Chancellor I. Dodd Wilson has made it official. The UAMS Psychiatric Research Institute is fully funded for $30.6 million to complete the current construction project of a five-story, 100,000-square-foot building. Much hard work has gone into raising this money, and the hard work will continue in order to open PRI in the fall of 2008 as one of the premier facilities in the country for mental health services. Philanthropic gifts, bond financing, institutional funds and state appropriations have been combined for us to reach our goal. Thank you and stay tuned. The best mental health care in Arkansas is yet to come. See more on page 4.
Dear Friends of Psychiatry and the Research Institute,

It is incredible that we have reached our goal for raising money for the UAMS PRI building. There is no way to adequately thank all of you who were involved in this long but successful process. Together we have made the impossible possible. With this milestone behind us, we can concentrate even more on our mission of improving mental health care in Arkansas.

There is no better example of the importance of consolidating many services and people into one institute than this recent situation of a family in crisis. A family sought our assistance for an adult family member with small children who were possibly being endangered by the parent’s delusional thinking and behavior. I was proud to see the many different department folks who pitched in to help with this difficult and messy situation. Renie Rule helped figuratively hold the family’s hand; Lynn Mason, R.N.P., our nurse practitioner, guided the family through the intervention, admissions and commitment processes; and Stephen Blevins, M.D., and Chris Cargile, M.D., ably assisted the patient and family with expert diagnosis, treatment and follow-up care. While the patient is not, as of this writing, fully recovered, she is certainly on the road to more effectively dealing with her illness and being able to successfully parent her children.

Finally, our participation along with the key leadership of David Williams, Ph.D., president and CEO of Ozark Guidance Center in Springdale; Gary Looper, CEO of Northwest Health System in Springdale; and the 86th General Assembly appears to be about to break the long impasse of inadequate numbers and kinds of psychiatric beds in northwest Arkansas. Plans are being finalized, but it appears that PRI will be providing the psychiatrists for the new inpatient unit at Northwest Health System and that PRI clinicians will be establishing an outpatient presence in that part of the state to complement the outstanding clinical services already available there. All of this activity is part of the UAMS northwest Arkansas initiative that is preparing for the new satellite medical school. There will be more on this topic as plans become finalized.

As always, thank you for your support for our programs and your encouragement to meet the needs of patients with mental disorders and their families in Arkansas.

Best wishes,

G. Richard Smith, M.D.

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Mental Health on College Campus

Unfortunately, it sometimes takes a tragic event to raise public awareness about an important issue. The events at Virginia Tech University have brought up many questions about mental health issues on college campuses.

Justin Hunt, M.D., has been interested in the topic for several years. He is directing a study as part of his residency in psychiatry that is evaluating changes in counseling centers on college campuses. The cornerstone questions of the study are “have there been changes in the number of students on college campuses who need mental health services and if so, how have the campus counseling centers responded to these changes?”

Most of the directors of counseling centers on 10 college campuses reported a definite increase in the past five years of the number of students who need treatment and of the severity of the mental illnesses seen in students. “There are several possible reasons for the increase in volume and severity,” Hunt said.

One reason for the increase in volume could be the overall increase in student populations on some campuses. In addition, the number of students who are first-generation college students is on the rise at many schools, as is the number of nontraditional students. These factors can cause added stress and pressure, which may make depression or other mental health issues more likely.

Hunt said that another possible factor for both the increase in volume and severity is that advances in diagnosis and treatment (including effective medications and therapy) allow more
people with moderate to severe mental illnesses to function well enough to attend college. In addition, illnesses such as bipolar disorder, schizophrenia and eating disorders often are detected during late adolescence or early adulthood. Hunt said it can be a combination of the normal course of a mental illness, and the atmosphere of college that can lead to onset and subsequent diagnosis and treatment.

