Bowman Changing Lives with Behavioral Therapy

“You’re fired,” Joey* said to his dad. His dad smiled because he knew that meant progress. Joey worked hard in therapy to learn to tell others when he was finished with a task or tired of an activity. For Joey, learning to communicate something this simple was a breakthrough that allows him to continue to make progress in therapy.

Joey is an active 5-year-old with autism and behavioral difficulties. Rachel Bowman, Ph.D., assistant professor at the UAMS Psychiatric Research Institute, oversees Joey’s behavioral therapy. The kind of therapy that Bowman uses for Joey is Applied Behavior Analysis (ABA).

“ABA is very successful in improving play, language and social skills for approximately 80-90 percent of children with autism.”

“ABA is very successful in improving play, language and social skills for approximately 80-90 percent of children with autism,” Bowman said. Through this kind of therapy, Joey has gone from using very few words to communicate to speaking in sentences and answering a variety of questions using words.

Problems with compliance and difficulty communicating are common for patients with autism and developmental disabilities. These problems contribute to the high rate of behavioral and emotional problems in this population. During therapy, a structured and systematic approach is used to promote and reinforce appropriate communication and coping skills. “Often you don’t start to see improvement for a few weeks to several months,” Bowman said. “The research shows that the earlier we can intervene, the better the outcomes.”

There are two types of training that are most often used. Discrete trial training involves a teacher or a therapist who is trained in the appropriate protocol. The training involves scripts with specific steps for prompting and reinforcing the child’s responses to various directions and questions. Pivotal response training (PRT) uses child-centered interactions; the

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Dear Friends of Psychiatry and the Research Institute,

So much is happening here at the UAMS Department of Psychiatry and the Psychiatric Research Institute! My daily fascination is to see the progress on our new building, the new hospital and the new Arkansas State Hospital. Some weekend, when the traffic flow is low, take a drive around the campus and see what is happening—you will be amazed. Alternately, check out the construction via our Internet-based camera from your home computer (see blue box on Page 5).

Our clinical programs are serving the needs of the people of the state, especially in our three comprehensive clinics: the Child Study Center, the Programs for Young Adults, and the Programs for Adults. Recently, I received heartfelt e-mails from grateful patients about our clinicians. One was from a patient of Chris Cargile, M.D., and his colleagues in the substance abuse treatment program, who wrote, “Thank you for your professionalism, caring and support. You have such a wonderful program, which has given me some much needed hope . . . the UAMS program deserves an award.” A similar note came from a patient with bipolar disorder (manic depressive illness) who has been treated by Robert Jarvis, M.D., for the past six years. This gentleman wrote that Dr. Jarvis was “the most competent, compassionate, knowledgeable and committed psychiatrist” that he had ever had in his 20 years with the disorder. Even though the patient has moved out of state, Dr. Jarvis continues to assist with his care.

The educational efforts by our faculty continue to be successful and appreciated by our students. For example, our Behavioral Science course and our third-year Clerkship continued to be the top-ranked programs in their categories at UAMS, and at UAMS our medical students are choosing psychiatry as a career at twice the national average.

Our research programs are leaping forward. According to the National Institutes of Health, our departmental research programs were ranked 45th out of 122 medical schools in the nation in 2006. We ranked 53rd in 2005 and 60th five years ago. While we do not expect to be ranked first next year, we will certainly continue to move up. Those schools in the top 10 need to watch out!

Finally, I want to thank you for your support and encouragement. Your generosity has been critical to the growth and success of our programs. With your help we will be able to raise the remaining $2.5 million needed to completely finish out our $30 million building so we can deliver the care, teach the students and conduct the research that you and others in our state expect from us.

Thanks again,

G. Richard Smith, M.D.

What it Means to be an ‘Institute’

In the United States there are approximately eight other institutes of psychiatry associated with academic medical centers. Of these, less than half include what the UAMS Psychiatric Research Institute will include – teaching, outpatient and inpatient treatment, and research.

Each academic medical center has its own standards for designating an institute or a center of excellence, but there is a common element of dedication to cutting-edge treatment of mental health. For UAMS, Chancellor I. Dodd Wilson has described such a designation as the convergence of a facility, faculty, staff and programs focused on a particular cause.

The UAMS Psychiatric Research Institute is joining the ranks of only a few other well-known and respected psychiatric institutes in the country. They include:

Western Psychiatric Institute and Clinic, University of Pittsburgh Medical Center

Institute of Psychiatry, Medical University of South Carolina

Neuropsychiatric Institute, University of California at Los Angeles

New York State Psychiatric Institute, Columbia University Medical Center

Langley Porter Psychiatric Institute, University of California at San Francisco
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training teaches parents and caregivers how to take advantage of teachable moments in the child’s normal daily activities, including play. PRT is fun for parents and children and uses less scripted prompts and reinforcement for teaching language, play and social skills during activities that naturally interest the child.

Bowman’s program also provides support and training for family members, caregivers and anyone else interested in learning helpful ways to interact with the patient. There is a support group for parents that meets at the same time as one of her social skills groups for patients ages 8 to 12, and plans are under way for a support group for siblings. She also does training and workshops in the community on how to best provide positive behavioral support for people with developmental disabilities.

Bowman joined the faculty at UAMS in 2003 to develop a clinic and community-based treatment program for children and adolescents with developmental disabilities and problem behavior. The program has been successful and she has recently hired two staff members, Michelle Whitfield and Keah Mann. The new staff members will carry out treatment programs with patients and their families under her supervision.

The program, located at the UAMS PRI Programs for Young Adults and the Child Study Center, takes a comprehensive approach to treating behavioral problems related to developmental disabilities. Typically, there is an assessment involving an interview with family and the patient, observation, and formal testing, if appropriate. Treatment may then include family therapy and parent-child therapies including ABA therapy approaches at the clinic as well as treatment at home, school and in the community.

