-Time Data Predictors of Stress and Depression Using Mobile Technology

Funding from the Eisenberg Translational Research Award has been integral to the success of the **internationally-recognized Intern Health Study**. Principal investigator Srijan Sen, M.D., Ph.D., and his team have enrolled 2,300 new physicians in the study in recent months, with a total sample size of over 23,000 subjects. The team is leading efforts **to link stress and genetic risk variables among these physicians to help understand and reduce the development of depression and suicide.**

The study produced 12 publications in 2019, many in prestigious medical journals. Highlights of the project include the team **advancing knowledge about how stress leads to accelerated cellular aging**, a finding featured in two articles in *The New York Times* and in other media outlets.

Dr. Sen also utilized the Intern Health Study to publish the **largest mobile tracking study to date in depression** and demonstrate how **feeding back personal wearable data can improve health behavior and mood.**

The findings generated by the Intern Health Study served as foundation for the newly launched PROMPT study, a \$1.8 million effort to develop a precision approach to treating depression and related disorders.

“The PROMPT study has begun recruiting at the Rachel Upjohn Building and University Health Service in the Summer of 2020, and we’re seeing great enthusiasm and engagement. We have recruited 300 patients into this study. We hope that we will identify an approach that can help get patients the right treatment at the right time.”

—Dr. Sen



Srijan Sen, M.D., Ph.D.



Amy Bohnert, Ph.D.

THE PROMPT STUDY

Providing Mental Health Precision Treatment

Enhancing mental health care through genomics and mobile technology

Determining the mental health treatment most likely to be effective for each patient can be challenging. Clinicians rely heavily on evidence-based practice to maximize patient recovery and try to meet the growing need for care. Nevertheless, mental health treatment remains largely subjective and typically involves a trial and error approach.

The **PROMPT** (Providing Mental Health Precision Treatment) study, led by principal investigators Amy Bohnert, Ph.D., and Srijan Sen, M.D., Ph.D., joins collaborators from departments across the University of Michigan, including engineering, LSA, pharmacy, and public health. **The project aims to reduce the burden of depression and other mental health conditions by two means.**

First, patients waiting for their first appointment in outpatient psychiatry and University Health Service will be provided **access to mobile technology treatments**, including commercial mental health smartphone applications, and daily individualized app-based feedback on behavioral and health data such as sleep and physical activity.

Second, the study will **gather both subjective and objective patient data** (i.e., self-report surveys, wearable technology and smartphone data, data from the medical record, and DNA samples) **before, during, and after outpatient care** to better understand the factors that influence and can predict patient recovery.

The project is innovative in its collection and analysis of objective, real time mobile technology data, and hopes to advance knowledge about how to accelerate recovery from mental health conditions by **better matching pharmacological, psychological, and mobile-based treatments to patients.**



Enhancing mental health care through mobile technology

Helen S. Mayberg, M.D.
wins prestigious
EISENBERG RESEARCH PRIZE



HELEN S. MAYBERG, M.D., director of the Nash Family Center of Advanced Circuit Therapeutics and professor of neurology, neurosurgery, psychiatry and neurosciences at Mount Sinai, is the winner of the Depression Center's 2020 Eisenberg Prize. Mayberg is a neurologist renowned for her study of brain circuits in depression and for her pioneering deep brain stimulation research, which has been heralded as one of the first hypothesis-driven treatment strategies for a major mental illness.

Dr. Mayberg's research consists of **"Rethinking Depression and its Treatment: Insights from Studies of Deep Brain Stimulation."**

Dr. Mayberg is the third recipient of this award worth \$50,000. The honor of the award includes a lecture to be given at the University of Michigan hospital at a future date depending on COVID-19 circumstances.

"Dr. Mayberg's comprehensive skill set and state-of-the-art contributions made her an ideal candidate for this prize," said John Greden, M.D., executive director of the U-M Depression Center. "Helen's ability to cross boundaries and incorporate advances about neuroscience mechanisms, the importance of biomarkers, the need for precision treatments and strategies for developing them, and the commonality of co-occurrences and how to deal with them prove her leadership in the field."

The Eisenberg Research Prize is a prestigious international award given annually to a world-renowned scientist and honors breakthrough research accomplishments that advance knowledge in the understanding of mechanisms and treatments in depressions, bipolar illnesses, or related disorders.

The Mental Health Biobank (MHB2)

"The goals of the Mental Health Biobank (MHB2) are to **establish, grow, and translate findings from a DNA registry for psychiatric research**, facilitating an era of personalized, precision medicine to increase positive mental health outcomes," say principal investigators Srijan Sen, M.D., Ph.D., and Vicki Ellingrod, PharmD. The MHB2 enrolls every adult psychiatry outpatient at Michigan Medicine who consents into the genetic biobank, and provides permission to re-contact participants for additional research studies. **Patients provide a saliva sample for DNA extraction and allow access to their medical record data.**

Establishing a large-scale DNA biobank for mental health will enable scientists to perform genome-wide association studies to identify genetic variants associated with mental illness and treatment response.

To date, staff have invited 5,527 new adult patients to participate in the MHB2, enrolling 2,233 participants for a combined consent rate of 40.4% since 2017.

MHB2 will be partnering with the **PROMPT** study (see article on page 9) to strengthen the study's numbers going forward. PROMPT uses Fitbit® fitness trackers and randomized mental health apps along with genome-wide association studies to determine a patient's best treatment based on personal history, activity, sleep, and genetic structures. Soon researchers will be able to recruit patients into the MHB2 by enabling them to provide saliva samples from their homes and consent electronically — growing the number of participants.

Biobank participants can now be contacted for replacement samples if their original samples had a low DNA yield or had been depleted through use. This, coupled with efforts to obtain missing samples by mail, has shown an **unprecedented 92.5% sample collection rate in 2020**. The collection is searchable via the **Michigan Institute for Clinical & Health Research (MICHR) data search engine**.



RIANA ELYSE ANDERSON, PH.D.

Aims to Improve RACE-RELATED DEPRESSION in BLACK FAMILIES

IN 2020, RIANA ELYSE ANDERSON, PH.D., an assistant professor with the U-M School of Public Health's Department of Health Behavior and Health Education, earned a **\$35,000 Racial Injustice Award** from the U-M Depression Center. This project builds on her research made possible by her **\$50,000 Rachel Upjohn Scholar Research Award** in 2019.

Dr. Anderson received her Ph.D. in clinical and community psychology from the University of Virginia and completed a postdoctoral internship at Yale University's School of Medicine as well as a postdoctoral fellowship at the University of Pennsylvania. She uses mixed methods in clinical interventions to study racial discrimination and socialization in Black families. **The aim of her work is to reduce racial stress and trauma to improve psychological wellbeing and family functioning.**

Dr. Anderson's project, for which she won the Rachel Upjohn Award, was titled **"Reducing Racism-Related Depression in Black Families: Improving Racial Socialization Competency through a Culturally-Informed Therapeutic Intervention."** In this project, she used culturally-responsive and tailored interventions focused on discrimination and depression, which may reduce mental health disparities for Black youth and contribute to greater wellness by improving familial and clinician processes.

The relationship between discrimination and Black youth's long-term health outcomes – especially mental wellbeing and depression – has been established, with depressive symptoms often increasing three-fold after events like fatal police encounters.

