## Contents

2 ........................................................................................................ A message from institute leadership
3 ........................................................................................................ A commitment to young adults
7 ........................................................................................................ David Vaughan: Recognizing a need
8 ........................................................................................................ Sam Crowley: Finding strength through help
9 ........................................................................................................ Integrating behavioral health
10 ......................................................................................................... Leading the way in crisis prevention
11 ......................................................................................................... Peers providing support
12 ......................................................................................................... On and off campus
15 ......................................................................................................... Programs and services
16 ......................................................................................................... Leadership
19 ......................................................................................................... Our donors
20 ......................................................................................................... Financial report
In the world of behavioral health, there is a special urgency we experience when it comes to taking care of children or young people with psychiatric or mental health issues. That’s not to say there is not a profound sense of importance attached to the care of adults with the same issues, but when it comes to young people showing signs of behavioral health disorders, it’s natural that professionals in the field feel a strong motivation to help them realize their full potential for living rich and happy lives.

At the Institute of Living, we bring a wealth of experience, expertise, compassion and commitment to the wide variety of innovative and pioneering programs we offer for the treatment of young adults with behavioral health issues. Our Young Adult Services Program, which was recognized in 2015 with the first-ever National Program of the Year Award from the Association for Ambulatory Behavioral Health, provides in-depth treatment for young people between the ages of 17-26 who struggle with a wide range of issues – from substance abuse to depression to psychiatric disorders.

Innovation is a key component of our approach to caring for adolescents and young adults. We are among the first behavioral health institutions in the country to offer a comprehensive program for LGBTQ (lesbian, gay, bisexual, transgender and queer or questioning) youth. The Right Track Program, overseen by clinical coordinator Laura Saunders, PsyD, ABPP, provides young people with sexual identity issues a forum in which to grow comfortable with themselves and tools to engage confidently in society. Dr. Saunders’ work on behalf of this program has made it a focal point for other behavioral providers across the country interested in establishing similar services for LGBTQ youth – another example of the Institute of Living’s leadership role in serving the needs of young people.

We are also enormously proud of our pioneering programs for intensive outpatient behavioral health treatment for college students and our ground-breaking Potential Program for identifying psychosis in its earliest stages. Along with our dual diagnosis and partial hospitalization programs – as well as our full range of outreach and support group efforts – our Young Adult Services Program is among the most comprehensive and focused programs of its kind in the country.

As most people know, being an adolescent or young adult is not always easy, even in the best of circumstances. But for those suffering from mental health, substance abuse or identity issues, it can be that much more challenging for young people to make the transition to a happy adulthood. Our Young Adult Services Program recognizes this issue in all of its dimensions – and that’s why we make a difference.
The Institute of Living’s long-standing reputation as a national leader and innovator in the field of behavioral health services was further enhanced in 2015 when the IOL’s pioneering Young Adult Services (YAS) Program was named recipient of the first-ever National Program of the Year Award by the Association for Ambulatory Behavioral Health (AABH). The prestigious award was bestowed on the IOL program at the AABH’s 47th annual conference in San Diego in July. AABH is the national trade association for Intensive Outpatient Programs and Partial Hospitalization Programs that are vital components of the behavioral health continuum. The IOL program is the first in the country to receive the newly created award, which will now be awarded annually.

The IOL Young Adult Services Program was one of five finalists to be considered for the award. In the end, AABH experts selected YAS for the award because of its unique ability to customize treatment plans for young adults ranging in age from 17-26 – a critical time when many young patients experience their first episodes of severe mental illness. The innovative YAS Program – one of the first of its kind in the country when it was created in 2004 – provides comprehensive behavioral health services for a broad cross-section of young adults, including college students, dual diagnosis patients, young adults exhibiting symptoms of early psychosis and a pioneering program for LGBTQ (lesbian, gay, bisexual, transgender and queer or questioning) youth.

“We could not be more pleased or honored to be recognized with this award,” said Lawrence Haber, PhD, Director of Ambulatory, Young Adult and Health Psychology Services at IOL, who accepted the award at the July ceremony along with David Vaughan, LCSW, who was credited with originally creating the vision for the YAS Program.

