

Dear Colleague,

Welcome to the first edition of our biannual newsletter. MedEdMentoring was created in response to the impending need for more geriatric mental health researchers. The site's objectives include creating a sustainable mentoring education resource through offline and online enduring materials; developing a content clearinghouse offering tools to launch, maintain, and enhance career development; and helping to prepare the geriatric mental health research workforce. This newsletter provides only a few glimpses into our online content. To access complete content, we invite you to visit www.MedEdMentoring.org.

We hope you find the site helpful, and as always you can write to us at www.MedEdMentoring.org/contactus.asp.

Sincerely,

Stephen J. Bartels, MD, MS; Martha L. Bruce, PhD, MPH; Maureen Halpain, MS; Barry D. Lebowitz, PhD; Charles F. Reynolds III, MD; Gwenn Smith, PhD; Joel E. Streim, MD; Jürgen Unützer, MD, MPH, MA



Free tools to launch, maintain, and enhance your career



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Need to know!

Are You Making the Most of Conferences?

In his First Tuesday teleconference "Making the Most of Conferences," Barry Lebowitz, PhD, discussed how new investigators can maximize opportunities for personal and professional development at meetings. Important take-away points included:

- Have an agenda - What do you want to accomplish? Who do you want to meet?
- Plan to attend all institutional, departmental, or research group events
- Prepare any presentations in advance and keep to the time allotted
- Keep all interactions at a professional level and avoid gossiping - remember, "loose lips sink ships!"

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Advisory Board

Stephen J. Bartels, MD, MS, is Professor of Psychiatry at Dartmouth Medical School, Director of the Aging Services Research Program and Director of the Behavioral Health Policy Institute at the NH-Dartmouth Psychiatry Research Center, and the Medical Director of the State of New Hampshire Division of Behavioral Health.

Martha L. Bruce, PhD, MPH, is Professor of Sociology in Psychiatry in the Department of Psychiatry, Weill Medical College of Cornell University and in the Clinical Epidemiology Program at the Weill Graduate School of Medical Sciences, and SEQ CHAPTER Associate Vice-Chair for Research, Department of Psychiatry.

Maureen Halpain, MS, is an academic coordinator in the University of California San Diego (UCSD) Department of Psychiatry, Division of Geriatric Psychiatry.

Barry D. Lebowitz, PhD, is Professor of Psychiatry, University of California, San Diego and Deputy Director of the Stein Institute for Research on Aging and the Geriatric Psychiatry Research Center at UCSD.

Charles F. Reynolds III, MD, is Professor of Psychiatry, Neurology, and Neuroscience at the University of Pittsburgh School of Medicine. In addition, he is Senior Associate Dean of the University of Pittsburgh School of Medicine and directs the Mental Health Intervention Research Center for the Study of Late-Life Mood Disorders at the Western Psychiatric Institute and Clinic (WPIC).

Gwenn Smith, PhD, is Professor of Psychiatry at the University of Toronto, Toronto, Ontario.

Joel E. Streim, MD, is Professor of Psychiatry at the University of Pennsylvania and the Philadelphia VA Medical Center, where he serves as Director of the Geriatric Psychiatry Fellowship Training Program.

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Jeffrey M. Lyness, MD	Rebecca Ready, PhD
Christopher Martin, PhD	Greg Siegle, PhD
Jennifer Morse, PhD	

Do you have a mentoring-related question you've been dying to ask? Our Mentoring Q & A may be just what you're looking for. Each month, a different question is answered by our consultants.



Q: I'm one month into a project in which my timeline calls for recruiting 10 subjects per month, but I have only recruited one subject. What troubleshooting approaches can I use to identify barriers and solutions?

A: Maureen Halpain, MS: Recruitment of research subjects is often a difficult task. There always seems to be an abundance of potential subjects until you start needing them!

First, review your recruitment strategies carefully. Are you really getting the word out to the subjects you need to recruit? Are you advertising in clinics or venues where appropriate research subjects may congregate?

Are your study entry criteria limiting recruitment? Review the potential subjects you have interviewed and declined to see if there is some common factor limiting their enrollment. If this factor is not critical to study outcome, you may consider altering your enrollment criteria (with IRB approval, of course) to allow these subjects to be enrolled.

Seek the advice of experienced investigators or study coordinators regarding recruitment. You will find the successful investigators have developed multiple strategies for recruiting patients.

Can you offer incentives (financial or otherwise) that while not coercive, entice people to participate?

