This Discovery Special Issue addresses “Why?” Why is discovery needed in the field of intellectual and developmental disabilities? Why do persons with and without disabilities contribute to the field? Why do scientists and students choose their areas of work? Why do we blend research, service, training, and public policy? By answering such questions, we aim to illuminate the challenging pathway from ideas to practices and how families, researchers, clinicians, students, and trainees walk this pathway together.

**DIRECTOR’S MESSAGE: WHY DOES RESEARCH TAKE SO LONG?**

Elizabeth Dykens

Discovery begins with ideas born of a deep knowledge of the research of predecessors and colleagues. Sudden insights do happen, but typically only after ideas ferment, after bouncing them about with colleagues, students, clinicians, families, in seminars, journal clubs, clinics, rounds, or over coffee. Vanderbilt and the VKC offer superb settings for forming ideas, collaborating in interdisciplinary teams, and using cutting-edge research facilities.

After having ideas, they must be tested to justify larger federal or other investments. At this point, seed monies and Hobbs Discovery Grants become critically important! With preliminary findings in hand, scientists pour their passion into grants to the National Institutes of Health (NIH), National Science Foundation, and other federal or philanthropic agencies. Writing and submitting a grant, getting reviews, resubmitting a revision, succeeding at funding is often a 2-year process.

Once funded, researchers deal with study logistics. They obtain approval by the Institutional Review Board, hire the best staff and students, recruit research participants or develop cell cultures or animal models.

Problems are solved daily in the nitty-gritty of research, unexpected discoveries emerge, such as the way that previously thought “unaffected” carrier males are prone to Parkinson and other conditions. These advances lead to new directions, not only for the disorder being studied but also for other disorders and health conditions in the general population.

Progress on FXS has been made by many researchers over 70 years and continues today, with effective interventions still being sought— an example of discovery as a collaborative and cumulative process.

**FRAGILE X SYNDROME (FXS) DISCOVERY TIMELINE**

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<td><strong>Intelligence disability that “runs in families”</strong></td>
<td><strong>Characterized by “fragile” piece of X chromosome</strong></td>
<td><strong>Diagnosed cytogenic techniques developed</strong></td>
<td><strong>Sherman Paradax “skips generation” (unaffected carrier = fully affected son)</strong></td>
<td><strong>Caused by expanding repeat in FMR1 gene</strong></td>
<td><strong>In FXS young children, low receptive language may be marker for autism symptoms</strong></td>
<td><strong>At equated cognitive levels, social reciprocity similar in persons with FXS vs. autism</strong></td>
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<td><strong>FXS &amp; autism linked</strong></td>
<td><strong>In older FXS persons, FXTAS gene leads to characteristics of Parkinson, Alzheimer, Charcot-Marie-Tooth syndromes</strong></td>
<td><strong>Older male carrier at risk of developing FXTAS</strong></td>
<td><strong>Cerebellum atypical development related to FXS &amp; autism phenotypes but different regions contribute to each phenotype</strong></td>
<td><strong>mGluR5 negative allosteric modulator AFQ066 may improve aberrant behavior in adults with FXS who have full methylation of FMR1</strong></td>
<td><strong>Parents of FXS children have higher rates of rigid personality</strong></td>
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<td><strong>Calming techniques useful</strong></td>
<td><strong>Visual approaches (rebus symbols) for reading-math</strong></td>
<td><strong>FXS males have cognitive, linguistic, &amp; adaptive strengths &amp; weaknesses</strong></td>
<td><strong>Older vs. younger males show more severe delays</strong></td>
<td><strong>FXS females at risk for schizoaffective &amp; affective illnesses</strong></td>
<td><strong>In FXS young children, low receptive language may be marker for autism symptoms</strong></td>
<td><strong>mGluR pathways underlie many FXS characteristics</strong></td>
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<td><strong>In FXS males IQs decrease over time IQ decrease may relate to methylation</strong></td>
<td><strong>Arbaclofen may improve social function &amp; behavior</strong></td>
<td><strong>Arbaclofen may improve social function &amp; behavior</strong></td>
<td><strong>In FXS females, Charcot-Marie-Tooth syndromes developing FXTAS</strong></td>
<td><strong>Children with FXS &amp; autism have more difficulty with imitation</strong></td>
<td><strong>Some females (vs. males) with full mutation mildly affected</strong></td>
<td><strong>At equated cognitive levels, social reciprocity similar in persons with FXS vs. autism</strong></td>
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**Unexpected Discoveries**