The goals behind the YAS Program are to:

• Help young adults manage the transition back to their daily lives, which have been interrupted by symptoms of behavioral health issues.

• Help young adults become more stable in their recovery while transitioning out of an inpatient or residential level of treatment into an outpatient setting.

• Help young adults gain additional support from their families and support structures through therapy, and by helping everyone involved to offer greater support for the patient’s recovery.

• Help young adults learn adaptive skills in order to better understand and manage their illness.

• Help young adults gain necessary life skills to re-engage in productive activities such as school, work or other life goals.

• Help reduce the need for inpatient hospitalization.
The philosophy behind the program is to tailor each patient’s treatment plan to his or her individual needs as much as possible to support full recovery from an early episode of severe mental illness. Group and individual therapy are delivered in a style that is developmentally based and integrates techniques such as cognitive behavior therapy, coping skills training, motivational enhancement, emotion-focused expression and art therapy, psychodynamic therapy, family systems therapy, relapse prevention and interpersonal therapy.

The program recognizes the profound implications that behavioral health issues during young adulthood can have on the rest of a patient’s life, which is why a multidisciplinary, intensive, evidence-based approach is used to ensure that all of the patient’s individual needs are met.

**Programs within YAS include:**

- **Intensive Outpatient Program (IOP) for Dual Diagnosis Patients**
  This is a short-term, group-focused therapy program addressing both mental health and substance abuse treatment needs. The program consists of three 50-minute groups per day, with individual and family treatment as needed. The IOP team includes a clinician who coordinates treatment and a psychiatrist who provides medication management. The program lasts an average of six weeks, and the patient works closely with clinicians to develop goals and a plan for discharge after care.

- **Intensive Outpatient Program and Partial Hospitalization (PHP) Program**
  This is a short-term outpatient group therapy program in which patients attend sessions of various lengths three or four times a week. Treatment includes group-based programs as well as individual and family therapy as needed. The program is for patients experiencing depression, anxiety, psychosis or other mental health symptoms.

- **Intensive Outpatient Program for young adults returning to the Hartford area from college who have been diagnosed with depression or anxiety**
  This program’s goal is to give students the tools they need to manage the college experience and increase their opportunities for success. It includes time in the Young Adult Services Outpatient Program with an extra day focused on college-specific issues such as planning and organizational skills, daily living skills, socialization, cognitive and behavioral techniques and stress management.
• **Potential Outpatient Program (POP)** for outpatient services at a lower intensity than IOP/PHP programs. This service includes an Early Psychosis Program for patients experiencing early stages of psychotic illness, and involves individual and group therapy, medication management, family education and support services and cognitive remediation. The POP also includes a Young Adult Clinic offering individual psychotherapy and outpatient groups tailored to each patient’s needs. Groups include therapeutic support for clients with co-occurring medical and psychiatric conditions; therapeutic support groups for clients who have been discharged from IOP/PHP and who are now in outpatient therapy; therapy groups for young people experiencing early stages of psychotic illness; and a dual diagnosis relapse prevention service.

• **An Outreach Program designed to help bridge the transition from traditional office-based treatment to life in the community.** This innovative program helps with the integral process of recovery that allows clients and case managers to identify goals to reintegrate into the community. The program’s expanded clinical outreach team includes a clinician, a case manager, peer counselors and a vocational specialist to greater serve the developmental needs of each patient.

• **The Right Track/LGBTQ Specialty Track for young adults coping with issues related to sexual identity and acceptance.** This pioneering program serves young adults ages 16-24 who are experiencing emotional distress or trauma and who need a skills-based therapeutic program to grow confident in their identity. Goals of the program include validating aspects of emerging identity, building on role models and “family of choice” support systems to reduce feelings of isolation while developing skills such as identifying, modulating and dealing with stress or misconceptions. There is an emphasis on expressive therapies, mindfulness/movement and family support. There is also an adjunct support group that meets twice a month and is open to the community.