Consider "going to" the subjects for testing whenever possible rather than expecting them to come to you.

Barry D. Lebowitz, PhD: It is good to be concerned but not yet time to make any drastic changes. First, you need some more info -- were these screen failures, lots of exclusions, changes in contexts or circumstances, problems in access, etc.? Once you have identified the source of the problems, you should discuss it with your mentors and possibly your project officer. They most likely have seen this kind of problem before.

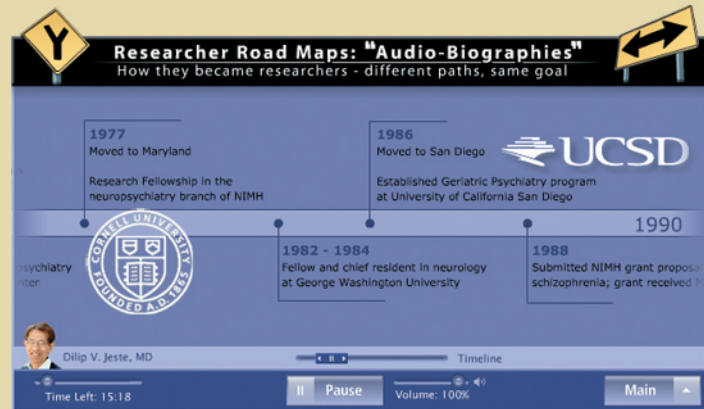
Researcher Roadmaps



A popular feature on MedEdMentoring.org is our career autobiographies or researcher roadmaps. Leading researchers and mentors in geriatric mental health tell in their own words how they began their careers and how they advanced to where they are today. These “audio-biographies” cover their life challenges in becoming successful researchers and mentors and provide great insights for junior researchers. The intent is to tell a story of a career unfolding and changing across the stages of career development, from student to senior investigator.

One of our newest researcher profiles is Dilip Jeste, MD, chief of the Division of Geriatric Psychiatry at the University of California San Diego and director of the UCSD Sam and Rose Stein Institute for Research on Aging (SIRA). Dr. Jeste is internationally renowned for his leadership in geriatric psychiatry research, education, and clinical care.

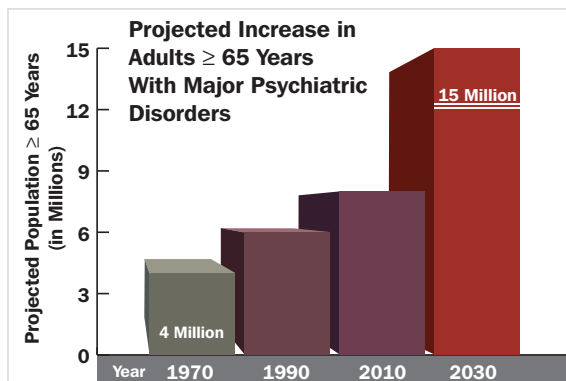
If you would like to be included as a future Researcher Roadmap profile, or have suggestions for other future subjects, please contact us.



Healthcare Professionals Are Urgently Needed Now:

- To investigate the causes and consequences of late-life mental disorders
- To conduct research on the treatment and prevention of late-life mental illnesses

- Geriatric Mental Health Services Researchers
- Geriatric Psychiatrists
- Geropsychologists
- Gerontological Nurses
- Social Workers
- Geriatric Rehabilitation Specialists



Jeste DV, Alexopoulos GS, Bartels SJ, et al. Consensus statement on the upcoming crisis in geriatric mental health: research agenda for the next 2 decades. *Arch Gen Psychiatry* 1999;56:848-853.

What's ahead for MedEdMentoring.org? These are just some of the features we plan to bring to you in the coming year:

- Career Essentials Series to help junior, mid, and senior level researchers with their career development
- Original review articles
- New presentations and career autobiographies
- Key Classic Papers on mentoring
- A site-wide redesign incorporating a more user-friendly home page
- A CD-ROM set with information sorted by topic

MedEdMentoring's Fast Facts

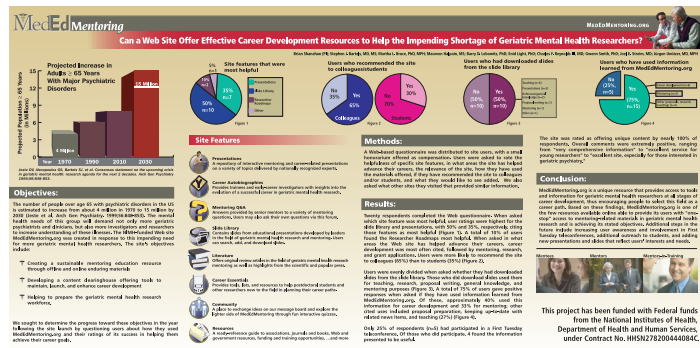
48% of geriatric psychiatry fellows cite having **access to quality mentorship** as crucial for their career development. (Medina et al, *J Am Geriatr Soc* 2002)