Most recently, in the summer of 2020, Dr. Anderson won a Racial Injustice Award which builds on her earlier project. Dr. Anderson's new project, **"EMBRacing Technology to Improve Black Youth's Coping with Racial Discrimination to Reduce Depressive Symptoms,"** will measure adolescent coping responses through the **use of a virtual reality narrative program** she is developing. *Passage Home: Police* will provide participants with a virtual discriminatory experience with a police



DR. ANDERSON
is the 2019 Rachel Upjohn
Scholar and a
2020 Racial Injustice
Award Recipient

officer to elicit responses. Dr. Anderson will **gather data on how Black adolescents respond to discriminatory experiences** so that she can **develop coping practices to reduce depressive symptoms** following such encounters. Dr. Anderson and members of her lab will work simultaneously with these young people on both the assessment of responses as well as the coping techniques and mechanisms through the course of the project.

"It is an absolute privilege and joy to work with Black families through therapeutic practice and research initiatives," said Dr. Anderson. "The Depression Center funding allows me to blend my interests in innovative clinical strategies to decrease depressive symptoms and population-specific determinants of health — like racism — to improve health and wellness for Black adolescents and their families. The awards will help to **fund a randomized controlled trial of EMBRace in Detroit** which will be conducted with community partners at The Children's Center and Black Family Development, Inc."

The EMBRace program is one of the few data-driven and family-based interventions focusing on discrimination and racial communication for families and clinicians — this dual-pronged approach helps tackle problems within service provision and supports families to address these issues within their personal ecosystems.

Learn more about Dr. Anderson on her website: rianaelyse.com

Dr. Anderson addresses racial discrimination on her blog:
rianaelyse.com/blog

ABOUT THE RACHEL UPJOHN SCHOLAR AWARD

The aim of the Rachel Upjohn Scholar Awards program is to train a new generation of clinical investigators focusing their research on depression, bipolar disorder, and related illnesses. The program offers support to young researchers who have chosen to devote a major part of their research efforts toward the study of depression. The fund honors Rachel Mary Upjohn Meader. Mrs. Meader and her husband Edwin were among the most ardent supporters of the mission and work of the Depression Center during their lifetimes.

ABOUT THE RACIAL INJUSTICE AWARD

In response to recent tragic events involving systemic racism and violence against Black Americans, the Depression Center created a new and targeted funding opportunity for researchers exploring issues of racism and its effects on mental health. To that end, monies from the Frances and Kenneth Eisenberg Translational Research Fund were directed to fund this Racial Injustice Award.



ZERO TO THRIVE RAPIDLY GEARS UP TO SUPPORT FAMILIES

During the COVID-19 Pandemic

THE CORONAVIRUS PANDEMIC has forced many families to adapt to a new, challenging reality, often exacerbating or causing anxiety, depression, and other strong emotions. The Zero to Thrive team, led by Dr. Maria Muzik and Dr. Kate Rosenblum, saw this first-hand in the early days of the pandemic and rapidly responded to the need.

“Our response to COVID-19 put us into an accelerated state... we were working nonstop to pivot our approaches to what works during the pandemic. Creating a Zoom link for everything was just the beginning.” —Dr. Maria Muzik

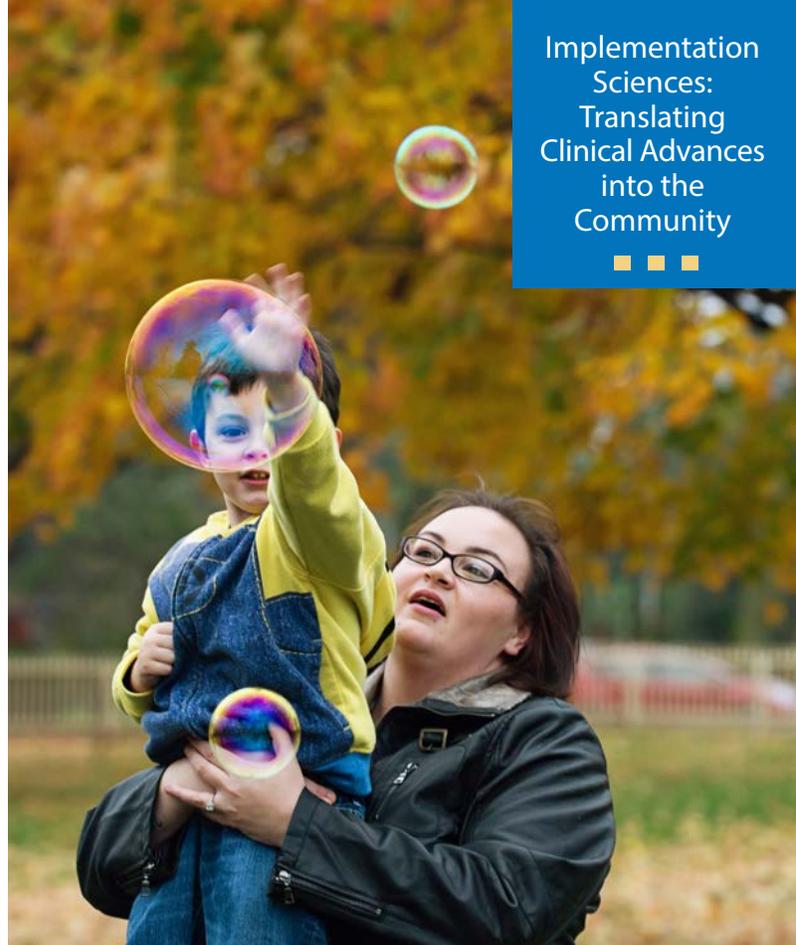
The Zero to Thrive team quickly published resources and offered webinars to support families and professionals. Michigan Medicine's frontline staff were saving lives in a new world and needing enhanced support. One nurse shared, “I've never left work crying about patients who died alone and feeling so totally at a loss for how to help.” Dr. Rosenblum stepped up and added expertise to the leadership team that put together a psychological first aid support system to enhance the frontline's resilience.

“I was motivated to join the effort to make sure the health care workers were supported each step of the way. We know that supporting frontline providers results in better care for patients and helps them do their work of saving lives.” —Dr. Kate Rosenblum

Dr. Rosenblum and other Zero to Thrive faculty collaborated with colleagues at Mott Children's Hospital to provide emotional support to families with the **Thrive With Your Family Video Series**. Each week, panelists discussed important topics, including self-care, supporting kids and teens, having a baby during a pandemic, and coping with loss and grief. One mother of four shared, “my neighbor told me about this, and I thought, ‘I have four kids, I don't have time for this’, but watched the first one and was hooked... I ended up sharing the link with all my mom friends.”

Zero to Thrive programs, including **Mom Power** and **Fraternity of Fathers**, quickly went virtual so parents who needed support continued to receive it. “We have been pleased with our success going virtual and have actually increased access for many,” said Dr. Muzik. Many parents expressed the significance of having the programs available, “helping [them] stay connected” during such a difficult time.

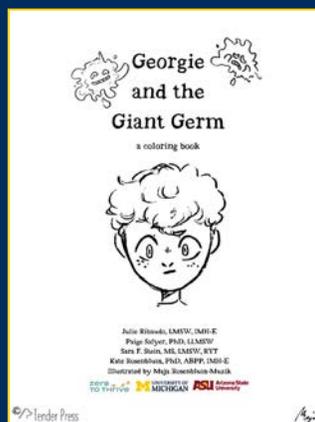
From the new COVID environment, the team worked to creatively provide support to pregnant women and families with young children. Dr. Rosenblum summarized the process, “we have looked for the opportunities, adapted our strategies and models to the new reality... really that is what Zero to Thrive is all about...*resilience*.”



Georgie and the Giant Germ Children's Coloring Storybook

SPOTLIGHT

Zero to Thrive, in partnership with Tender Press Books, released *Georgie and the Giant Germ*, a coloring storybook to help kids with big feelings during COVID-19. Many families shared stories of its impact:



“Our 3-year-old grandson was struggling at the time... and he was anxious and sad. Since reading [Georgie and the Giant Germ]... I can feel the weight off his shoulders and the mood in the household is lighter. Please let your colleagues who developed the book know how grateful we are for their efforts. Such an important contribution!”