The IOL’s YAS Program is the only one of its kind in Connecticut, and is widely regarded as one of the first in the country to recognize the need for intensive intervention and therapeutic programs for young adults.
Lawrence Haber, PhD., Director, Ambulatory, Health Psychology & Young Adult Services, left, with David Vaughan, LCSW, Program Manager for the Young Adult Services Program at the Institute of Living
David Vaughan had just moved to the United States from his native England when he took a job as a licensed clinical social worker at the Institute of Living in the early 1990s. It would not take long for him to recognize a glaring need within the local behavioral health services community.

“I kept seeing young people – late teens, early 20s – having these early onset signs of depression or psychosis and severe mental illness, but there was no infrastructure in place to take care of them,” said Vaughan, an affable but fiercely dedicated advocate for those young people who sometimes find themselves on the margins of society. “At the time, we just had to stabilize them as best we could and refer them to specialists outside of our system. You could just see they were not going to follow up and were going to fall through the cracks.”

In the early 1990s, the idea of establishing a special psychiatric program for young adults was extremely uncommon, if not unheard of. Yet Vaughan began pressing his colleagues and the leadership within IOL to see if something could be done for the young people he routinely saw showing signs of mental illness – substance abuse, isolation, hallucinations and other symptoms of psychosis.

Vaughan’s idea took hold within the IOL, and by 2004 he was treating young adults between the ages of 17-26 as part of the Young Adult Services (YAS) Program – one of the first of its kind in the country. His pioneering vision has since expanded to include numerous specialized programs for young adults, including a comprehensive outreach program designed to meet the full range of needs for young people struggling not only to overcome their illnesses but embark on independent lives for themselves.

Other innovations include a program for young people coming to terms with their sexual identity, known as The Right Track/Specialty Track for LGBTQ youth, as well as customized treatment plans for each young adult’s clinical and psychiatric needs.

The YAS Program has proven to be a great success within national psychiatric circles, earning the first-ever National Program of the Year Award from the national Association for Ambulatory Behavioral Health. But it has proven to be an even greater success with young adults who have received care from its innovative range of services. Since the program’s inception, patients have experienced an estimated 70 percent recovery rate after going through the range of treatment. Despite suffering from extreme mental health disorders such as schizophrenia, many of the program’s patients have gone on to complete college and enter professions.

Lawrence Haber, PhD, who supervises the YAS Program, said Vaughan’s persistent advocacy for young people, combined with his infectious positive energy and humor, have been the driving force behind the program’s success.

“David believes in this program and he believes in the young people who come here for help, and the young people can see that,” Haber said. “That gives them the hope and confidence they need.”

A calling to help young people:

David Vaughan, LCSW

PROFILE

DAVID VAUGHAN
Finding strength through help

It’s safe to say that Sam Crowley did not have an easy go of things as a child, but thanks to her persistence and the help she has received at the Institute of Living, she has not let her past dictate her future.

The daughter of an absentee father and a mother who struggled with substance abuse and mental health issues, Sam weathered the storms of growing up while trying to take care of two younger siblings and holding up her grades in a school where she was regularly bullied. At age 11, she began trying to ease the emotional pain in her life by self-harming – a secret she kept to herself because she didn’t think anyone would care.

In the eighth grade, when a guidance counselor surprised her one day by asking her to roll up her sleeves, Sam’s secret was revealed, and she was sent to see a therapist. But instead of getting the treatment she needed, the therapist instead downplayed Sam’s anxieties, she recalls.

“I remember she told me, ‘You’re so young, what do you have to be depressed about?,’” she said. “That led me to believe that I was on my own when it came to taking care of myself.”

Fortunately, Sam did not give up on her search, and at the age of 13 she found a psychiatrist who provided her with psychotherapy, medication and other assistance she needed to get through her turbulent adolescence, and they continue to see each other nearly a decade later.

By the time she was 15, Sam had been hospitalized for psychiatric issues four times, and she was removed from her mother’s home and placed with her grandparents, who provided her with the stable environment she needed to focus on her schoolwork and break her self-harming habit. One of her main motivations for taking that step was so she could set an example for her siblings.