“This is not a cure, as there is no cure,” Bowman said. “However, it is the most effective intervention that we have.” ABA is life changing for many families. It allows them to go to a restaurant or to church or a birthday party. They can access the community and interact with others socially. In some cases, success with changing the behavior of a child allows the child to attend school and the parent to go to work, something many people take for granted.

*not his real name

The UAMS PRI Program for Severe Behavioral Disorders and Developmental Disabilities:

1. Works with children, adolescents and adults who have a variety of developmental disabilities and severe behavior problems.
2. Offers family therapy, individual therapy, group therapy, school consultation, and psychological testing and evaluations. For more information, contact the Child Study Center clinic at (501) 364-5150 or Programs for Young Adults at (501) 686-5300.
3. Provides thorough, individualized functional behavior assessments and develops behavior support plans to address severe behavior problems such as aggression, tantrums and self-injurious behavior.
4. Provides empirically validated behavioral interventions in the clinic, home, school and community settings with an emphasis on family therapy, parent-child interactions and teacher consultation.
Thank You to Our Donors

Because of you, our generous donors, we are within reach of the goal for completion of the Psychiatric Research Institute.

Ellon Cockrill, Elaine King, Rick Smith and Renie Rule get a tour of the construction site from Neil Horn of CDI.

Aerial view of the top of the parking deck. The first floor of PRI will be built on top of that.
Members of the PRI Steering Committee view the construction site from the top of the Shorey Building.

Aerial view of what will soon be the lobby of PRI.

Watch Us Grow!
www.uams.edu/growing/cams
Construction of PRI can be viewed on Video 2
UAMS Kicks Off Campaign

UAMS has embarked on a campaign to raise $325 million by 2010, the first comprehensive fund-raising effort for the campus in more than a decade. “Campaign Imagine” was announced at a kickoff event Jan. 26 at The Peabody Little Rock attended by more than 500 supporters and employees. Those in attendance included 350 members of the Chancellor’s Circle, a giving program whose members provide at least $1,000 each in unrestricted funds to be used at the discretion of UAMS Chancellor I. Dodd Wilson, M.D.

The campaign will benefit numerous efforts at the university, including construction of a 10-floor expansion of the UAMS Medical Center, a Psychiatric Research Institute, and expansions to the Arkansas Cancer Research Center and the Donald W. Reynolds Institute on Aging. Funds from the campaign also will provide for new faculty chairs and professorships, an expansion of statewide health care programs in underserved areas and support for research programs in a variety of areas.

For additional information regarding donations to the UAMS Department of Psychiatry, please contact Renie Rule at (501) 526-7795.

(Top) Tom Vandegrift, president of PRI Advisory Board, and G. Richard Smith, M.D., represent PRI at the kickoff event. (Bottom) Chancellor I. Dodd Wilson, M.D., announces the UAMS Campaign Imagine fund-raising goal.
PRI Launches Outpatient Eating Disorders Program

An outpatient eating disorder treatment program is now available through the University of Arkansas for Medical Sciences (UAMS).

Offered through the UAMS Department of Psychiatry, the new program is accepting patients on an outpatient basis. It will expand to offer more comprehensive services such as intensive outpatient services and inpatient treatment upon the opening of the Psychiatric Research Institute at UAMS in 2008. The program will be able to treat women and men of any age.

“This program will have multiple treatment components, including therapy, groups, nutritional counseling and specialized medical treatment to address this complicated problem,” said Ann Brown, a licensed clinical social worker and director of the UAMS Eating Disorders Program. “This is a growing problem that can affect both women and men at any age, and there is a real need for a comprehensive program in Arkansas.”

An estimated one in 10 women in the United States suffers from an eating disorder, Brown said. The mortality rate of those who are diagnosed with an eating disorder is the highest of any mental illness.

Eating disorders include anorexia nervosa and bulimia nervosa. Anorexia nervosa involves fear of gaining weight, distorted body image, restricted eating with significant weight loss resulting in a lack of menstrual periods and a range of dangerous medical problems due to malnutrition. Bulimia nervosa involves episodes of binge eating, often followed by self-induced vomiting, laxative abuse, diuretic abuse or a combination of abuses.

Outpatient treatment will include weekly therapy (individual, family and group), a psychiatric consult and medication management if recommended, and nutritional counseling and planning. The patients also are medically monitored to identify any health problems caused by their eating disorder. Brown said the program can currently treat up to 15 on an outpatient basis and has the potential to expand.

The more intensive treatment will become available with completion of the PRI facility. Those levels of treatment include intensive outpatient services and a partial hospitalization program. Both feature therapy and nutrition counseling.

The Charles A. Frueauff Foundation Makes Major Donation to PRI Eating Disorders Program

The Director of PRI and members of the Psychiatry Advisory Board accept a check presented by Anna Kay Frueauff Williams, vice president of the Charles A. Frueauff Foundation.

(Left to right) G. Richard Smith, M.D.; Tad Krug; Kristi Imbro; Anna Kay Williams; Don Munro; Tom Vandegrift, president of PRI Advisory Board; and Bill Mann.

To get help through the Eating Disorders Program, call (501) 686-5300.
Contact Us

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Programs for Young Adults
(501) 686-5300

UAMS Faculty and Student Wellness Program
(501) 686-8408

Employee Assistance Program
(501) 686-2588

Division of Health Services Research
(501) 660-7500

Center for Addiction Research
(501) 526-7802

Child Study Center
(501) 364-5150

Arkansas State Hospital / Division of Behavioral Health Services
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Central Arkansas Veterans Healthcare System
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For information, please contact Ellon Cockrill (501) 526-7654 or ercockrill@uams.edu