PSI is committed to the mission of improving the lives of individuals throughout the lifespan, no matter the circumstances.

Sprinkled throughout this year’s report are examples of caregivers’ experiences during the COVID-19 pandemic.
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WELCOME TO OUR 2020 ANNUAL REPORT

The year 2020 is one for the record books.

Although it sounds cliché, we have all had to pivot and find our stride in the mid-pandemic world. For us at the Prevention Science Institute (PSI), our stride has quickened, and we have sprinted at times with no finish line in sight. Like our colleagues around the country, we have shifted to remote work and have embraced the joys and challenges that telecommuting has offered. In the pages of this year’s annual report, you will read about innovative work that has occurred during the COVID-19 pandemic, as well as our pre-COVID innovations.

By way of background, the PSI is committed to improving the lives of children, families, and adults in our communities. We conduct research from multiple perspectives, including translational research that focuses on interactions between the brain, social context, and behavior; developing, testing, and delivering effective intervention programs; and efficacious ways to disseminate programs into community, agency, and school settings. Our work did not stop when the COVID-19 global pandemic hit. In many ways, our work became more relevant and meaningful by reaching our community members in need. PSI scientists develop, test, and disseminate programs and tools to improve the health and well-being of children, families, and adults. We share numerous examples of this work in this year’s annual report.

The PSI continues to be a place of community and collaboration, in our “new normal” world. We value interdisciplinary work, the inclusion of colleagues, students, and postdoctoral scholars from various disciplines, and we continue to offer robust training opportunities for our graduate students and postdoctoral scholars. We have an active clinic supporting the mental health needs of children and families in our community and a postdoctoral training grant to support the future generation of prevention science scholars. During the pandemic our clinic services (supported through the Family Check-Up Online) were offered free of charge to families with children 2 – 17 years old from across the state of Oregon. In times like these, the PSI rises to the challenge and aims to innovate, collaborate, and serve. As a community, we stand together to advance diversity, equity, and inclusion and denounce all acts of racism.

Please take a moment to glance through these pages. If you are working from home and are wearing fuzzy slippers or sweat pants, I promise not to judge. We are all in this together.

Wishing you health, happiness, and resilience during this time.

Laura Lee McIntyre
Director, Prevention Science Institute
Professor, Special Education and Clinical Sciences

61% of parents said their children’s sleep patterns have changed since the pandemic

83% of families said they moved to online instruction
PSI joins efforts to assist with the COVID-19 crisis

When stay-at-home orders went into place in early 2020, the Prevention Science Institute (PSI) was reminded of their core mission: to understand and promote healthy adaptation in children and families, with particular emphasis on the dissemination of effective interventions in real-world settings. The problem was, the “real-world” was quickly and drastically changing.

With PSI’s research being predominantly person-based, the scientists quickly realized that the typical methods of interventions delivered in homes, classrooms, small groups, and one-on-one would need to be adapted. Faced with the prospect of not being able to conduct research in person, PSI researchers realized that innovative services were needed now more than ever.

Thanks to the ingenuity and hard work of countless researchers, collaborators, administrative staff, students, families, and individuals, PSI has pivoted with speed and professionalism. PSI has recognized not only their moral obligation to provide services to families in need, but the opportunity our current situation presents for the legitimization of online and web-based interventions.

As an example of PSI’s quick response, in July, Drs. Leslie Leve, Hannah Tavalire, and Camille Cioffi worked together with scientists in UO’s Biology Department and Genetics and Cell Characterization Core Facility to lead the UO’s COVID Monitoring and Assessment Program (MAP). The aim of this work is to increase the ease of COVID-19 testing using painless self-collection methods, like saliva or a self-collected nasal swab, rather than the deep nasal swab methods used by medical providers. The team has been working alongside multiple state agencies, including Lane County Public Health, to implement these alternative testing methods in the community, with plans to make them available to more individuals and communities in the coming months. With additional leadership from Dr. Elizabeth Budd, the team is preparing to culturally tailor testing efforts by applying lessons learned from analyzing interviews with key community stakeholders.