This summer, *Georgie and the Giant Germ* was added to the National Library of Medicine as an important resource for families nationwide.



zerotothrive.org



THE MICHIGAN CHILD COLLABORATIVE CARE PROGRAM (MC3)



WITH MENTAL HEALTH ISSUES SOARING during the COVID-19 pandemic, the **severe shortage of psychiatry support for children, adolescents, and perinatal women** has been further exacerbated.

During this unprecedented and challenging time, the MC3 program has continued to offer **critical perinatal and pediatric psychiatry support to primary care providers in Michigan** who are managing patients with behavioral health problems. Led by Dr. Sheila Marcus, the MC3 program provides vital services to providers, patients, and families throughout Michigan, including:

- Same-day and scheduled psychiatry consultation for diagnostic clarification and evidence-based pharmacologic and behavioral health treatment recommendations
- In-home, video-based psychiatry evaluations for patients
- Behavioral Health Consultants (master's-level mental health professionals) who triage consultations, offering individualized guidance and connection to local resources
- Live and remote trainings offered regionally and statewide
- Education for enrolled providers, including bi-monthly live webinars, recorded modules, and group case consultation

In the past year, the MC3 program has expanded its perinatal reach with leadership from Dr. Maria Muzik, providing these services to more high-risk perinatal and postpartum women. Its unique focus on relational health, with an emphasis on early childhood trauma, supports the psychosocial health of patients and families throughout the state.

SPOTLIGHT

MC3 Pediatric and Perinatal Behavioral Health in Primary Care Conference

Prior to the limitations of COVID and the transition to virtual spaces, MC3 hosted a behavioral health conference in Flint for pediatric and perinatal providers and trainees. The conference featured presentations related to perinatal and pediatric behavioral health, including perinatal mood disorders, opioid use, treating depression in youth, youth suicide and safety planning, ADHD treatment, and trauma.

“I learn something new with every MC3 consult. I am more confident with management of mental health services as a result of having the service available. I very much appreciate this service. They discuss the pros and cons of different meds, they discuss follow up, and they follow up really quickly.” —MC3 Enrolled Provider

As the COVID-19 pandemic further restricted access to care and caused a “second wave” mental health pandemic, the MC3 pediatric and perinatal programs quickly adjusted their focus to ensure providers had access to relevant resources to help them respond to their patients’ needs. All existing MC3 services remained in place, while expanding access to Behavioral Health Consultants, launching telepsychiatry patient evaluations, and expanding its virtual resources. To further support providers during the pandemic, MC3 offered virtual psychological first aid via ‘Provider Café’ sessions.

MC3 also responded to the historic call for racial justice with a statement of solidarity, a comprehensive list of anti-racism resources, and a commitment to take action by hosting a webinar series focused on health inequities.

MC3 is available in all of Michigan’s 83 counties and continues to enroll providers across the state. The program has more than 2,700 providers enrolled and has managed over 12,500 service requests for more than 12,000 patients. A recent satisfaction survey found that 98% of providers “felt more confident that [they] could effectively treat patients’ behavioral health problems” with the support of MC3 and agreed that “the procedures for obtaining phone consultations are efficient and user-friendly.”

Facing the monumental challenges of a global pandemic and related mental health crises, the MC3 program has continued to successfully leverage scarce psychiatry resources to support providers and Michigan’s vulnerable perinatal and pediatric populations. Looking ahead, the program seeks to continue its perinatal expansion and will focus training and support on suicide screening and safety planning within the primary care setting.



mc3.depressioncenter.org



ADDIE WEAVER, PH.D., MSW

IMPLEMENTS POSTPARTUM DEPRESSION SCREENING AND REFERRAL PROGRAM

in rural Michigan WIC clinics

POSTPARTUM DEPRESSION tends to be devastating. It is more difficult to treat than “routine” Major Depressive Disorder or MDD, and often life-threatening to both mother and infant. Despite being at high risk for postpartum depression, low-income, women who live in rural areas often do not receive the treatment they need. Addie Weaver, Ph.D., MSW, is a mental health intervention researcher committed to improving access to evidence-based treatment for underserved populations, with specific attention to addressing treatment access disparities experienced by rural Americans. Dr. Weaver addresses this public health concern through her project *“Implementing Postpartum Depression Screening and Referral in Rural Women Infant and Children (WIC) Clinics.”* This project identifies ways to broaden access to mental health care for these underserved populations. Dr. Weaver received an Oscar Stern Award in 2020 that will provide two years of funding for a total of \$50,000 to support her research.

Dr. Weaver’s project focuses specifically on women who have postpartum depression and receive services from Women Infant and Children (WIC) clinics in rural Michigan.

Partnering with a WIC clinic in Lenawee County, she is tailoring a free, online, evidence-based treatment for women who are already connected with WIC clinics. Dr. Weaver will then evaluate the treatment’s impact on the women’s depression. If the results are promising, this project could be the model for mental health treatment that could be made readily available in WIC clinics in rural areas across the state of Michigan.

Dr. Weaver is also interested in using epidemiologic data to better understand the prevalence and causes of mental illness in rural communities, with attention to the heterogeneity of rural populations and the potential importance of understudied subgroup differences. Ultimately, however, **the goal of her research is to improve the quality of life for rural residents with mental health needs.**

Addie Weaver is an assistant professor at the University of Michigan School of Social Work where she has been active in research since arriving at U-M in 2011. She received both her MSW and Ph.D. degrees in social work



from the University of Pittsburgh. Her research utilizes innovative approaches to increase access to care, including technology-assisted treatment and building capacity to deliver care in community settings that are accessible and acceptable to individuals experiencing mental health needs.

For her work, Dr. Weaver also received the 2019 Michigan Mental Health Integration Partnership (MIP) Scholars Award. The MIP Scholars Award supports U-M faculty by seeking matching money to aid implementing and evaluating mental health services and promote integrated care to improve access to evidence-based practices for lower income and Medicaid-eligible populations with behavioral health care needs in Michigan. The \$50,000 award is provided by the U-M Depression Center Frances and Kenneth Eisenberg Collaborative Innovations Fund and is matched 1:1 with Michigan Medicaid funds. The Depression Center is proud of its track record in obtaining matching funds, doubling the favorable impact of innovative projects.





AFTER HER SERVICE PROGRAM

Personal Readiness & Professional Success

AFTER HER SERVICE is a program for Post-9/11 female veterans designed to build personal resilience and foster professional success. The program begins with a skill-building retreat focused on increasing resiliency and positive coping strategies. Following the retreat, participants engage in 12 sessions of one-on-one coaching to set and meet career goals.

In Summer 2020, 29 women completed their journey with After Her Service, bringing the total number of graduates to 79 since the program started in 2017.

Below, three of the women from the most recent cohort share some of the ways the program has impacted them:

How the resiliency and mindfulness skills they learned have helped them

MARIA: “The most valuable thing I’ve learned has been the different resiliency skills. Now I always focus on looking for the good stuff. And just gaining confidence and self-awareness, all of that is a package.”

ANGELA: “It’s allowed me to stop focusing on negative stuff, because I do suffer from depression and anxiety. With mindfulness especially, it’s about looking around and taking in what you see and not just breezing through things. I’m really trying to stay grateful and see the beauty in life.”

How it felt to spend a weekend with so many other female veterans

ANGELA: “I retired from the military in 2003, and was kind of disconnected, and then finding out about this program, I said, ‘Wow, something just for women!’ Before the retreat I’d never been in a room with that many females who’ve served in the military.”