- Arbaclofen may improve social function & behavior
- mGluR5 negative allosteric modulator AFQ066 may improve aberrant behavior in adults with FXS who have full methylation of FMR1
- Cerebellum atypical development related to FXS & autism phenotypes but different regions contribute to each phenotype

**Interventions**

- Calming techniques useful
- Visual approaches (rebus symbols) for reading-math
- FXS males have cognitive, linguistic, & adaptive strengths & weaknesses
- Older vs. younger males show more severe delays
- FXS females at risk for schizoaffective & affective illnesses
- In FXS young children, low receptive language may be marker for autism symptoms
- Autistic behaviors in FXS girls associated with poorer developmental outcomes
- Cerebellum atypical development related to FXS & autism phenotypes but different regions contribute to each phenotype

**Behavior**

- In FXS males IQs decrease over time IQ decrease may relate to methylation
- Arbaclofen may improve social function & behavior
- At equated cognitive levels, social reciprocity similar in persons with FXS vs. autism
- Parents of FXS children have higher rates of rigid personality

**Genetics**

- In FXS persons, FXTAS gene leads to characteristics of Parkinson, Alzheimer, Charcot-Marie-Tooth syndromes
- Older male carrier at high risk of developing FXTAS
- Cerebellum atypical development related to FXS & autism phenotypes but different regions contribute to each phenotype

**This timeline illustrates the lengthy, complex process of research in developmental disabilities. Although FXS was recognized in 1943 as an intellectual disability that “ran in families,” it took another 26 years to identify the genetic cause and another 10 years to develop diagnostic techniques. While in males, 50 years later, the genetic complexity continues to be unsolved. Not until the 1980s, 40 years later, did researchers characterize the behavioral complexity in males vs. females, carriers vs. affected offspring, with insights continuing today. Behavioral interventions were developed 50 years later, 70 years later, pharmacological interventions are emerging.**

In the course of research, unexpected discoveries emerge, such as the way that previously thought “unaffected” carrier males are prone to Parkinson and other conditions. These advances lead to new directions, not only for the disorder being studied but also for other disorders and health conditions in the general population.

Progress on FXS has been made by many researchers over 70 years and continues today, with effective interventions still being sought—an example of discovery as a collaborative and cumulative process.

*This question frequently arises from families, educators, and community members who eagerly await answers that will improve their lives or the lives of those they care about.*

*Once funded, researchers deal with study logistics. They obtain approval by the Institutional Review Board, hire the best staff and students, recruit research participants or develop cell cultures or animal models.*

Problems are solved daily in the nitty-gritty of research, unexpected discoveries emerge, such as the way that previously thought “unaffected” carrier males are prone to Parkinson and other conditions. These advances lead to new directions, not only for the disorder being studied but also for other disorders and health conditions in the general population.

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*In FXS males IQs decrease over time IQ decrease may relate to methylation*
The Rock Stars of Science (Rock S.O.S.) national campaign featured dramatic photos of scientists with celebrities. Initiated by the Geoffrey Beene Foundation, the goal was to raise awareness that science, science education, and science funding should be a national priority. In a Rock S.O.S. video, Anthony Fauci, M.D., director of the National Institute of Allergy and Infectious Diseases, described science as “a career of making contributions to society…. Society would benefit greatly if more people would go into science.”

The Vanderbilt Kennedy Center celebrates the 210 faculty scientists from 26 disciplines who work daily to understand development and developmental disabilities and to improve the lives of persons with developmental disabilities and their families. Each mentors students who are the future of our nation’s science. Here we highlight a few. Every VKC scientist is a Rock Star of Intellectual and Developmental Disabilities Science!

WHY VKC SCIENTISTS ROCK!

Shari Barkin, M.D.
Pediatrics
PEDIATRIC OBESITY INTERVENTION AND PREVENTION

Ana Carneiro, Ph.D.
Pharmacology
MONOMINE DYSREGULATION IN AUTISM, ADHD, AND OCD

Roger Colbran, Ph.D.
Molecular Physiology & Biophysics
CELL AND SYNAPTIC SIGNALING DURING TYPICAL AND ATYPICAL DEVELOPMENT

Kevin Erreger, Ph.D.
Molecular Physiology & Biophysics
DOPAMINE TRANSPORTER AND LEARNING, MEMORY, AND ADDICTION

Anthony Fauci, M.D.
Director of the National Institute of Allergy and Infectious Diseases