Dr. Leve’s leadership is just one example of how the PSI has responded to this global pandemic. Researchers throughout the institute have adapted interventions, deliveries, recruitment, partnerships, and working condition. They continue to find ways to advance both research and the health and well-being of children and families across the lifespan.

Leslie Leve
Associate Director, PSI; Alumni Faculty Professor, COE; Associate Vice President
The United States is experiencing an opioid epidemic of historic significance. Over 40,000 deaths from overdose were recorded in 2018, and the estimated economic cost in 2015 alone was over $500 billion. In addition, national-level data indicate that opioid misuse and fatalities are increasing at a particularly fast rate for women and individuals in child-bearing age groups. In 2017, the US Department of Health and Human Services designated the opioid epidemic as a public health emergency.

The Center on Parenting and Opioids (CPO) is a collaborative effort, funded by the National Institute on Drug Abuse (NIDA), between the University of Oregon and Oregon Health & Science University to improve the well-being of individuals, families, and communities affected by the opioid crisis. Within the University of Oregon, researchers from the Prevention Science Institute (PSI), Center for Translational Neuroscience (CTN), and Oregon’s Data Science Initiative, make up the multi-disciplinary team.

The CPO is working to raise awareness and improve the lives of parents and children impacted by opioid use by identifying the brain pathways and behaviors that are related to both opioid use and parenting. By identifying those pathways, the CPO can build personalized programs for families affected by opioids, helping them feel more successful and confident as parents.

When stay-at-home orders were first issued in response to the COVID-19 pandemic, the CPO was in the first year of development. In addition to typical web-based and remote procedures necessary to coordinate between UO and OHSU and community partners (e.g., website, video conferencing, web-based surveys), modifications to research protocols were critical to avoid major disruptions. The core research projects and pilot projects modified their approaches to working with families and agencies to reduce burden and prevent the spread of COVID-19. Specifically, most of the procedures are now being carried out remotely, via web surveys or phone interviews. The CPO also now uses phone calls and video conferencing for meetings with community partners and focus groups with key stakeholders. Two examples of adaptations come from Project 2 and Pilot 2. Led by Dr. Beth Stormshak, Project 2 within the CPO uses the Family Check-Up (FCU) Online. FCU Online is an evidence-based intervention to reduce behavior problems and support successful development.
Adaptations to the web-based intervention components are in development, and when ready, will be tested in rural Oregon and among mothers with young children. The delivery of the intervention via the internet will increase the accessibility of the intervention for these sometimes hard to reach populations, and also make it accessible during the COVID-19 pandemic when meeting in person is not a viable option.

Pilot 2 is testing the Fathering Through Change intervention, originally developed for divorced and separated fathers, among fathers in recovery from substance use disorders. The parent training program was planned to be delivered in-person, in small groups. However, when gathering in small groups was prohibited, this pilot, lead by Dr. Camille Cioffi and mentor, Dr. David DeGarmo, decided to deliver the intervention via text and coaching calls. Individuals who are assigned to the intervention now receive video links via text and participate in three coaching calls with a trained parenting coach. This approach has also allowed the study team to partner with treatment centers throughout the state.

Dr. Tanner-Smith’s Applied Research Methods and Statistics Lab uses meta-analysis to synthesize research findings on the effectiveness of programs aimed at promoting youth’s academic, behavioral, and mental health outcomes. This includes research focused on the development of research synthesis methods and application of those methods toward informing evidence-based policy and practice decisions.

One of her current projects, in collaboration with the American Institutes for Research, supports the U.S. Department of Education’s What Works Clearinghouse (WWC), an evidence repository that uses research synthesis to identify “what works” in education. The WWC offers an online repository (https://whatworks.ed.gov) where teachers, administrators, and policymakers can easily locate information about education program effects, which can then be used to inform evidence-based decisions.