JULIE: “Just being in that room with all of those accomplished women was insanely empowering. It was nice to see so many women doing well and wanting to better their lives.”

How it helped them identify and achieve professional goals

JULIE: “I was in a delicate place in my professional life and having a really hard time trying to figure out whether I was going to go back to school, so my goal was to figure out exactly what I wanted to do professionally. For me, the highlight of my professional coaching was figuring out what I want to do.”

MARIA: “From the coaching, I worked on ‘what is it that you want to do?’ I’d never really had that kind of honest conversation. I love doing what I do now, but if I didn’t have it, what would I want to do? That’s something I got a lot of reflection on and a lot of figuring out where my strengths are.”

How they enjoy being a part of a nationwide network of female veterans

MARIA: “It’s a great way to get to know people from other backgrounds and with different experiences. I liked that there was a variety of backgrounds among all the women.”

ANGELA: “The network I built was the most valuable part of the program for me. I’d describe the retreat as a weekend of rejuvenation and relaxing, but the main purpose is to build that network from all over the country!”

Learn more about the program: afterherservice.org



MARIA
RETIRED
ARMY
VETERAN



ANGELA
RETIRED
AIR
FORCE
VETERAN



JULIE
AIR
FORCE
VETERAN



m-span.org

M-SPAN Updates

The Peer Advisors for Veteran Education (PAVE)

Program recruited 19 new partner campuses and trained representatives from those institutions to launch the program at their schools in the Fall 2020 semester. Despite the constraints of the pandemic, the program is now offered at 42 colleges and universities across the country, with the latest expansion made possible by grants from the May & Stanley Smith Charitable Trust and the Robert R. McCormick Foundation.

The After Her Service Program

team began hosting weekly resiliency and positive coping sessions via Facebook Live to connect with and support the 29 female veterans who most recently completed the program. Planning is underway for a new virtual delivery of the program for the next cohort of women.

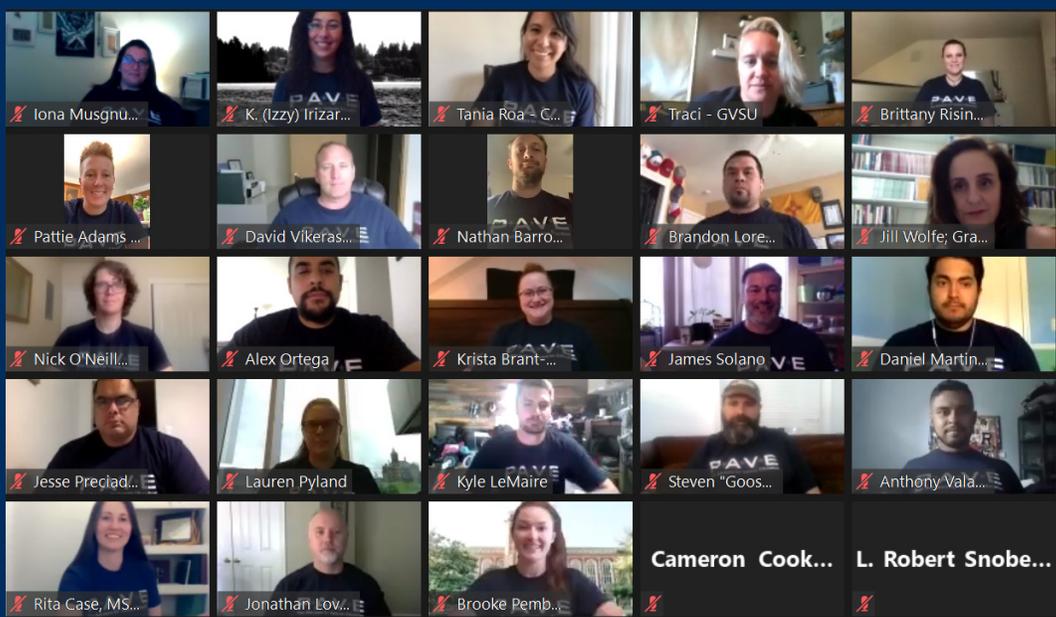
After the coronavirus pandemic made offering in-person groups impossible, the **HomeFront Strong** Program recruited a record number of military and veteran spouses and partners for the online version of its resiliency program. The program will launch virtual groups for military and veteran spouse caregivers later this year.

PAVE Program Virtual National Training Conference

Once the coronavirus pandemic began, it became clear that it wouldn't be possible to conduct the **Peer Advisors for Veteran Education (PAVE)** program's National Training Conference in person as usual. So Associate Professor of Psychiatry Michelle Kees, Ph.D., and the PAVE program team put the Marine Corps ethos of "improvise, adapt, and overcome" into practice and converted the training to a fully virtual delivery. Ninety-five representatives from PAVE's partner campuses across the country participated in the two-day online training in August 2020. In the post-training evaluation, training participants gave rave reviews, with one participant saying, "It has been amazing to see the expanse of the PAVE network! The interaction and conversation going on has not been dampened by the fact that we are virtual!"

This autumn, PAVE will be active on 42 campuses nationwide, supporting student veterans and their path to academic success. A void has been creatively filled and it's paying off.

Learn more about the program:
paveoncampus.org



"Improvise, adapt, and overcome."

UNDERSTANDING STUDENT MENTAL HEALTH IN Detroit Public Schools Community District (DPSCD)

U-M TRAILS and the YOUTH POLICY LAB
Conduct Unparalleled Needs Assessment



STUDENT MENTAL HEALTH A TOP PRIORITY FOR DPSCD

Extensive research confirms the lifelong consequences of childhood exposure to traumatic environmental stressors, such as poverty, homelessness, violence, and neglect — experiences that children in Detroit face all too often.

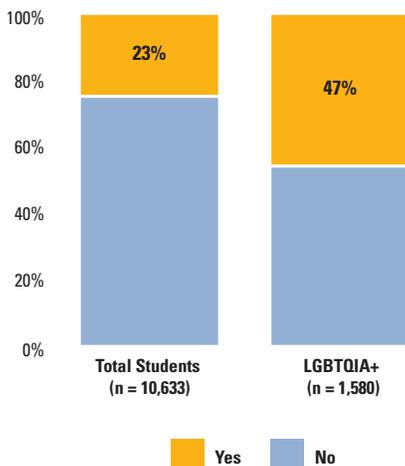
To help combat the effects of these social determinants of health in Detroit, DPSCD has identified student mental health as a key priority in their Blueprint 2020 and partnered with TRAILS to help make effective mental health services accessible in all 110 schools in the District, reaching 50,000 students.

An early step in this multi-year partnership was a comprehensive needs assessment to fully understand student mental health and related factors. Surveys completed by 14,000 Detroit students, staff, and families provided data about risk and protective factors, access and barriers to care, symptom presentation, satisfaction with available resources, and perceptions of mental health concerns.

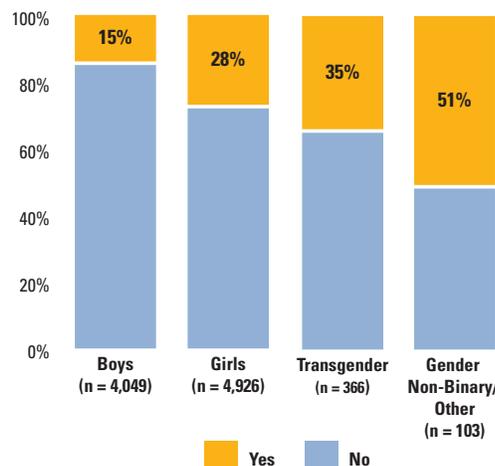
A survey effort of this size and scope is unprecedented and required extensive collaboration between the District, TRAILS and the U-M Youth Policy Lab. Findings will be used to inform and evaluate future programming for students, staff, and families.