“I wanted to be a role model for them and show them that even though life is tough, we do not have to hurt ourselves,” she said.

After graduating in 2011, Sam enrolled at Tunxis Community College with a goal of becoming a counselor for kids with troubled backgrounds like hers. But she knew that she could not overcome her own traumas and mental health issues without a deeper level of help, and in 2013 she turned to the Institute of Living, where she took advantage of intensive programs for peer group support and individualized therapy. Over time, she said, she found that the more committed she became to the IOL’s programming, the more independent she felt.

This year, Sam became the first volunteer to work in the IOL’s child and adolescent program, which has given her an opportunity to develop first-hand experience and knowledge in the field she has...
chosen for herself. She is constructing a poetry group in the adolescent unit built around a self-published poetry book—a form of expression that has always been an outlet for her. “I believe that sharing my poetry with them will also enhance my connection with them, and that could be helpful in their understanding of me as someone who is here to support them,” she said.

Now 22, Sam volunteers with the program two days a week with an eye toward graduating with a BA in psychology from the University of Connecticut and embarking on her career. She is also holding down a job and living in her own apartment. “I can’t thank the people at IOL enough for what they’ve done for me,” she said. “They are all so kind and knowledgeable. It’s added so much to my life.” But Sam is also clear on who made the most difference in opening the way for her future: herself.

“I’m glad I thought enough of myself to get the help I needed, but I also never let anyone deter me from doing what I needed to do,” she said. “That’s my greatest strength.”

The future is now at IOL: Behavioral Health Integration

For the past year, the Institute of Living has been involved in an initiative across Hartford HealthCare to integrate behavioral health and primary care. There are two goals behind this effort. The first is to provide resources to help primary care offices deal with the large number of patients who exhibit symptoms of mental health issues. The second goal is to help primary care physicians and their patients address the behavioral issues that interfere with other medical issues patients might be having. In 2015, the IOL supported two Hartford HealthCare primary care practices in West Hartford as a pilot project. IOL psychologists Jennifer Ferrand, PsyD., and Ila Sabino, PhD. each spent 20 hours a week at the practices providing assessments and short-term interventions, consultations and collaborating with other providers. These psychologists addressed many issues that arose, with depression, anxiety, adjustment problems, and chronic disease management being the most significant reasons for referrals. The pilot program was viewed as a great success, as the IOL has seen increased utilization and referrals while the project has been running. The program will continue in 2016, and the IOL has had numerous requests to integrate clinicians into other practices. A third site is expected to open at the beginning of the year.

Behavioral health integration, widely viewed as the wave of the future in providing comprehensive and efficient care, stems from the recognition that medicine must do more than simply treat illness. Rather, providers and caregivers must do better at preventing illness and enabling individuals to more effectively manage chronic disease. Massive changes in the healthcare system have been underway since the implementation of the Affordable Care Act of 2010 that are meant to defragment care and achieve the “Triple Aim” of better population health, enhanced patient experience, and reduced cost of care. An important element of these emerging healthcare models involves strengthening the relationship between behavioral health and primary care physicians and practices. The effective and comprehensive delivery of primary care services is seen as a critical way to improve population health and reduce costs.

In addition to their role in treating illness, injuries, and chronic disease, primary care physicians are tasked with the management of a wide variety of mental health concerns. Nearly 60 percent of the total number of patients being treated for depression in the United States receive their treatment from a primary care physician, and there is evidence to support the efficacy of using antidepressant medications in primary care. The effective treatment of depression in the primary care setting, however, re-
The Institute of Living (IOL) has been training staff in its own model of providing crisis intervention care for patients for many decades as a way to ensure the safety of both staff and patients. In 2014, a project team made up of members of the Hartford HealthCare Behavioral Health Network (BHN) and Public Safety reviewed the IOL model and many other models in use throughout Hartford HealthCare (HHC) as part of standardization and best practices for the system. The review included an examination of the many specialized courses offered at the Crisis Prevention Institute (CPI) in Milwaukee, which were deemed to best meet current and future needs not only for the BHN and Public Safety, but also across HHC.