As part of this project, Dr. Tanner-Smith and PSI postdoctoral scholar Dr. Danny Swan regularly deliver trainings on behalf of the WWC to teach the public about the WWC’s design standards for reviewing research evidence.

Two days before the World Health Organization declared COVID-19 a pandemic, Drs. Tanner-Smith and Swan were on their way to deliver an in-person WWC training in Washington, DC. In less than 24 hours, they pivoted to a synchronous, web-based, remote training. That remote training was a success, and in fact, many trainees preferred the remote delivery method.

Since then, Drs. Tanner-Smith and Swan taught another remote WWC training in June and will be offering a third remote training in December. Quick adaptation paired with technology has helped Dr. Tanner-Smith’s team continue their important work supporting the WWC during the COVID-19 pandemic.
Q: 2019-2020 was your first year here at the UO, what is your background? What drew you to the UO and PSI?

A: My background prior to the UO was in pediatric psychology. I worked as a clinician, training supervisor, and researcher as part of the Medical School at Brown University. I had known about the research happening at UO and the PSI for many years, specifically in the realms of family-based treatment and implementation of evidence-based treatment both locally and nationally. As a clinician and researcher, I value the role that research can play in improving clinical service delivery and the ways in which clinical service delivery can inform research pursuits. I was also very interested in the potential opportunities at the HEDCO clinic for serving the community and developing new research programs that could better inform practice.

Q: Can you tell us a little more about your role at the UO and what your interests are as a researcher?

A: I am the Julie and Keith Thomson Faculty Chair and HEDCO Clinic Director. I am also an associate professor within the College of Education within the Department of Counseling Psychology and Human Services. My research interest primarily focuses on adolescents and health behaviors. I am interested in understanding the ways in which we can facilitate positive parenting practices and individual factors such as emotion regulation to promote well-being in both the short and long term. I think that adolescence is a particularly relevant time to intervene as the development and enhancement of positive relationships and individual factors have the potential to impact teens into adulthood. I am also interested in exploring the ways in which technology, such as virtual reality and web-based programs, can extend both the impact and reach of evidence-based interventions.

Q: You are using technology in some really interesting ways. How do you see technology being used in the future for social science research?

A: Technology has the potential to facilitate broader dissemination of interventions to communities who do not have the good fortune of being embedded in a University community. It also has the potential to enhance engagement in interventions and the development of skills targeted within interventions. Virtual reality, in particular, provides us with a tool for adolescents to practice skills in real-world settings while minimizing actual risk. In terms of developing emotion regulation skills, virtual reality worlds provide teens with an avenue to experience emotions, identify these emotions, and practice managing these emotions with cues that they would likely encounter and may not be able to replicate in standard laboratory or clinical settings (such as those involving substance use or sexual risk). In my study exploring whether using virtual reality to enhance emotion regulation skill building relative to standard role-plays, we found that we were not only able to retain more adolescents in the intervention study but also found that these adolescents felt more confident using emotion regulation skills and
Health Promotion Cluster: 2018-2020
PSI Drs. Elizabeth Budd, Nicole Giuliani, Nichole Kelly, & Andrew Kern

Total Grant Dollars (2018-2020): $22,428,513

Number of students mentored (doctoral, master’s undergraduate, postdoctoral): 59
Total number of manuscripts (2018-2019): 65
Total number of conference presentations (2018-2019): 82

Total grants applied for: 48
Grants including at least one student mentee: 28 (58%)
Funded grants: 23 (51% success rate)

were better able to manage their feelings.

Q: What ways are you pushing the boundaries and possibilities with technology in your research?