A VARIETY OF FACTORS PLACE CERTAIN STUDENTS AT HEIGHTENED RISK OF SUICIDE

SUICIDAL THOUGHTS BY SEXUAL ORIENTATION
(Within Past Year)



SUICIDAL THOUGHTS BY GENDER IDENTITY
(Within Past Year)



FINDINGS:

The needs assessment provided several main take-away messages. First, DPSCD students are a population at risk, with many having experienced trauma exposure and significant mental health concerns. Consequences include diminished academic engagement and achievement, and a high risk of suicide. At the same time, DPSCD staff are experiencing burnout and vicarious trauma. Finally, the DPSCD community is driven to help. Staff, administrators, and families overwhelmingly voiced the desire for resources and training to better equip them to offer effective student mental health support.

SPECIFIC STUDENT FINDINGS:

A large portion of students experience mental health concerns:

- 62% experience symptoms of depression
- 56% experience symptoms of anxiety

Many students have experienced traumatic events or Adverse Childhood Experiences (ACEs):

- 61% reported at least 1 ACE
- 19% reported experiencing 4 or more ACEs

Deeply troubling rates of suicidal ideation among students:

- 32% reported having thoughts of suicide or self-harm in the past 2 weeks
- 23% reported having seriously thought about attempting suicide in the past year

RECOMMENDATIONS:

TRAILS intends to build upon the District's commitment to student mental health to implement three tiers of preventive interventions:

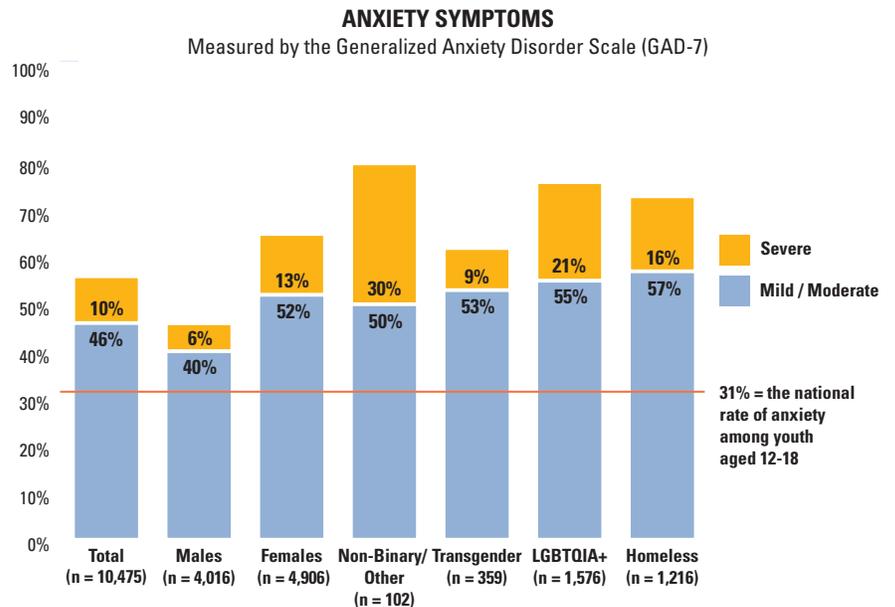
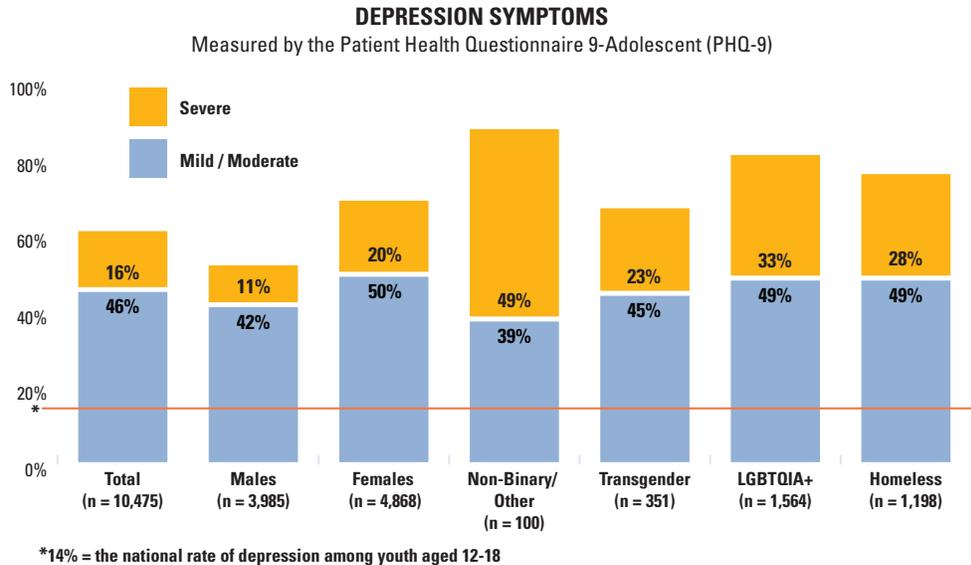
- 1. Universal prevention** — increasing awareness and help-seeking, and building effective self-care strategies among all students
- 2. Early intervention** — training and support to increase staff expertise in evidence-based practices such as cognitive behavioral therapy (CBT) and mindfulness for students already struggling
- 3. Suicide prevention** — training and resources to increase the accurate, timely identification and referral of students at risk of suicide

By training teachers and school mental health professionals to use evidence-based practices, and offering ongoing implementation support and resources, TRAILS aims to leverage the availability and expertise of established staff, allowing the District to sustainably support its own students.

Together, TRAILS and DPSCD are fighting for equity — making sure that all Detroit students can access effective mental health services, enabling them to realize their full potential.

trailstowness.org

DEPRESSION AND ANXIETY SYMPTOMS AREN'T IMPACTING STUDENTS EQUALLY



NOTE: School Mental Health in Detroit Public Schools Community Districts: A needs assessment from TRAILS and the Youth Policy Lab, does not include the experiences of students who declined to participate or who were absent during the survey window. TRAILS acknowledges that those are likely some of the students at highest risk and that there's an underrepresentation in this needs assessment of kids about whom we might be the most concerned.



LASTING LEGACY

A Peer-To-Peer Faculty Mentor Leaves Indelible Mark

FOR 11 YEARS, the positive force of one teacher created ripple effects throughout the Depression Center's Peer-to-Peer Depression Awareness Program. Even in retirement, that will surely continue.

That's what **Robbie Stapleton** meant to Ann Arbor's Community High School, and the larger education community, for over three decades.

Stapleton has been a fixture of the program, affectionately nicknamed P2P, from the start. The nascent program had humble beginnings in 2009. Stapleton was identified by her superiors as the ideal candidate to lead a team of teenagers into the relatively unknown arena of peer-guided mental health wellness.

“My dean at the time said, ‘I am volunteering you for this,’ and told me a little about it. I was glad to do it and it made sense because at the time I was the health teacher and we had a pretty robust mental health and psychiatric disorders unit. I ended up being the first line of counseling to a lot of students.” —Robbie Stapleton

A perfect candidate indeed. Stapleton's connection with students was buoyed, in part, because she wasn't the typical mental health counselor. In fact, she wasn't a counselor at all. Nor was she a social worker. Stapleton was simply a teacher, but one who taught students about all the nitty-gritty subjects like sex education, alcohol awareness, drug use and fitness.

Stapleton grew into this vital role. Her first job was teaching history and government. Nevertheless, after a decade, she made a major switch.