At the Meetings

Meeting participation is an important aspect of MedEdMentoring's mission to increase the number of geriatric mental health researchers. This year, MedEdMentoring will attend both the American Association of Geriatric Psychiatry and the American Geriatric Society annual conferences.

American Association of Geriatric Psychiatry, March 1-4, 2007

In addition to a poster and an exhibit booth, MedEdMentoring will also participate by hosting a symposium entitled "Using Modern Technology to Support a Career in Geriatric Mental Health Research." The presenters are Stephen J. Bartels, MD, MS; Martha L. Bruce, PhD, MPH; Enid Light, PhD; and Brian Shanahan.



American Geriatric Society, May 2-6, 2007

MedEdMentoring will give a poster presentation, "Effectiveness of an Online Initiative to Reverse the Impending Shortage of Geriatric Mental Health Researchers," as well as an exhibit booth. More details will be given as the date draws closer.



Slide Library



In our most recent user survey, when asked which site feature was most helpful, user ratings were highest for the MedEdMentoring Slide Library. The Slide Library contains slides from educational presentations developed by leaders in the field of geriatric mental health research and mentoring. Each presentation can be viewed and/or downloaded in its entirety, or the slide library can be searched to create custom presentations.

How It Works:

1. Search

Enter a search term or browse by specialty.

2. Add

Add slides to your slide tray.

3. Download

When you're ready—download your presentation!

Sample slides:

Gender Can Be a Barrier to a Successful Research Career

Characteristics of a Good Mentee

K Award Timeline

Conclusions

- Start early
- Be focused
- Gather a team of people who can help you get where you want to go
- Work with your team to construct the application
- Manage your time and resources wisely
- Take advantage of mentoring

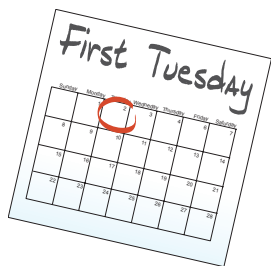
Did you know that you can also add your own slides to the Slide Library? Visit the Presentation Upload page to find out how.

Putting together your first academic cv can be a confusing task. Our CV Builder tool is designed to walk you step-by-step through the process. www.MedEdMentoring.org/cv

First Tuesday

What Are YOU Doing on First Tuesday?

The first Tuesday of every month, registered users of MedEdMentoring.org can participate in live teleconferences on different career development topics and address questions or comments to our advisory board members. Or, if you prefer, just “sit in” and follow along. Downloadable PowerPoint slides for each teleconference are made available in advance. Participation in First Tuesdays is easy. All you need is a phone and Internet access.



If you missed any of these teleconferences or want to sign up for the next one, visit us at our First Tuesday page. You can view archived First Tuesday teleconferences on our site or download them in podcast or vodcast format.

What Site Visitors Are Saying...

“I like the fact that it is a technologically advanced site.”

“...Excellent service for young researchers learning to develop grant ideas.”

“It’s a great site. I frequent it often.”

“Great resource.”



The Lighter Side of MedEdMentoring

Do you ever wish you could get another new investigator’s opinion on mentoring advice, time management skills, or getting the most from professional organization memberships? The MedEdMentoring forum, located in our Community section, is your place to sound off on issues relating to geriatric mental health research and connect with others on the same path.

Here’s a sampling of some recent First Tuesday topics:

Publication Strategies

Faculty: Jeffrey M. Lyness, MD

Publishing is an important part of advancement in an academic research career. What’s the best way to get your name in print? Join us to find out the answer to this and other publication questions.

Making the Most of Conferences

Faculty: Barry D. Lebowitz, PhD

Learn how to maximize your opportunities for personal and professional development while attending conferences.

Ethical Issues in Geriatric Mental Health Research

Faculty: Lisa S. Parker, PhD

What ethical issues are involved in geriatric mental health research, and what do beginning researchers in geriatric mental health need to know?