A: My team has been pushing these boundaries by increasing one’s sense of immersion through immersive virtual reality to fully engage all of the senses. For example, we know that learning is often context dependent and if we can replicate as many of the features of the environment as possible (sounds, smells, visuals, which are all related to an emotional experience and can be done in immersive VR) then we are likely able to enhance an individual’s ability to learn how to truly experience the associated emotions, regulate them, and enact the safe behavior.
Early Career Awards

During the 2019-2020 year, several early career scientists within PSI were awarded prestigious grants. Even during our current global pandemic, these dedicated researchers worked quickly and capably to move their research forward and adapt to new guidelines.

One example of this excellence is Dr. Stephanie Shire, who was recently awarded an early career research award from the Institute of Education Sciences (IES) focused on the use of technology to adapt proven caregiver-mediated interventions for young children with neurodevelopmental disorders. Working closely with Southern Oregon Educational Service District (SOESD), Dr. Shire plans to develop a technology-enabled adaptation of the traditional face-to-face JASPER (Joint Attention, Symbolic Play, Engagement and Regulation; Kasari et al., 2006), a social communication intervention program for children with autism. Dr. Shire hopes this adaption will increase the functionality of the intervention so that it can be implemented by SOESD educators during the four year project period to fit within the service structure and practices of SOESD early intervention and early childhood special education services.

The aim is to provide resources and tools to support families with young children who are on the autism spectrum, particularly, those living in rural and remote communities. Through the pilot randomized trial, more will be learned about how children and

Stephanie De Anda
Assistant Professor, Department of Special Education and Clinical Sciences

Stephanie Shire
Assistant Professor, Department of Special Education and Clinical Sciences
families will benefit from a stepped approach including online resources and video conferenced coaching. The goal of the intervention is to help caregivers learn strategies to successfully engage their children in play-based activities to help increase children’s communication and play skills.

Funded through an IES early career research and training mechanism, the project also includes a plan of career development activities with mentorship from PSI scientists, Drs. John Seeley and Beth Stormshak with Dr. Daniel Almirall (University of Michigan Ann Arbor). The career development plan will provide opportunities for additional training and mentorship in both implementation science as well as the design of clinical trials to optimize adaptive interventions.

The forward thinking research by Dr. Shire was already heavily incorporating technology into the research design of this grant. Therefore, COVID-19 guidelines disrupted her grant very little. Dr. Shire’s research was already focusing on how technology could improve interventions and strengthen remote delivery of provider training and caregiver coaching.

Dr. Stephanie De Anda also recently received a Mentored Patient-Oriented Research Career Development Award from the National Institutes of Health (NIH). Her grant will follow Spanish-learning toddlers longitudinally from 24 to 36 months of age. The goal is to characterize vocabulary growth over this time period in children with and without early language delays. In addition, the grant seeks to examine the role of dual language learning contexts and caregiver input on early lexical development. The grant takes a multi-dimensional approach to early vocabulary development by measuring a variety of lexical skills using parent report, observations, eye-tracking, and reaction time data among other methods.

Dr. De Anda aims to characterize the precise deficits in early lexical development that lead to persistent language delays across the third year of life in young Latinx children. This period of time is a critical window for language learning. By understanding how lexical skills emerge in children within single and dual language learning environments, Dr. De Anda hopes to inform future intervention approaches that specifically target the processes that lead to persistent delays. In addition, by understanding the role of caregivers in this process, researchers will be better positioned to provide caregiver-mediated recommendations and interventions in future studies.

With a mind for the future, Dr. De Anda hopes to use this grant to support the university’s long-term goal of creating an environment of equity and inclusion. This pursuit is a cause that is at the center of all of her efforts as a scientist, mentor, and faculty member. She feels that the grant affords an opportunity to contribute to a meaningful gap in the research literature, given the continued dearth of research within Latinx populations. Furthermore, this research program will work to provide appropriate assessment procedures and interventions tailored to Latinx infants and toddlers with early language challenges. The grant is a fertile training ground for aspiring student scientists and clinicians who all work on the project. Dr. De Anda will have the opportunity to mentor diverse students, many of whom are Spanish speakers and from Latinx backgrounds.