Kevin Ess, Ph.D., M.D.
Neurology
CELLULAR MECHANISMS OF TUBEROUS SCLEROSIS COMPLEX, SEIZURES, AND AUTISM

Joshua Gamse, Ph.D.
Biological Sciences
SCHIZOPHRENIA/XLINK GENES AND BRAIN ASYMMETRY USING ZEBRAFISH

Judy Garber, Ph.D.
Psychology
PREVENTION AND TREATMENT OF EMOTIONAL DISORDERS IN CHILDREN AND ADOLESCENTS

Isabel Gauthier, Ph.D.
Psychology
FACE AND OBJECT RECOGNITION IN AUTISM

Kevin Ess, Ph.D., M.D.
Neurology
CELLULAR MECHANISMS OF TUBEROUS SCLEROSIS COMPLEX, SEIZURES, AND AUTISM

Suzanne Goldman, Ph.D.
Neurology, Sleep Division
SLEEP DISORDERS IN AUTISM AND IN ANGELMAN AND WILLIAMS SYNDROMES

Elizabeth Hammock, Ph.D.
Pediatrics
GENES AND NEURAL CIRCUITS IN SOCIAL EMOTIONAL DEVELOPMENT

Sasha Key, Ph.D.
Hearing & Speech Sciences
BRAIN FUNCTIONING AND COGNITION IN GENETIC SYNDROMES AND AUTISM

Bruce McCandliss, Ph.D.
Psychology
BRAIN DIFFERENCES AND BRAIN CHANGES RELATED TO LEARNING SUCCESS IN READING, MATH, AND ATTENTION

Karoly Minics, M.D., Ph.D.
Psychiatry
EFFECTS OF ENVIRONMENT ON GENE EXPRESSION IN AUTISM

Paul Newhouse, M.D.
Psychiatry
COGNITIVE IMPAIRMENT IN OLDER ADULTS WITH DOWN SYNDROME

Nilanjan Sarkar, Ph.D.
Mechanical Engineering
ROBOTICS AND VIRTUAL REALITY FOR AUTISM INTERVENTIONS

Julie Lounds Taylor, Ph.D.
Pediatrics
YOUTH WITH AUTISM AND TRANSITION TO ADULTHOOD
WHY PERSONS WITH DISABILITIES AND FAMILY MEMBERS ARE PARTNERS

Juan José and Ana Cardona
Parents
We are so thankful to be part of research. When our daughter started JEEP [Joint Attention, Enhanced Milieu Teaching, and Expanding Play], she was not talking, or playing. This project made a huge impact on her life and so ours as well. After a few months, she started saying some words and playing. We were so amazed of the improvement she had.

Roxanne Kennerly
Parent, Advocate
Being involved with the VKC has been life changing, for my sons and myself. We have all taken part in studies. With each, we gained more knowledge, a new skill, or made contributions. Language studies for Ian have provided cutting-edge interventions. Liam has taken part in sibling research and SibSaturdays. I also feel satisfaction knowing that we are helping others.

Tammy Vice
Songwriter, Parent, Advocate
Each of us has a role to play in life for which we are uniquely made. It has been sweet for me to help create songs for SENSE Theatre, but my favorite part is seeing what develops behind the scenes. Social growth happens when the kids begin to understand the importance of supporting each other. And hearing my daughter Morgan say, “I’m in the show!” and knowing that it’s true.

Karina Scali
College Student, Volunteer, Advocate
I always felt that I was born into this world with Williams syndrome for a reason—to help in any way I can and to create awareness. When my mom found the ACM Lifting Lives Music Camp, I couldn’t wait to go. I love country music, and I wanted to help with research on Williams syndrome. The country stars give their time to work with us. They make me feel valued and respected, and they shine a light on our abilities.

Megan Hart
Advocate
Self-advocacy is an important part of my life. I have been able to obtain education, pursue a career, and live a meaningful life based on my decisions and persistence. It is a disservice when the voices of others overpower the needs, desires, and goals that individuals with disabilities have for themselves. This is why Tennessee Allies in Self-Advocacy (TASA) is so important.

It is reassuring to know somebody or something is there just in case life gets the best of some of us sometimes. Just knowing this has helped me today and for this I am thankful.

— Caller to Tennessee Disability Pathfinder Helpline

John Donovan
Sibling and Advocate
Through TABS [Tennessee Adult Brothers and Sisters], I’ve met other siblings with similar experiences. TABS also introduced me to other VKC programs and to organizations such as The Arc, Sibling Leadership Network, and many more. TABS has helped me become a better brother and has given me the opportunity to help others.