“Some things are just serendipitous. Because of what I taught in my required health classes, I think I was seen in the building as a pseudo-counselor. I was really careful with that. I don't have any fancy letters after my name. All I can do is listen, and maybe listen the right way, so that you'll talk.” —Robbie Stapleton

Her attributes as a listener and leader resonated with students, colleagues and U-M staff alike. From P2P's first year at Community, known within the school as the Depression Awareness Group (DAG), the program became a hallmark of self-help and friendly support.



More importantly, it became a mainstay.

Peer-to-Peer was implemented in 27 schools across Southeastern Michigan last year, while celebrating its 10-year anniversary in 2019. It has become an institution at places like Community High because of faculty mentors patterned after Stapleton.

“Robbie's impact on P2P really can't be put into words,” said Stephanie Salazar, senior outreach and education program manager at the Depression Center. “She **is** the program. It doesn't work without passionate and dedicated school professionals like her. She is so in-tune with students and knows exactly what is effective and what doesn't work in a school setting.”

And Stapleton struck the right chord with students. She realized that from the start.

“We did talk about these (tough issues) in a very intimate way in class together,” Stapleton noted. “I know kids are going to talk to their peers first and foremost, and then after that, to adults that they trust. Someone you know. My outlier status really served to the benefit of the program.”

Starting the program might have been easier at Community because of Stapleton's background and the relationship-based model that the school implements for its students and staff. Stapleton's goal each year was to form a group that would take the campaign and run with it.

At first, she mainly connected with girls, as there was no female counselor at the school. In Stapleton's last year, there were more boys than girls as part of the DAG.

“The trick was to formulate the best group to appeal to all kinds of students,” Stapleton noted. “The makeup of the peer education groups chose themselves. This past year (2019-20) was the first year we had more men than women. That was self-selected. To me, on a micro-level that was a huge success.”

Another important tie-in was the buy-in from other teachers. Many granted Stapleton and her students space to function—print and post posters, take class time to distribute surveys to evaluate the program's success, and give presentations.



Robbie Stapleton

Many students have remarked to Stapleton how they took what they learned in P2P and brought it with them to college and the workplace. That reduces stigma.

“When I think of Robbie, I think of many things, but mostly I think her legacy will be seen through the countless students she has touched,” Salazar added. “She has inspired so many, made students rethink the ways they look at health and the world around them, and has planted seeds of advocacy that have continued to grow exponentially.”

And the effect on lives, whether saved or enhanced, is immeasurable.



I think that this program greatly increased the quality of lives. I know for a fact there were dozens and dozens of kids who talked to people who wouldn't otherwise have. If that has saved lives, I'll take it.” —Robbie Stapleton

As for what the next steps are in her retirement? Well, the new grandmother will continue to run every day, talk to people and guest speak when asked. Although Stapleton has moved on from P2P, her legacy remains.

“While it's heartbreaking to lose Robbie as part of the program,” Salazar concluded, “she has taught us so much about what we're asking of our community partners and what makes the program successful from that side. She's left us with a lot of wisdom to share with new mentors. She truly institutionalized the program into her school, so I'm confident that more good things are to come.”

So Peer-to-Peer marches on in 2020-21, even during the pandemic, when it might be needed now more than ever. This year, the program has 31 schools between Washtenaw County and Rhode Island, and has reached over 110,000 students during school-wide campaigns, enough to overfill Michigan Stadium's capacity.

Our shared journey to raise awareness, promote help seeking and reduce stigma in the schools continues, aided by enduring contributions of Stapleton and many other teachers.

About Peer-to-Peer Depression Awareness Program

The Peer-to-Peer Depression Awareness Program (P2P) is another pillar of the Depression Center's efforts to identify and intervene in mood disorders earlier in life. Started in 2009 in collaboration with schools throughout Washtenaw County, P2P provides information and support to student teams, empowering them to effectively reach peers and create a growing, critical mass within their schools through unique mental health awareness and stigma reduction campaigns.

- “[The best part of being a P2P member is] knowing that I'm actually able to take action in a way that matters, and that I'm making a difference, even if I can't see it with my own two eyes. Being able to build connections and support others is a really transformative experience.” — P2P student member
- 16 high schools
- 11 middle schools
- Since 2009, over 1,600 students have become P2P educators and advocates creating over 300 student-run events
- The number of students reached through these school-wide campaigns would exceed Michigan Stadium's capacity
- P2P participants and stakeholders gathered during the opening night of an art exhibit at the downtown Ann Arbor District library to celebrate 10 years of student-created anti-stigma work
- Creation and dissemination of content to help student teams transition programming virtually after COVID-19 pandemic shutdown



depressioncenter.org/p2p



Naveed Arif Iqball
with his best friend Jackie Slaby

NAVEED ARIF IQBALL AWARD

The Naveed Arif Iqball Award for Mental Health Advocacy and Stigma Reduction was established in 2020 to promote and enhance innovative stigma reduction efforts through a grant that will further these endeavors. The purpose of this grant is to support new, innovative, and even experimental approaches to tackling mental health stigma within Washtenaw County, particularly targeting young adults (i.e. high school age up to 26 years old).

The inaugural award recipients are Big Brothers Big Sisters of Washtenaw County and Unseen United, a new project started by Naomi Alvarado.

SPOTLIGHT

Michigan Psychiatry Resources for COVID-19 microsite available to the public

During these times of unprecedented uncertainty and stress, the U-M Department of Psychiatry wants to share COVID-19 related information in a variety of key areas. This microsite has been developed by several faculty members with extensive expertise in many of the issues affecting you and your families during this critical “stay at home” period. Visit the site: michmed.org/covid-psych-resources

ATHLETES CONNECTED

Similar to all students, student-athletes experience mental health problems such as depression and anxiety, but for a variety of reasons, they often are reluctant to seek help. The Athletes Connected program, developed with initial funding from an NCAA Innovations in Research Grant, is a unique collaboration between the U-M Depression Center, School of Social Work, and Athletic Department. Athletes Connected uses a comprehensive approach that involves student engagement, targeted interventions and scientific research to increase awareness of mental health issues, reduce the stigma of help-seeking, and promote positive coping skills among student-athletes. Core components of the program are education and awareness through team presentations and digital content through videos, social media, and the website as well as biweekly wellness groups.

- Creation and dissemination of content highlighting strategies to cope with the pandemic
 - *An Athlete's Guide to Coping During the COVID-19 Pandemic*
 - *The New Perspective: Adapting to Isolation*
 - *Effective Learning Strategies Away from the Classroom*
 - *Staying Mentally Well During the Pandemic*
 - *The Unavoidable Worry of the Unknown*
- Compiling a list of Black, Indigenous, and People of Color-specific mental health resources for student-athletes
- Creating and distributing additional student-athlete mental health stories:
 - *From Agony to Leadership: A Journey to Help Others* (Sydney Wetterstrom, former U-M volleyball athlete)
 - *Q&A: Gymnast Polina Schennikova*



DEPRESSION ON COLLEGE CAMPUSES CONFERENCE

Due to the COVID-19 pandemic, the annual Depression on College Campuses Conference (DOCC), generally held in March, had to be canceled. It has been rescheduled with a revised theme to address current college student mental health challenges: *Addressing the Dual Pandemic: The Impact of COVID-19 and Racial Injustice on College Student Mental Health*.

> Please save the date and join us for a virtual DOCC conference March 9-10, 2021.

George Orley Student Mental Health Advocate Award

Though the conference was canceled, the U-M Depression Center nevertheless awarded a pair of worthy students the George Orley Student Mental Health Advocate Award. The 2020 awardees, **Hannah Connors** of the University of Michigan's Ford School of Public Policy and **Haley DeGreve** of Augustana College in Rock Island, Illinois, each received a certificate and \$1,000 for the student organization of their choice.