Dr. De Anda has already begun implementing changes in her research in relation to the COVID-19 guidelines. Not willing to cease delivering the intervention to families when they need it most, Dr. De Anda has pivoted and is piloting new protocols in order to collect behavioral measures remotely. For example, collecting information via online survey instead of in person, and observing family interactions through video conferencing instead of in the lab. In addition, De Anda is currently piloting remote eye-tracking data collection.

79% of families used baking or cooking as a coping strategy
85% of families are using TV shows or movies as a coping strategy
Going Remote in Portland

Since 1996, PSI has held a presence in the Portland metro area. For over 20 years, with support from multiple grants, the Portland team has worked to develop, deliver, and evaluate prevention and intervention programs that benefit families, youth, and schools in Portland and across the state.

With two decades of experience working at a distance from colleagues in Eugene, PSI-Portland was well equipped to take on the challenges 2020 brought. When stay-at-home orders went into place, the ingenuity of the Portland team was called upon and technological adaptations were swiftly and adeptly implemented. As a result, the Portland office has seen staggering success in not only maintaining their connection to the metro area, but in increasing participant engagement and developing novel and effective methods for assessment and intervention delivery.

As an example, at the time Governor Brown closed schools in Oregon, the Portland team was implementing a 16-week parent group for the PRO-Parenting project, a multi-site study funded by NICHD led by Laura Lee McIntyre. This project targeted family-centered interventions for parents with young children with developmental delay. Instead of choosing to end the group, they recognized an opportunity to deliver the same content via video conferencing software. The team adapted the assessments from in-person interviews and observations, to Qualtrics surveys, paper surveys, phone interviews, and observation tasks conducted via video conferencing.

Through this adaptation, families continued to receive support at a time when many programs and supports ceased. In addition, the PRO-Parenting project also benefitted by using the current participants as the first cohort of an online delivery of the intervention, an approach we will continue to use post-COVID. Although we invested significant time in getting the intervention online, we learned that we were able to engage with our study participants and ultimately retain more of them in the overall study.

The Portland team is also seizing the opportunity to learn more about what families are experiencing during this global pandemic. Through parent interviews, staff are collecting data on families’ experiences during the stay-at-home orders, the impact of the shutdown on their child’s services, and any positive aspects that may have come out of this crisis. With these data, PSI hopes to utilize the information to promote public policy that better supports children with disability during this pandemic and future crises.

While this may seem like an extraordinary response to our “new normal,” this theme of adaptation is repeated countless times across projects, scientists, students, grants, and administration throughout the entire PSI.
The FCU Online

The Family Check-Up (FCU) is a strengths-based, family centered intervention that promotes family management and parent skill enhancement and addresses child and adolescent adjustment problems. This intervention is currently in use across multiple clinics and schools in Eugene and Portland and has been researched for several decades at the Prevention Science Institute (PSI). The FCU intervention is successful at improving school performance and behavioral issues, decreasing childhood depression, reducing adolescent substance use, and increasing positive parenting.

Following the success of FCU, led by Dr. Beth Stormshak, researchers at PSI began to explore how FCU might be adapted to increase access for families. This led to the creation of Family Check-Up Online (FCU Online). FCU Online expanded the delivery of FCU from clinic or home-based settings led by family consultants to a parent-driven online tool with family consultants functioning as coaches. The FCU Online can be delivered to a much broader audience, particularly rural and underprivileged families where access to services may be difficult.

As the COVID-19 pandemic and stay-at-home guidelines disrupted family services typically delivered in person, we have expanded the reach of the FCU Online and continued to bring strength-based, family-centered interventions to families and communities. The proactive development of FCU Online prior to the sudden need created by the COVID-19 pandemic resulted in a readily available research-based tool. Family consultants were able to immediately use the FCU Online to support families under tremendous stress. Delivering the intervention online has allowed us to reach and serve families outside of the Eugene and Springfield area, where traveling long distances to the clinic previously would have been prohibitory for most families. The successful use of FCU Online in Oregon communities has led to an expanded vision of how online tools can be used to serve families during the COVID-19 pandemic and far into the future.