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(1) Understanding Genetic Syndromes
Elisabeth Dykens, Ph.D. (Psychology, Psychiatry, Pediatrics)
My father was a psychiatrist, and I grew up accustomed to being with people with disabilities. During my graduate training, I worked directly with children with genetic syndromes and autism. These experiences started me on the path to looking at genetic syndromes as a window for understanding connections among genes, brain, and behavior and ways to optimize interventions. We look for strengths to develop as well as difficulties to remediate, and for ways to promote well-being.

(2) Promoting Language Development
Paul Yoder, Ph.D. (Special Education)
As a sophomore volunteer in a preschool for children with language impairments, I was fascinated by these bright children who had difficulty communicating. Doing developmental disabilities research combines my love of the scientific method, my desire to be a positive force in the lives of children with communication disabilities, and my passion for learning. Our lab works to understand the match needed between language and communication therapy methods and the strengths and weaknesses that different children bring to therapy.

(3) Treating Sleep Disorders
Beth Malow, M.D., M.S. (Neurology, Pediatrics)
As a sleep researcher and parent of sons on the autism spectrum, I realized that identifying and treating disordered sleep in autism, Down syndrome, and other developmental disorders could make a huge difference in the lives of children and families. My team focuses on improving methods for studying and treating sleep disorders. As director of the Vanderbilt Autism Treatment Network site, we collaborate with the other ATN sites to improve medical care.

(4) Improving Autism Diagnosis and Treatment
Zachary Warren, Ph.D. (Pediatrics, Psychiatry, Special Education)
My clinical, research, and training interests revolve around improving systems of care for individuals with autism and their families, especially improving early identification and intervention. Unfortunately, the process of developing initial concerns, discussing concerns with providers, obtaining accurate diagnosis, and translating this information into effective treatment remains a complex, distressful one for most families. Families often must wait long periods of time to find out answers to questions they are desperate to know about. In my opinion, this process can and should be dramatically improved.

I spent most of my graduate training learning about the development of very young children who had experienced serious life stressors. This focus on early social and emotional development was matched with opportunities to work with young children with autism during my fellowship. Since then, I have worked with young families concerned that their child may have autism. It is a challenging and powerful experience to try to provide families with answers.

I am working on projects that study infants at high risk for autism in hopes of developing methods for earliest detection, which early behavioral intervention programs work best for specific children, as well as training programs for building system capacity for early accurate diagnosis and effective treatment for families in their own backyards.

WHY SCIENTISTS STUDY BEHAVIOR CHANGE
(1) Investigating Related Gene Disorders • Sarika Peters, Ph.D. (Pediatrics) I study two related single gene disorders, Rett Syndrome, which primarily affects girls, and MECP2 duplication syndrome, a similar syndrome that affects boys. My role is to better define what clinical concerns “look like” in these syndromes, in order to design more targeted interventions and supports to help improve quality of life. We also seek out non-invasive approaches (e.g., saliva, psychophysiology) for linking underlying biology to these behaviors. My interactions with families inspire my work.

(2) Exploring Neurodevelopment and Neurodegeneration • Aaron Bowman, Ph.D. (Neurology and Pediatrics) I am fascinated by the connections between neurodevelopment and neurodegeneration. My research focuses on degenerative processes affecting the basal ganglia, a brain structure necessary to control movement. We use both basic research models as well as new methods that convert human skin cells into personalized models of neurological disease and environmental health. By learning how genes and environment interact and influence the development and maintenance of brain function, we hope to mitigate environmental risk factors of disorders and improve long-term health.

(3) Studying Cognitive Impairment Tricia Thornton-Wells, Ph.D. (Molecular Physiology & Biophysics) I have long been fascinated with brain disorders, but my family history of Alzheimer disease (AD) has influenced my study of cognitive impairment. Why do some family members develop AD and others do not? What happens in the brain 10 to 20 years before a person shows signs of dementia? What can we do to prevent or postpone onset? Over half of persons with Down syndrome develop dementia by age 50. By studying AD in Down syndrome as well as in persons with typical neurodevelopment, we aim to advance neuroimaging, genetic profiling, and therapeutic targets.