CAMPUS MIND WORKS WELLNESS GROUPS

The Campus Mind Works outreach initiative offers free educational support groups on U-M's Ann Arbor campus to undergraduate and graduate students who are managing a mental health condition. The support groups are organized through a partnership between the U-M Depression Center, College of Engineering's C.A.R.E. Center, and the Newnan LSA Academic Advising Center. Groups convene twice a month during the school year.

- 9 groups held; 68 attendees
- Topics: Strategies for Managing Relationships, Combating Self-Doubt, Talking Back to Depression and Anxiety, Winter Blues and Depression, Anxiety and Procrastination, How to Get Better Sleep
- 78.7% of attendees rated the educational information as very good or outstanding

New methods/new partnerships

- All programming moved to virtual, including wellness groups
- New website sections created: COVID-19 information and Coping with Racial Trauma and Oppression
- Developed a new monthly newsletter
- During 2020, in response to student demand, the Campus Mind Works team partnered with Munger Graduate Residency Hall leaders to create an additional wellness group for graduate and professional students.
- Partnering with Rackham Graduate International to provide student trainings
- Continuing partnership with the School of Music, Theatre, and Dance to offer micro-grants to students to support student mental health among SMTD students



BRIGHT NIGHTS

The Bright Nights Community Forum series attracts hundreds of people each year for educational presentations and discussions on a variety of topics related to depression, bipolar illnesses and related disorders. The forums, typically held at local libraries, feature topics of interest addressed by a panel of experts from the Depression Center and the community, followed by question & answer sessions with audience members.

Bright Nights began as a partnership between the UMDC and the Ann Arbor District Library, and has since grown to include presentations in neighboring communities. In-person spring events had to be canceled due to COVID-19, but the series returned virtually in Fall 2020.



MAXWELL GRAY FILM FELLOWSHIP

The Maxwell Gray Film Fellowship was established in 2016 to promote student mental health and attack the consequences of bipolar and depressive illnesses by producing original video content. This year marked the second of a three-year program to create a series of student stories highlighting special student populations in conjunction with the Campus Mind Works website. Its aims are the established triad of increasing knowledge of depression and related illnesses, reducing stigma, and increasing help-seeking.

The program had two undergraduate fellows and a professional film maker create a mental health video series guided by consultation from Depression Center leaders. The two videos produced this summer highlighted Jake, a transfer student struggling with loneliness and anxiety, and Maria, a student coping with the traumatic loss of her mother. Both shared the common message that *"You are not alone, find your community."* The videos can be viewed at: depressioncenter.org/maxwellgray.

The Depression Center at U-M is the launching site for the National Network of Depression Centers (NNDC).

The NNDC was designed to recruit and integrate efforts from other esteemed universities to conduct large-scale, longitudinal advances to aid the diagnosis and treatment of mood disorders, not unlike centers for the treatment of cancer. Today, the NNDC has expanded to 26 universities and 6 international partners which work together in developing partnerships with other global universities to lessen suicide tragedies and help eradicate the stigma of these illnesses.

NNDC.org

SPOTLIGHT

MENTAL MINUTE WITH MICHIGAN MEDICINE PODCAST

To expand outreach in 2020, the U-M Depression Center launched the Mental Minute with Michigan Medicine. The purpose of the podcast is to learn more and raise awareness about brain-behavior health in a fun, casual environment. Host Will Heinger interviews guests from within the U-M community as well as experts from around the state and nation to discuss the most prevalent topics surrounding mental health.

Watch or listen to all episodes: depressioncenter.org/mentalminute





MENTAL HEALTH IN THE WORKPLACE CONSULTING GROUP



MAJOR DEPRESSION has long been the leading cause of disability worldwide, and events of 2020 have only increased the spotlight on depression, anxiety disorders, and other mental illnesses in the workplace. In addition to profoundly impacting employee quality of life, unrecognized and unresolved depressions and anxiety come with a huge cost to employers in the form of lost productivity. Recognizing these

needs, the University of Michigan Depression Center created the Mental Health in the Workplace Consulting (MHWC) Group which uses a multiphase consulting process to create a specific intervention for each workplace, and then oversees its implementation.

Led by Sagar Parikh, M.D., FRCPC, and Michelle Riba, M.D., M.S., the MHWC Group has begun implementing a comprehensive set of educational and systems interventions at a

large Michigan employer, and is connecting with other companies in the state.

In addition, Drs. Riba, Parikh and Greden recently published a book on workplace mental health titled “Mental Health in the Workplace-Strategies and Tools to Optimize Outcomes.” This comprehensive book covers business challenges and mental health treatment, and includes Australian, British, and Canadian perspectives.

SPOTLIGHT

Workplace Mental Health Conference 2020

Led by the Mental Health in the Workplace Consulting Group together with a multidisciplinary committee of experts, the University of Michigan Depression Center hosted its inaugural Workplace Mental Health Conference online in August 2020. Given the mental health effects of the COVID-19 pandemic, each of the conference’s sessions were centered around the theme, “Supporting Employees in the COVID-19 Era”. The afternoon event featured keynote speaker Debra Lerner, MSc, Ph.D., and aimed to examine mental health challenges and solutions from both a corporate and academic perspective. A multidisciplinary group of nearly 150 employers and leaders from diverse industries, researchers, and mental health professionals signed up to learn about the impact of COVID-19 on employee mental health, as well as real-world strategies to support their teams moving forward.

WORKPLACE MENTAL HEALTH CONFERENCE: SUPPORTING EMPLOYEES IN THE COVID-19 ERA

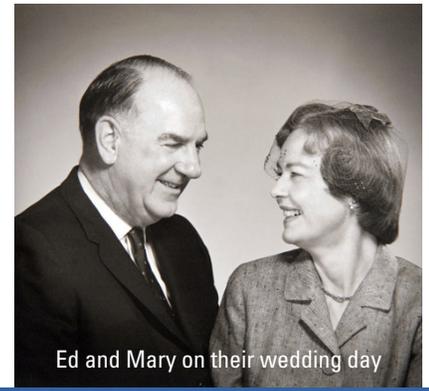
AUGUST 19  ONLINE EVENT

M | DEPRESSION CENTER



RACHAEL MARY UPJOHN LIGHT MEADER:

A TREND-SETTING PIONEER THROUGHOUT HER LIFE



Ed and Mary on their wedding day

The Impressive Legacy of the Upjohn Family Within the Depression Center

IN ITS NEARLY 100-YEAR HISTORY, there are only 82 signatures on the American Geographical Society's Fliers' & Explorers' Globe. Two of them belong to Rachael Mary Upjohn Light Meader who, along with fellow signers Amelia Earhart, Charles Lindbergh, Sir Edmund Hillary, and Richard Byrd, was asked to sign the globe in recognition of her pioneering spirit. Meader is one of only three honorees to sign the globe twice.

Explorer, navigator, aerial photographer — Mary Meader was all of these things and more. Despite the challenges faced by women born in the early 20th century, she followed her dreams and took chances, leading a life marked by adventure and fulfilled by philanthropy. Born and raised in Kalamazoo, Michigan, Meader attended Smith College in Massachusetts before marrying Richard Upjohn Light, a physician. Both of them subsequently embarked on a remarkable adventure — especially for a young-married couple in 1937. They flew to South America in a small aircraft, took an array of photographs of parts of western South America, then shipped their photographically-equipped plane to South Africa. The two rejoined their plane in South Africa and embarked on a unique excursion of Africa that fueled global interest.