Philip H. Knight Chair and Department Head, Department of Counseling Psychology and Human Services; Professor, Counseling Psychology

Elizabeth Stormshak

“We don’t get to go out and do the things our family enjoys anymore. We’ve lost structure that was important to us.”
Funding Highlights FY 2020

Advancing Academic-Research Careers (AARC)
Funding period: 2017-2019
PI: Samantha Shune
Funded by: American Speech-Language-Hearing Foundation

An Adoption Study of the Development of Early Substance Use: The Joint Roles of Genetic Influences, Prenatal Risk, Rearing Environment, and Pubertal Maturation
Funding period: 2018-2023
Subaward PI: Leslie Leve (PI Jenae Neiderhiser, Penn State)
Funded by: National Institute on Drug Abuse
Grant number: R01 DA045108

An Exercise Intervention to Improve the Eating Patterns of Preadolescent Children at High Risk for Obesity
Funding period: 2018-2021
PI: Nichole Kelly
Funded by: National Institute of Child Health and Human Development
Grant number: R21 HD094661

Brief Substance Use Interventions in General Healthcare Settings: Understanding Variability in Effects
Funding period: 2017-2020
PI: Emily Tanner-Smith
Funded by: National Institute on Drug Abuse
Grant number: R01 DA043589

Building a Vocabulary: Lexical-Semantic Development in Latino Children with Early Language Delay
Funding period: 2020-2025
PI: Stephanie De Anda
Funded by: National Institute on Deafness and Other Communication Disorders
Grant number: K23 DC018033

Children’s Social and Academic Competence: Integrating Genetically Informed and Prevention Research
Funding period: 2018-2021
PI: Amanda Griffin
Funded by: National Institute of Child Health and Human Development
Grant number: F32 HD093347

Comparing Web, Group and Telehealth Formats of a Military Parenting Program
Funding period: 2014-2020
Subaward PI: Dave DeGarmo (PI Abigail Gewirtz, University of Minnesota)
Funded by: United States Department of Defense
Grant number: W81XWH-14-1-0143

Determined to Succeed? Maturation, Motivation and Gender Gaps in Educational Achievement
Funding period: 2018-2022
Subaward PI: Atika Khurana (PI Liza Reisel, Research Council of Norway)
Funded by: Research Council of Norway

eGAS: A Tool to Support Patient-Centered Goal Attainment Scaling for Cognitive Rehabilitation
Funding period: 2017-2020
PI: McKay Sohlberg
Funded by: National Institute of Child Health and Human Development
Grant number: R03 HD091453

eHealth Coping Skills Training and Coach Support for Women Whose Partner has a Drinking Problem
Funding period: 2016-2021
MPI(s): Brian Danaher and Robert Rychtarik (University at Buffalo, SUNY)
Funded by: National Institute on Alcohol Abuse and Alcoholism
Grant number: R01 AA024118

Enhancing Parenting Skills: Application of a Web-Based Three-Tiered Model
Funding period: 2018-2023
PI: Laura Lee McIntyre Co-PI: Ann Glang
Funded by: United States Department of Health & Human Services, Administration for Community Living
Grant number: 90DPhf0003-01-00

Estimating Comparative Effectiveness of Alcohol Interventions for Young Adults
Funding period: 2017-2022
Subaward PI: Emily Tanner-Smith (PI Eun-Young Mun, University of North Texas Health Science Center)
Funded by: National Institute on Alcohol Abuse and Alcoholism
Grant number: R01 AA019511