Other factors may include decreased stigma associated with mental health illnesses resulting in more students seeking help. Reduced stigma may also be a reason that there is an increased willingness of students and faculty to speak up when problems are observed. Technology may have a role as well. Because students tend to stay more connected to family nowadays, the key developmental step of individuation may come later for some students than in the past.

Depression remains the prevailing mental health issue among college students. According to 2006 data from the American College Health Association, in the 2004-2005 school year, 18 percent of students had experienced depression, 12 percent reported experiencing anxiety and approximately nine percent had seriously considered suicide at least once. “College students experience a tough combination of stressors,” Hunt said. “Many college students today experience more pressure than ever to exceed academically. Then add to that the poor habits that college students sometimes have, such as decreased sleep, binge drinking, substance abuse, unhealthy diet, and lack of exercise and the chances of depression and other mental health problems increases.”

Colleges across the country are implementing changes that will improve diagnosis and treatment of mental illness for students. These include: adding psychiatrists, psychiatric nurses and residents when possible to address medication management and treat acutely ill patients; using on-call clinicians and emergency clinics to treat walk-in students; providing referrals to outside sources when needed, such as community mental health centers or private practice psychiatrists; and incorporating group therapy when appropriate.

Another important strategy is to be proactive by improving outreach programs and integration of campus services. This may include programs during orientation or in student housing; education of faculty and students about mental illnesses; and education opportunities for students on the Internet. Hunt also went on to mention, “Clear and rapid communication between different campus entities and also between the counseling center and a student’s parents is often inhibited by current laws designed to protect an individual’s privacy.

“As is often the case, health care services are lagging behind increased need,” Hunt said. “While tragedies like the one at Virginia Tech may not be completely unavoidable, colleges across the country are taking important steps toward improving mental health care for their students.”

Justin Hunt, M.D., is completing his last year of psychiatry residency at UAMS and has been chosen to enter the Robert Wood Johnson Clinical Scholars Program at the University of Michigan. The program is the premier training ground for physicians in health services research. The issue of young adults being one of the largest medically uninsured populations is of particular interest to Hunt, and he hopes to be able to expand on his existing research in the area of mental health services for college students.

**PRI Volunteer Program to Start Soon**

Ellon Cockrill and Terry Kramer, Ph.D., PRI associate director, are working on plans for a volunteer program to begin in spring 2007. There will be a variety of opportunities available. If you are interested in volunteering, contact Ellon at ercockrill@uams.edu or (501) 526-7654.
PRI Fundraising Timeline

Summer 2001
G. Richard Smith, M.D., chairman of the UAMS department of psychiatry, called on supporters of mental health to form a capital campaign committee to raise money for a comprehensive psychiatric center on the UAMS campus.

August 2001
The capital campaign kicked off with Don Munro of Hot Springs and Ellon Cockrill of Little Rock leading the effort as co-chairmen with a goal of $4 million to build what was then called the Center for Psychiatric Research, Education and Clinical Care (CPRECC).

September 11, 2001
The World Trade Center fell and our country would never be the same. The economy was shaky, but the committee forged ahead and donations steadily trickled in.

Spring 2005
The center was officially named the UAMS Psychiatric Research Institute (PRI). The design of the building was forming and included five stories with 40 inpatient beds. The project became part of the overall campus expansion to include a new hospital, parking deck, Arkansas State Hospital, expanded outpatient center and new power plant.

Fall 2005
The Wilcox Group architectural firm continued with design plans, and the building now included two inpatient floors, the Dierks Research Laboratory, the Walker Family Clinic and a floor for education and administration.

Winter 2005
The UAMS student dormitory was demolished as well as the Child Study Center building clearing the way for groundbreaking and construction to begin on the new hospital and PRI. Opening is scheduled for fall of...
Winter 2002
The Willard and Pat Walker Charitable Foundation gave $1.5 million for an outpatient center, which paved the way for groundbreaking on what was to originally be a three-story building on the east side of the campus.

Spring 2002
Fred and Louise Dierks gave $1.5 million for a fourth floor to be added to include research space.