For the next year, the Lights flew some 35,000 miles across the continent with the goal of photographing little-known locales in East Africa. To prepare, Mary studied Morse code. She also learned how to shoot photos with an aerial camera and how to navigate and fly their Bellanca CH-400 Skyrocket monoplane, which was both unheated and unpressurized. Flying several hours each day, the couple had to breathe oxygen through tubes — with diminutive Mary hanging over the side of the plane strapped into a special frame they had installed. This adventurous position enabled her to take inaugural pictures of the land, mountains, and jungles below. Her more than 2,000 photographs captured swaths across all regions, including the Ruwenzori Mountains in Uganda, which had never before been photographed. Their flight was historic in aviation circles as well as among geographic explorers and photographers.

The philanthropic side of Meader, cultivated by family, was equally bold. A grandchild of Dr. W.E. Upjohn, founder of the

Upjohn pharmaceutical company, Meader learned firsthand the importance of giving back to one's community, something she took to heart despite being born to a life of privilege. She was humble throughout her life, downplaying her accomplishments while continuing to contribute to society in many ways, such as teaching local children to read when she was in her 70s.

Having a longstanding interest in improving the diagnosis and treatment of depression and pain, **she proposed endowing the Rachel Upjohn Professor of Psychiatry.** The professorship was initially awarded to Dr. John F. Greden, then the chair of Psychiatry and still the founder and director of the U-M Depression Center. Dr. Greden chose to use part of the award to establish the Rachel Upjohn Clinical Scholars Award to support emerging scholars in launching initial research projects. The Rachel Upjohn Scholars Award, as it quickly became known, has supported scores of productive faculty members at Michigan. And there was more... much more. With her second husband, Edwin Meader, whom she married in 1965, Meader actively encouraged Dr. Greden to pursue his proposal to develop a dedicated facility to support a new Depression Center and Ambulatory Psychiatry. They made a trend-setting \$10 million gift to catalyze its construction, encouraging his vision of a distinctive home for the Depression Center. **The building's design, described by Dr. Greden as being the "antithesis of depression," features skylights, artwork, and windows situated to bring in sunlight. It resonated with Mrs. Meader's artistic sensibilities and her lifelong commitment to the partnership between academics and community.** Characteristically taking the spotlight from herself, Meader chose to **name the building after her grandmother — the Rachel Upjohn Building.** Another of the Meaders' footprints at Michigan include their foundational gift to the Kelsey Museum of Archaeology in 2004, a reflection of Ed's background interests in geography and archeology.

The University of Michigan is proud to claim the Rachel Upjohn Building as a meaningful legacy for this remarkable woman and her family. As Mary Meader would have stated, "the best is yet to come."

Please see back cover for photos of the Rachel Upjohn Building

DEPRESSION CENTER LEADERSHIP TEAM

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Founder and Director, University of Michigan Comprehensive Depression Center
Emeritus Research Professor, Michigan Neuroscience Institute, Active Emeritus
Founding Chair, National Network of Depression Centers
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Professor and Associate Chair for Research, Learning Health Sciences
Professor of Psychiatry

Melvin McInnis, M.D., FRCPsych

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Director of Prechter Bipolar Research Program

Sagar Parikh, M.D., FRCPC

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Professor of Psychiatry

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Professor of Psychiatry
Director, PsychOncology Program, U-M Rogel Cancer Center
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Editor at BBC News and Co-Founder of The Whole Man Academy

Andrew Solomon

Author and Mental Health Advocate

SPOTLIGHT

Sagar Parikh, M.D., Wins 2020 Mogens Schou Award for Education and Teaching

Dr. Parikh, the John F. Greden Professor of Depression and Clinical Neuroscience and an associate director of the U-M Depression Center, has won the International Society for Bipolar Disorders' 2020 Mogens Schou Award for Education and Teaching. The award acknowledges Dr. Parikh's development of numerous courses and educational products, delivery of countless talks to the entire spectrum of stakeholders in bipolar disorder, oversight of educational programming at prominent bipolar and mood disorders meetings, and innovative approach to education in general.





HONORING VISIONARY LEADERSHIP The John F. Greden, M.D., Legacy Research Fund

IN 2001, DR. JOHN F. GREDEN founded the University of Michigan Depression Center — the first of its kind in the United States and presumably in the world. Soon, he will step down as its executive director. To honor his tremendous achievements and inspiring leadership, a research endowment in his name has been established. **The John F. Greden, M.D., Legacy Research Fund** will support and accelerate the depression research program that has thrived under his leadership. A combination of gifts will endow this fund in perpetuity — creating a lasting and meaningful tribute to Dr. Greden.

The John F. Greden, M.D., Legacy Research Fund will accelerate and support the Depression Center’s longstanding strategic priority to investigate and develop precision health breakthroughs for depressions, bipolar illnesses, anxieties, and related disorders. The Legacy Fund’s goals are to translate interventions into practice to produce better outcomes that appear more rapidly and are more sustained, being achieved because they more accurately target underlying causes. The Depression Center is also adding or expanding some of the truly exciting interventional treatment strategies such as ketamine infusions, brexanolone, theta-burst transcranial magnetic stimulation approaches, and others. These are innovative times in the treatment of mood disorders. The Depression Center has been a leader in developing these exciting advances and intends to continue

“showing the way.” The Fund will build on Dr. Greden’s talent for recognizing and bringing to fruition great potential in both individuals and promising areas of scientific advancement. The fund will be managed by future executive directors of the Depression Center, who will carry on Dr. Greden’s commitment to make personalized, precision treatments the norm for the country and globe.

A Brief History of Dr. Greden’s Contributions to the Depression Center — and the Field

To address the huge health burdens, disabilities, and costs associated with clinical depressions, bipolar disorders, and related conditions, Dr. Greden proposed establishing the first comprehensive depression center in the country at the University of Michigan. Approved by the Regents in 2001, the Depression Center-Ambulatory Psychiatry facility opened in 2006 and remains the only Depression Center whose construction was partially supported by National Institutes of Health funding. In 2007, Dr. Greden stepped down as chair of the University of Michigan Medical School Department of Psychiatry — a position he had held for 22 years — to focus on directing the Depression Center while leading efforts to establish other dedicated depression/bipolar centers nationwide; emulating the nation’s Cancer Center network, 26 National Network of Depression Center institutions now collaborate on important projects.

“Our Depression Center is truly a pillar of excellence, and one that I believe could only exist and succeed at a place like the University of Michigan. The center’s work to help many hundreds of millions of people worldwide who experience depression, bipolar illnesses, and anxiety is a testament to Dr. John Greden’s leadership and vision in research and treatment, and his commitment to ensuring that Michigan fulfills our mission of excellence for the public good.”
— University of Michigan President
Mark S. Schlissel

Please join us
in this special effort to secure the future of the research program at the Depression Center by ensuring that Dr. Greden’s legacy of discovery continues.

Contribute online at victors.us/gredenlegacy or contact Nancy Davis at 734-763-4858 or ndavis@umich.edu.

THANK YOU

John Greden, M.D., Wins Prestigious Awards

SPOTLIGHT

In 2020, Dr. Greden won the American Psychiatric Association’s Mrazek Keynote Award in Pharmacogenomics, the American College of Psychiatry Award for Mood Disorders Research, and, most recently, the University of Michigan annual Board of Regents Award for Distinguished Public Service. These awards add to Dr. Greden’s impressive contributions to the psychiatry field.

depressioncenter.org

 [DepressionCntr](#)

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For more information, to continue your support, or to tell us about your personal mission to advance depression research, visit giving.medicine.umich.edu or contact:

Nancy B. Davis, Director of Development, Mental Health Programs,
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