Family-Centered Intervention in Schools to Reduce Social and Behavioral Problems from Early Elementary School to Adolescence
Funding period: 2018-2023
PI(s): Elizabeth Stormshak and Laura Lee McIntyre
Co-PI(s): Dave DeGarmo and Andy Garbacz (University of Wisconsin)
Funded by: United States Department of Education
Grant number: R324A180037

Functional Connectivity in Developmental Delay: Shared Etiology and Differential Outcomes
Funding period: 2018-2021
PI(s): Laura Lee McIntyre and Fred Sabb
Funded by: National Institute of Mental Health
Grant number: R21 MH114075

Initiative to Develop and Test Guidelines for Juvenile Drug Courts
Funding period: 2014-2021
Subaward PI: Emily Tanner-Smith (PI G. Roger Jarjoura, American Institutes for Research)
Funded by: Office of Juvenile Justice and Delinquency Prevention
Grant number: 2014-DC-BX-K001

LIFT: Leveraging Autism Intervention for Families through Telehealth
Funding period: 2020-2024
PI: Stephanie Shire
Funded by: United States Department of Education
Grant number: R324B200017

Long-term Effects of the Family Check-Up on Depression and Suicide Across Trials and Development
Funding period: 2019-2022
Subaward PI: Elizabeth Stormshak (PI Arin Connell, Case Western Reserve)
Funded by: National Institute of Mental Health
Grant number: R01 MH122213

Maternal Mental Health and the Early Language Experiences
of Children from Latino Homes
Funding period: 2018-2019
PI: Lauren Cycyk
Funded by: American Speech-Language-Hearing Foundation

Nashville Longitudinal Study of Youth Safety and Well-being
Funding period: 2017-2021
Subaward PI: Emily Tanner-Smith (PI Maury Nation, Vanderbilt University)
Funded by: National Institute of Justice
Grant number: 2016-CK-BX-K002

Paths 2 the Future for Girls
Funding period: 2017-2020
Subaward PI: Leslie Leve (PI Lauren Lindstrom, University of California, Davis)
Co-PI: Atika Khurana
Funded by: United States Department of Education
Grant number: R324A170148

Personalized Mobile App Intervention: Challenging Alcohol Expectancies to Reduce High-risk Alcohol Use and Consequences
Funding period: 2018-2023
Subaward PI: Jessica Crone (PI Christine Lee Gilson, University of Washington)
Funded by: National Institute on Alcohol Abuse and Alcoholism
Grant number: R01 AA016979

Personalized, Responsive Intervention Sequences for Minimally Verbal Children with Autism (PRISM)
Funding period: 2019-2024
Subaward PI: Stephanie Shire (PI Connie Kasari, University of California Los Angeles)
Funded by: National Institute of Child Health and Human Development
Grant number: R01 HD095973

Postdoctoral Training Program in Prevention Science at the University of Oregon: Preparing Education Researchers to Prevent Social and Behavioral Problems in Schools
Funding period: 2018-2023
PI(s): Elizabeth Stormshak and John Seeley
Funded by: United States Department of Education
Grant number: R324B180001

Prevention Research Center: Parenting Among Women who are Opioid Users
Funding period: 2019-2024
PI(s): Leslie Leve and Phil Fisher
Project/Core PI(s): Elliot Berkman, David DeGarmo, Elizabeth Stormshak; and Damien Fair, Kristen Mackiewicz Seghete (Oregon Health & Science University)
Funded by: National Institute on Drug Abuse
Grant number: P50 DA048756

Project STRONG: A Web-Based Dating Violence Prevention Program for Parents and Middle School Boys
Funding period: 2019-2024
Subaward PI: Wendy Hadley (PI Christopher Houck, Rhode Island Hospital)
Funded by: National Institute of Child Health and Human Development
Grant number: R01 HD097126

Quantifying the Impact of Mothers on Preschoolers’ Food-related Self-regulation and Overconsumption of Unhealthy Food
Funding period: 2018-2020
PI: Nicole Giuliani
Funded by: Medical Research Foundation (Oregon Health & Science University Foundation)