(4-5) Finding Pathways to New Treatments • Jeremy Veenstra-VanderWeele, M.D. (Psychiatry, Pediatrics, and Pharmacology) My research focuses primarily on genetic mouse models of autism susceptibility, with the goal of understanding the changes in the brain that lead to altered social communication and repetitive behavior in autism spectrum disorder (ASD). In parallel, our research group is testing new treatments based upon published findings in genetic mouse models of autism, including potential treatments in individuals with fragile X syndrome and in individuals with ASD without a known cause.

I grew up knowing that the son of a close family friend had autism. I came to empathize with this family’s experience. This primed me for working in the lab of Dr. Ed Cook, a child psychiatrist launching a genetics lab, who encouraged his students also to see patients. As a result of these experiences and my own clinical work as a child psychiatrist, I find myself pulled to understand why social communication that feels so natural to some can be so unnatural for others. Seeing children who seem stuck in repetitive patterns of behavior makes me wonder what in the brain is causing this persistent behavioral “hiccup.” Mouse models of autism susceptibility offer a path to understanding how brain development and function are altered, with the hope that this path will lead to new treatments.
(1) Unraveling the Mysteries of Reading
Laurie Cutting, Ph.D. (Special Education, Psychology, Radiology & Radiological Sciences, Pediatrics)
When I worked in the classroom, one young boy had all the resources one could imagine but could not learn to read. From then on, I wanted to understand what was happening in the brain when children were experiencing reading difficulties. In my lab, we’re trying to unravel the mysteries of how people comprehend well and what happens when they don’t. We focus on which elements are most important, e.g., vocabulary, understanding grammar, structures of text, type of text, and how these relate to different brain systems.

(2) Connecting Preschool and Literacy
David K. Dickinson, Ph.D. (Teaching & Learning)
I’m seeking to understand features of preschool classrooms that foster language and literacy development and to describe the interplay between language and print-based knowledge. I’m especially interested in language development, because many children who struggle with reading lack the academic language skills required for the later elementary grades. I am developing an intervention in which teachers are coached in methods of teaching vocabulary through book reading and guiding children in book-connected play.

(3) Improving Lives of Youth with Significant Disabilities • Erik Carter, Ph.D. (Special Education)
Young people with significant disabilities have wonderful strengths, aspirations, and friendships to share. Yet far too many people never have the opportunity to know these essential members of their communities. My research focuses on identifying ways that schools, workplaces, neighborhoods, and congregations might welcome and support people with disabilities and their families to participate more fully in community life. A recurring theme is that schools and communities that commit to inclusion find they are strengthened.

(4) Matching Instruction to Individual Learner Needs • Doug Fuchs, Ph.D., and Lynn Fuchs, Ph.D. (Special Education)
We develop assessment and instructional methods to increase academic achievement of students with learning disabilities (reading and math), as well as high-, average-, and low-achieving students without disabilities. To test the efficacy of these instructional methods, we conduct large-scale, school-based randomized control trials. We work closely with hundreds of teachers and administrators in school systems in Tennessee and in other states. We also develop “differentiated” instruction (e.g., small group tutoring procedures) for children chronically unresponsive to the core reading and math instructional programs. In this regard, we are exploring how child characteristics moderate the efficacy of various instructional methods. Our goal is to understand how to match instruction to individual learner needs. Our collaboration with researchers in the VKC Psychophysiology Lab and the Vanderbilt Institute of Imaging Science has broadened our understanding of learning disabilities in important ways.

Each of us began our careers as general education classroom teachers, where we struggled to address the needs of students with learning disabilities. This motivated us to work hard over the years to provide general and special education teachers with methods that can help them address the needs of these students more effectively.
(1) Understanding Brain Development
Randy Blakely, Ph.D. (Pharmacology and Psychiatry)
To figure out how genetic and environmental factors interact to support typical brain development, scientists must understand how the brain works across many levels. I study neurotransmitter transporters, proteins involved in transmitting electrical signals through the brain. Transporter proteins are targets for therapeutic drugs, as well as drugs of abuse. We use our understanding of these proteins to develop animal models of autism, ADHD, and depression. We keep our eye on how our findings could lead to new therapies.

(2) Identifying the Neurobiology of Temperament
Jennifer Blackford, Ph.D. (Psychiatry)
Individual differences in temperament—how we think, feel, and act—can either confer risk or provide protection from psychiatric disorders like anxiety and depression. My lab studies the neurobiological basis of these individual differences, using modern neuroscience methods such as neuroimaging and genetics. Our goal is to determine how differences in genetic variability and brain alterations may confer risk or protection. Understanding the links between neurobiology and psychiatric disorders can inspire the development of novel preventions and interventions in high-risk individuals.