See What You’ve Missed!

visit us online at
www.MedEdMentoring.org

Presentations



One of the highlights of MedEdMentoring.org is our presentations. The site currently features more than 20 original interactive presentations with downloadable slides from respected faculty and consultants. Topics covered range from mentoring issues to grant preparation to issues faced by women and minorities in the field. We plan to bring you more presentations in the year ahead.

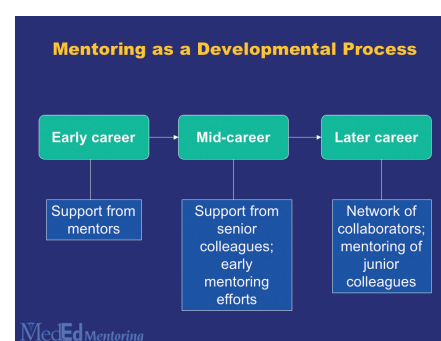


Christopher Martin, PhD

Following are some sample slides and content from one of our latest presentations, “Developing a Mentoring Program at Your Institution.” Christopher Martin, PhD, of the University of Pittsburgh School of Medicine, reviews the steps and planning involved in implementing a mentoring program at an academic research institution.

Mentoring is a developmental process that occurs throughout all stages of an academic research career.

Successful mentoring of junior colleagues can be considered as a fundamental expectation of researchers, as important as obtaining funding, publishing important original work, teaching, and clinical care.



Needs Assessment

- Needs and goals of mentoring program will vary across institutions
 - Informal, decentralized mentoring → more centralized resources and standardized procedures
 - Formal mentoring programs → develop and evolve to address the changing landscape of academic research and extramural funding
- Needs assessment should involve all stakeholders in mentoring
 - Institutional leadership
 - Senior and junior faculty
 - Mentees at various levels of training

Different institutions will have different needs and goals when it comes to developing a mentoring program.

At many institutions, mentoring will already be occurring in a relatively informal and decentralized way, and the institution may benefit by building more centralized resources and standardized procedures.

At other institutions, more formal mentoring programs already exist; the leadership and faculty may wish to consider how those programs might develop and evolve to address the changing landscape of academic research and extramural funding.

Ideally, a needs assessment involves input from all of the stakeholders in the mentoring enterprise, including institutional leadership, more senior and junior faculty, and mentees at various levels of training.

It is important to assess various aspects of an institution’s mentoring program on a regular basis.

Evaluation should be considered multidimensional and should include assessment of individual trainees, mentors, and training programs as well as evaluation of the overall mentoring program at an institution.

Institutions should develop procedures for ongoing formal evaluation and more informally, leaders should keep their finger on the pulse of training efforts with an eye towards their continual improvement.

Perhaps the most important ultimate evaluation of a mentoring program involves the long-term successes and achievements of the trainees.

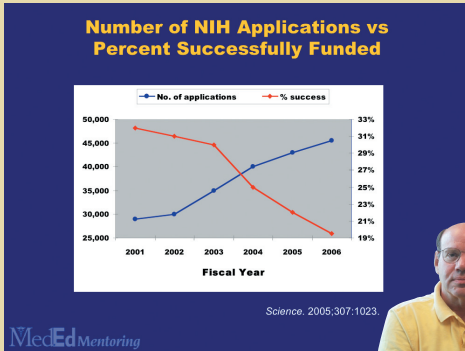
Program Evaluation

- Evaluation should include:
 - Assessment of individual trainees, mentors, and training programs
 - Assessment of overall institutional mentoring program
- Institutions should develop procedures for ongoing formal and informal evaluation
- Long-term evaluation and follow-up of program graduates should also be conducted



Grant Applications: Dealing With Rejection

Learning how to handle rejection is a hard lesson for most people, and early-career investigators are no exception. How do you cope when your grant application is returned? What can you do to increase your chances of acceptance on the next round? Several presentations on MedEdMentoring.org address these issues.



A Reviewer's Perspective on Grant Applications

Barry D. Lebowitz, PhD

First and foremost, Dr. Lebowitz reminds grant applicants that the lifetime success rate of grant applications varies from a quarter to a third - which means not everything gets funded the first time in. Don't get discouraged! Revision, resubmission, and perseverance will lead to funding.

If You Disagree With the Reviewers...