The IOL quickly embraced the new model. Late in 2014, 11 multidisciplinary staff members underwent eight days of training to become instructors for both Non-Violent Crisis Intervention (NCI) and Applied Physical Training (APT). The IOL’s CPI instructors include nurses, psychiatric technicians, managers, educators, APRNs, case workers and Grace Webb school staff. The trained staff are embedded in the IOL’s many inpatient units.

Non-Violent Crisis Intervention training is implemented at IOL

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The Division of Health Psychology at the Institute of Living has been supporting specialty care at Hartford Hospital for many years. Psychologists from the division have worked closely with a number of medical specialties to provide psychological evaluations and evidence-based interventions to address mental health issues, in addition to the behavioral, physical and nonphysical issues that can interfere with successful patient outcomes. Some ways in which health psychologists or behavioral health clinicians provide service and value include improving the effectiveness of medical treatments, helping patients change health behaviors and better manage chronic diseases, and reducing the need for medical interventions (teaching behavioral pain management strategies).

IOL’s team of CPI instructors includes, front row, left to right: Cynthia Belonick APRN; Sandra Marshall RN Per Diem; Sonia Carter Psychiatric Technician; Ruth Reiser APRN. Back row, left to right: Elisabeth Callahan MH Counselor; Dawn Benson LCSW; Edward Clukey RN; John Connor Manager, Psychiatric Technician and Paula Rego Case Worker. Missing from photo: Paul Paseos RN.
Peer Volunteers provide support, knowledge in their own or a loved one’s recovery, as well as resources throughout the state. Peer Volunteers are placed based on their skill set and talents that they bring with them. Placed both in inpatient and outpatient settings they provide overall support to the program/unit. The peers become part of the day-to-day function of the area, providing insight to staff, support and resources to patients and family members of patients. They lead groups, meet individually with patients and families and offer whatever appropriate assistance they can.

The PFAC consists of staff and past IOL patients and or family members. Each member becomes a volunteer to ensure HIPAA and other regulations are upheld. Through the council meetings, staff and leadership from the organization receive first-hand feedback from those who have been in treatment. Areas for improvement are recognized and addressed through possible policy and or procedure change.

The international NCI Program is a highly effective behavior management system for organizations committed to providing quality care and services in a respectful, safe environment. NCI training offers a solid foundation to structure prevention and intervention approaches for staff and those they are caring for, even during crisis situations. The strategies taught provide a proven framework for decision-making and problem-solving to prevent, de-escalate, and safely respond to disruptive or assaultive behavior. Through careful risk assessment and response, CPI principles and dynamics are taught, recognizing the importance of staff confidence and ability to safely respond to potentially dangerous situations. The CPI philosophy relating to care, welfare, safety and security is consistent with HHC values of safety, caring and excellence.

The newly certified instructors methodically rolled out CPI training to over 450 IOL staff (99% of all staff designated to take the training) between January and September of 2015. The complete transition to the CPI model successfully occurred over the course of nine months.

As the CPI model was also selected because of its growth and customization opportunities, the next fiscal year will be bringing more advanced training to the instructor group. This includes courses such as Autism Spectrum Disorders, Trauma Informed Care and Dementia and Related Cognitive Challenges. These courses will be used to further enhance staff training with specialty populations, and to provide more personalized and customized care to our patients.
Psychiatrist-in-Chief, Harold I. (Hank) Schwartz, MD receives Hartford Hospital Medical Staff award

Harold I. (Hank) Schwartz, MD, was presented with the John K. Springer Humanitarian Award at the annual Hartford Hospital Board and Medical Staff Spring Event in 2015. The award cited “his extraordinary qualities of compassion, civility, vision and integrity that set an example for all future generations of caregivers at Hartford Hospital.”