2002-2005 – Fundraising continued with more than 300 donations from supporters and more than 80 percent of Department of Psychiatry employees giving toward the new center.

January 2005
UAMS leaders decided to continue raising funds for the center and to change the proposed site to the center of campus.

Fall 2006
The UAMS PRI was named the sixth Center of Excellence at UAMS. Fundraising continues with the PRI Advisory Board pledging more than $2 million toward the completion of the building.

May 2007
WE DID IT! Thanks to all of our donors and supporters we now have reached our goal of $30.6 million to build a state-of-the-art building to further the mission to improve treatment for people with mental disorders and their families through professional education, research, and standard setting clinical care. This is truly a milestone for psychiatric care in our state. Congratulations to us all!
New Psychiatry Residents

Once again, the UAMS Department of Psychiatry filled all of its slots for residents for the upcoming year. Additionally, out of the 130 UAMS medical students, 10 students are going on to psychiatry residencies. This is one of the highest percentages in the country for numbers of students choosing to go into psychiatry. This is a testament to the psychiatry experience that our excellent educators provide to medical students. We are proud to introduce our new psychiatry residents along with the medical school from which they graduated.

Adria Carney, M.D.
University of Nevada, Las Vegas

Justin Dyniewski, M.D.
UAMS

Caris Fitzgerald, M.D.
UAMS

Paula Graham, M.D.
UAMS

Pawel Kurylo, M.D.
UAMS

Stephen Pannel, D.O.
Kansas City University of Medicine

Katherine Pannel, D.O.
Kansas City University of Medicine

Pathways to Hope: Youth Suicide Prevention Conference 2007

On March 17, 2007, more than 140 mental health professionals, school personnel, parents and students attended the conference hosted by the Arkansas Youth Suicide Prevention Task Force and Advisory Council and the UAMS PRI. The goal of the conference was to increase knowledge of suicide prevention and reduce stigma associated with suicide. From all accounts, the conference was a huge success.

The conference agenda included speakers, panel discussions and breakout sessions with educational information, networking opportunities, and interactive role playing for students.

The keynote address was delivered by Alex Crosby, M.D., M.P.H., from the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention. His address titled “The Epidemiology and Prevention of Adolescent Self-Directed Violence” examined youth suicide as a public health problem and discussed approaches to prevention.

For more information on the Arkansas Youth Suicide Prevention Task Force, contact Lynn Taylor, M.D., director of the Division of Child and Adolescent Psychiatry at (501) 686-5300 or J.B. Robertson, guidance/counseling specialist with the Department of Education at (501) 682-4354.

For more information on a model youth suicide prevention program in Washington state visit http://www.yspp.org.
NAMI Walks for the Mind of America

PRI MINDWalkers team raises money for first NAMI Walk Arkansas

On May 26, 2007, the Arkansas chapter of the National Alliance for the Mentally Ill (NAMI) held its first 5K to promote hope, treatment and recovery for people with mental illnesses and their families. Walkers and runners participated in the event at Burns Park in North Little Rock that raised $38,000 for NAMI.

Employees and friends from UAMS PRI and the Central Arkansas Veterans Health Center joined to form a team, MINDWalkers. Together they raised close to $7,000. A generous supporter of PRI also donated money for UAMS PRI to be the finish line sponsor.

Ginger Beebe, first lady of Arkansas, served as honorary chairman of the event. She spoke about her “listening tour” and gave the countdown to officially start the race. Mrs. Beebe has been traveling the state to advocate for improved mental health care for children.

NAMI is the nation’s largest grassroots mental health organization dedicated to improving the lives of people living with serious mental illness and their families. Since 1979, NAMI has been dedicated to the eradication of mental illnesses and to the improvement of the quality of life of all whose lives are affected by these diseases.

For more information on NAMI: www.nami.org
HelpLine 800-950-NAMI (6264)