- Indicate that you have understood the comment and have carefully considered the pros and cons of making the suggested change
- Ensure that you
 - Clarify the reasoning process
 - Keep a neutral tone
 - Respectfully convey your appreciation



Responding to a Summary Statement

Gwenn Smith, PhD

What do you do if you think the reviewers have it all wrong? Is it absolutely forbidden to argue or disagree? Well, no - but do it carefully and respectfully, as Dr. Smith notes. It is important to keep the tone of the particular response neutral, not hostile. Respectfully convey that you appreciate the importance of the point, but you also have to talk about your own scientific rationale. You need to choose the particular issues that you're going to debate with the reviewers.

Getting Feedback

- Talk to the program officer to get a sense of the "feeling" in the room and the principal concern in the discussion of the grant
 - The meaning of the score: percentile rank, was there enthusiasm for revising and resubmitting? Are you close, or is a major overhaul indicated?
 - If a revision is in order (which is most of the time), what should you emphasize or make sure to address in EXTENSIVE detail in your response?



Interpreting and Responding to Grant Reviews

Steven J. Bartels, MD, MS

Once you have reviewed the summary statement or "pink sheet," Dr. Bartels notes that it may be helpful to talk to the program officer who often is present in the room while the grant is being discussed. Your program officer can sometimes help you to interpret the meaning of the score. If a revision is in order, which is most of the time, it's helpful to ask the program officer about what you might emphasize or make sure to address extensively and in detail in your response.

Greg Siegle, PhD: Getting the K Award

- Took 2 tries to get the award
- Criticism received on first submission:
 - Too much proposed for one K award
 - Too ambitious; not focused enough
 - Add physicist to team
 - Scale back number of courses taken
- Revisions...
 - Dropped 1/3 (pre-post neuroimaging too much for K) & started writing again
 - Found bridge funding in the meantime
 - Got funded!
 - Applied for an R01 for the part left out of the K. Note: It wasn't funded the first time around - they said it was too ambitious... Scaled it back & got it!

Adapted from: G. Siegle



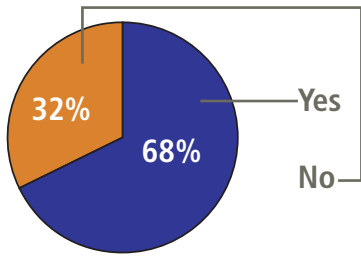
K Hints

Greg Siegle, PhD, and Charles F. Reynolds III, MD

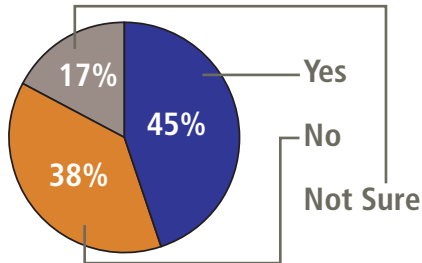
As Dr. Siegle discusses in his presentation, perseverance and responsiveness to suggestions eventually lead to a successful K award application. On his first attempt, the proposal was called "too ambitious" and "not focused enough." Two submissions and major revisions were required before the grant's final acceptance. As he shares, he has learned that "keeping it smaller and less ambitious, but more focused, could be very helpful."

Mentoring Quick Polls

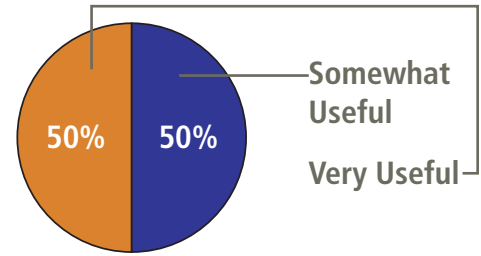
Unsurprisingly, we talk a lot about mentors at MedEdMentoring.org - from the origins of the word “mentor” in Greek mythology, to its modern day meaning as a teacher, friend, and role model for those beginning on their career pathway. We’re also interested in your opinions on mentoring and mentorship. Every month, we survey our users on a variety of topics relevant to the field of geriatric mental health research and career development. Here’s how you responded to mentoring-related questions:



A mentor has played an important role in the development of my career.



Given the choice, would you prefer to work with a mentor who shares your ethnic background and/or gender?



How useful would you find it to work with your mentor to create a formal written or oral plan detailing expectations for your research?

MedEdMentoring’s Fast Facts

Physicians in geriatric medicine are significantly more likely to report having **“very satisfying careers.”**

(Leigh et al, Arch Intern Med 2002)

Q. What do you call a mentor who leaves just when you get there?

A. A departmentor.

For more, visit “Mentors and Antimentors” at <http://www.mededmentoring.org/antimentor.asp>

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An Educational Initiative to Improve the Quality of
Research Mentoring in Geriatric Mental Health