Dr. Schwartz is Psychiatrist-in-Chief at the Institute of Living and Vice President of Behavioral Health for Hartford HealthCare. He has been Director of Psychiatry at Hartford Hospital since 1989 before assuming his duties at the IOL in 1994 following a merger of the institutions.
IOL launches Peripartum Program

Addressing a long-standing need within the community and society as a whole, the Institute of Living in 2015 launched a special program for the treatment of expecting and new mothers suffering from peripartum mood disorders. The Peripartum Mood Disorders Program is meant for any expecting or new mother (or father) experiencing symptoms of depression or even minor “baby blues.” Research reveals that this issue is more commonplace than widely believed, with one or two out of every 10 women experiencing peripartum mood disorders in the U.S. The issue has become the most common complication of childbirth in the country, with approximately 1 million women struggling with symptoms every year.

IOL services ranked best by U.S. News

Psychiatric services at The Institute of Living were ranked among the “Best of the Best” in Connecticut in the U.S. News & World Report prestigious annual survey of hospitals and health care providers.

As part of Hartford Hospital, IOL was part of a No. 1 Ranking in Connecticut for 2015-16. Now in its 26th year, the survey recognizes hospitals that excel in treating the most challenging patients. IOL’s psychiatric services were among four specialties at the hospital to be ranked as “high performing.”

“We are pleased and proud to be recognized by U.S. News and World Report for the excellent care that we strive to provide every day,” said Harold I. Schwartz, MD, Psychiatrist-in-Chief at IOL and Vice President at Hartford HealthCare. “This recognition is the result of the compassion, dedication and commitment to continual improvement of the entire IOL staff.”

The survey recognized the outstanding work done at IOL, a 120-bed mental health facility with a national and international reputation of excellence.
Jessie Close, the younger sister of movie star Glenn Close, appeared before a packed audience of more than 150 people in September to talk about how society has come a long way in accepting and understanding the realities of mental health and substance abuse disorders – and how there is still a long way to go.

“The only way to get through hell is to keep going,” said Close, quoting Winston Churchill to convey the enormous struggles that people with mental health disorders live with every day. Close was the keynote speaker at a special National Dialogue on Mental Health forum, sponsored by the Behavioral Health Network, at the University of Saint Joseph in West Hartford. The forum was moderated by Patricia Rehmer, Hartford HealthCare senior vice president for behavioral health, and featured three other panelists with first-hand experience with the issues of mental health and substance abuse.

Close spoke passionately about the decades she lived under the cloud of substance abuse and depression, never fully understanding what she was struggling with. Her struggle with alcoholism hit a low point in her late 40s, she said, recounting an incident in which she seriously considered using the gun in her husband’s truck to kill herself. A short while later, during a family get-together in Wyoming, she confided to her famous big sister that she was hearing voices repeatedly telling her to kill herself.

It was then that Glenn Close made sure that Jessie got proper medical care, which led to a diagnosis of bi-polar disorder and that finally connected Jessie with proper medication and treatment. Eleven years later, Jessie credits her newfound happiness to her medication and her passion for inspiring others with her story.

“When I sobered up I didn’t realize how big a favor I was doing for myself,” Jessie said.

The forum was part of the National Dialogue on Mental Health that was created in the aftermath of the tragedy at Sandy Hook and is meant to continue the conversation about mental health issues in local communities. The Institute of Living and the Behavioral Health Network have been leaders in carrying on the conversation, and September’s forum marked the 20th National Dialogue event that the BHN has hosted over the past three years.
Jessie Close, left, at the National Dialogue forum in September
Dr. Pearlson recognized for lifetime achievement in research

Godfrey Pearlson, MD, founding Director of the Olin Neuropsychiatry Research Center at the Institute of Living, received the prestigious 2015 Stanley Dean Award for Research in Schizophrenia from the American College of Psychiatrists (ACP). The award ceremony took place at the ACP’s annual conference in Huntington Beach, California on February 21, 2015.

Dr. Pearlson was bestowed this honor for his lifetime achievements in schizophrenia research, which the ACP said constitutes a “major contribution to the understanding and treatment of schizophrenic disorders.”