SMART Optimization of a Parenting Program for Active Duty Families
Funding period: 2016-2020
Subaward PI: David DeGarmo (PI Abigail Gewirtz, University of Minnesota)
Funded by: United States Department of Defense
Grant number: W81XWH-16-1-0407

Social Norms & Skills Training: Motivating Campus Change
Funding period: 2018-2023
Subaward PI: Jessica Crone (PI Mary Larimer, University of Washington)
Funded by: National Institute on Alcohol Abuse and Alcoholism
Grant number: R01 AA012547

Testing the Efficacy of Mindfulness-Based Stress Reduction Combined with Behavioral Parent Training in Families with Preschoolers with Developmental Delay
Funding period: 2018-2023
MPI(s): Laura Lee McIntyre and Cameron Neece (Loma Linda University)
Funded by: National Institute of Child Health and Human Development
Grant number: R01 DA037628

Trauma-Informed Mental Health in Education: A Mindfulness Based Curriculum
Funding period: 2019-2022
Subaward PI: Nichole Kelly (PI Jordan Pennefather and Adam Wendt; Trifora (IRIS Media))
Funded by: National Institute of Child Health and Human Development
Grant number: R44 HD098921

Unique Contributions of Parent and Child Self-regulation, Parenting, and Environmental Stress to School Readiness in Preschoolers
Funding period: 2018-2020
PI: Nicole Giuliani
Funded by: Society for the Study of School Psychology

University of Oregon Suicide Prevention Campus Community Initiative
Funding period: 2018-2021
PI: Mariko Lin
Co-PI: John Seeley
Funded by: Substance Abuse and Mental Health Services Administration (SAMHSA)
Grant number: H79 SM080455

What Works Clearinghouse Statistics, Website, and Training (WWC-SWAT)
Funding period: 2018-2023
Subaward PI: Emily Tanner-Smith (PI(s) Jack Buckley and Larry Hedges, American Institutes for Research)
Funded by: United States Department of Education
Grant number: 91990018C0019
SELECTED PUBLICATIONS FY 2020


Danaher, B. G., Tyler, M. S., Crowley, R., et al. (2019). Outcomes and device usage for fully automated internet interventions designed for a smartphone or personal computer: The MobileQuit smoking cessation randomized controlled trial. Journal of Medical Internet Research, 21(6), e13290.


**SEE ALL 165 PUBLICATIONS FROM FY 2019 AT PSI.UOREGON.EDU**

**CORE ADMINISTRATIVE STAFF & PERSONNEL**

**Core Staff**
- Michelle Baumann
  Office Specialist 2
- Kate Harvey
  Human Resources & Office Manager
- Megan Hooley
  Outreach Specialist
- Derek Kosty
  Methodologist
- Richard Nelson
  IT Consultant 2
- Rebecca Roby
  Assistant Director for Finance and Administration
- Jennifer Volpi,
  Pre-award Research Support Manager
- Charlotte Winter
  Data Systems Specialist

**Post-Doctoral Fellows**
- Amanda Griffin, PhD
- Christopher Fleming, PhD
- Daniel Swan, PhD
- Felice Resnik, PhD
- Hannah Tavalire, PhD

**Graduate Employees**
- Stacey Arbuckle
- Austin Folger
- Claire Guidinger
- Jordan Matulis
- Michael McColley

**Incoming Faculty**
- Annacecilia McWhirter
- Nicholas Parr
- Jonathan Safer-Lichtenstein
- Shaina Trevino
- Lue Williams
- Gina Williamson

**Annual Grant Budgets**

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<tr>
<td>‘19-’20</td>
<td>$7,111,332</td>
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<td>‘15-’16</td>
<td>$7,078,343</td>
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<td>‘14-’15</td>
<td>$7,281,360</td>
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** TOTAL AWARDS PORTFOLIO: $47,428,852**
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