“Dr. Pearlson’s lifetime of research continues to help the world better understand, diagnose and treat schizophrenia, and his achievements are remarkable,” said Harold I. Schwartz, MD, IOL’s Psychiatrist-in-Chief and Vice President of the Hartford HealthCare Behavioral Health Network. “We are grateful that he makes Hartford and the IOL the home of such cutting edge scientific work. On behalf of Hartford HealthCare and the Institute of Living, I extend congratulations to Godfrey Pearlson on winning this internationally respected recognition and thank him for his leadership in the field of neuroscience.”

During the course of his research, Dr. Pearlson has examined and challenged the earliest notions about schizophrenia, particularly in comparison to bi-polar disorder. His career has centered on studying the intricacies of the brain to determine whether there are biological differences between schizophrenia and bi-polar disorder.

“Much of my work over the past 30 years has examined whether or not these are separate illnesses, what the underlying biology of these disorders may be, and whether or not you can use biological criteria to better separate them,” Dr. Pearlson said.

As part of the award, Dr. Pearlson presented a lecture to his distinguished colleagues focusing on his work, entitled “Schizophrenia and bi-polar disorder: one syndrome, two syndromes or more?”

The Stanley Dean Award for Research in Schizophrenia has been awarded yearly since 1964.
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10/1/14 - 9/30/15

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Mr. and Mrs. Karl Zielinski
Anonymous (8)
## Research Funding Information

### FY 2015 Psychiatry

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**Industry (continued)**

An 8-week, randomized, phase 2, double-blind, Sequential parallel-group comparison study of Two dose levels of pf-06372865 compared to Placebo as an adjunctive treatment in Outpatients with inadequate response to Standard of care for generalized anxiety Disorder (Protocol # B7431007). InVentiv Clinical, LLC. $119,781.00

A Phase 2a Randomized, Double-blind, Placebo-Controlled, Parallel-Group, Multi-center Study Investigating the Efficacy, Safety, and Tolerability of JNJ-42165279 in Subjects with Social Anxiety Disorder. Janssen Research & Development, LLC. $98,559.50

A Randomized, Double-blind, Multicenter, Active-Controlled Study of Intranasal Esketamine Plus an Oral Antidepressant for Relapse Prevention in Treatment-resistant Depression. Janssen Research & Development, LLC. $1,351,570.00

**Open Competition**

**Psychiatry**

$21,753.00

**Diefenbach, Gretchen PhD**

Treating Anxiety with Cognitive Bias Modification Combined with Transcranial Magnetic Stimulation. HH-Endowment Funds (OC)-129513. $9,990.00

**Hallion, Lauren PhD**

Cognitive Control as a Mechanism and Intervention Target in Emotional Disorders. HH-Endowment Funds (OC)-129513. $1,800.00

**Ng, Janet PhD**

A mindfulness-based weight loss maintenance intervention to enhance bariatric surgery outcomes. HH-Endowment Funds (OC)-129513. $9,963.00

**Unfunded**

Psychia $0.00

Barrett, Jennifer BA

Olin Neuropsychiatry Research Center Volunteer Research Registry. $0.00

Emadi, Nazli, MD, PhD

Prediction of cognitive decline by 3MS and MoCA compared to brain volumetric MRI in Alzheimer’s disease. $0.00

Pearlson, Godfrey MD

“Functional Neuroimaging of Alcoholism Vulnerability: Glutamate, Reward, Impulsivity, and Pavlovian-to-Instrumental Transfer (PIT), Part II–Saracatinib”. $0.00

Bi-directional data sharing of neuroimaging data with the Human Connectome Project.

Peck, Caleb PsyD

Can the MMPI-2RF differentiate malingering from conversion disorders in a known samples study? $0.00

Tolin, David PhD

Development and Validation of the Broad Assessment Questionnaire. $0.00

Respiratory Biomarkers in Anxiety-Related Disorders. $0.00

Young, Kevin PhD

Using psychological testing to enhance prediction of lethal suicide attempts. Comparing Autism Spectrum Disorders and Psychosis using the Rorschach: A Feasibility Study. $0.00
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📞 860.545.5000

🌐 hartfordhospital.org/instituteofliving
   (main site)

🌐 nrc-iol.org
   (The Institute of Living’s Olin Neuropsychiatry Research Center)