(3) Coping with Stress
Bruce Compas, Ph.D. (Psychology and Pediatrics)
My research involves observing the effects of stress on physical health and psychopathology, and processes of coping and self-regulation in response to stress and adversity in children, adolescents, and adults. Out of this comes the development of interventions to enhance the ways that individuals and families cope with stress. My current work is focused on the psychological and biological processes of stress on children, adolescents, and families coping with cancer, chronic pain, or depression.

(4-5) Understanding Cognition and Social Function
Sohee Park, Ph.D. (Psychology and Psychiatry)
As a child growing up in Seoul, I planned to be an anthropologist because I was fascinated by how seemingly unfathomable surface cultural differences could be bridged inside. After a detour into physics and four countries later, I am still trying to solve the puzzle of the ‘other’ but in the context of severe mental illness.

My lab focuses on understanding the neural bases of schizophrenia, bipolar disorder, and related conditions, while always being mindful of the subjective experiences of the people whose lives are disrupted by psychosis. We believe that disturbed sensory and perceptual processing in the brain cascades into anomalous cognitive and social functioning in these conditions, and that training the brain to process incoming information more efficiently could lead to improvements in cognition and outcome. Such interventions are more effective if they begin early, for example, during adolescence, because this is the period during which the behavioral signs of psychosis emerge.

Our goal for the next decade is to develop noninvasive and effective interventions that are firmly grounded in psychology and neuroscience. To reach that goal, we are collaborating with other VKC investigators, including Bruce Compas, Nilanjan Sarkar, Tricia Thornton-Wells, and Adam Anderson.
Connecting With Public Policy Makers • Elise McMillan, J.D., VKC UCEDD Co-Director

Why do we work to connect research, training, and service models to developmental disabilities public policy? We hear this question over and over again about connecting evidence-based practices with work in our schools and communities. The VKC University Center for Excellence offers a wonderful opportunity to make those connections. One of our charges is to inform policy makers about best practices.

We do that on the local level through participation in activities like the Mayor’s Advisory Council on Exceptional Education, at the state level through projects like TennesseeWorks and the Employment Systems Change Grant, and at the federal level as we take part in national disability organizations.

This happens through testimony, shared articles, and professional development in areas of autism, Down syndrome, and other genetic syndromes. We are a vehicle for sharing research findings and recommended practices with public policy makers at the local, state, and national levels.

When the Tennessee Legislature was developing policies about insurance coverage for autism treatment, they turned to the VKC. When expertise is needed to conduct statewide needs assessments, VKC UCEDD faculty and trainees are there, using research tools like REDCap developed at Vanderbilt.

With the support of university students and faculty, we have collected family stories and shared with public policy makers, so they will understand how disabilities affect the citizens they represent.

And the work continues.
WHY GRADUATE STUDENTS AND POSTDOCS ROCK!

The Rock Stars of Science (Rock S.O.S.) national campaign (see p. 3) encouraged youth to pursue careers in science. As a Eunice Kennedy Shriver Intellectual and Developmental Disabilities Research Center, the VKC plays a leadership role in training predoctoral and postdoctoral investigators in intellectual and developmental disabilities (IDD) research. Below we highlight a few. All our predoctoral students and postdoctoral fellows are the Future Rock Stars of IDD Science!

(1) Courtney Wright, Doctoral Student in Special Education, Kaiser KidTalk Projects

Coming from speech pathology, I knew about development and assessment, but not much about how to help young children and their families. Now I have learned a number of evidence-based practices for teaching a variety of skills to young children with disabilities. I feel confident within my clinical work and my ability to include and teach families strategies to use in their everyday lives. I look forward to passing these newly acquired skills on to future practitioners.

(2) Qiuyun Fan, Doctoral Student in Biomedical Engineering, Cutting Lab

I study the neurocorrelates of reading ability in the brain using magnetic resonance imaging. I am developing new imaging and analysis techniques to study how neural tissues are organized in the brain, and how brain regions with distinct functions collaborate to underpin complex cognitive behavior. At the VKC, I have unique opportunities to take advantage of this platform where engineers, psychologists, pediatricians, educators, clinicians, and others brainstorm ideas, so that interdisciplinary questions can be addressed and the frontiers of science pushed forward.

(3) Marc Mergy, Doctoral Student in Neuroscience Graduate Program, Blakely Lab

I chose neuroscience research because the brain and many brain disorders remain an elusive “black box.” There is plenty left to learn! My own work focuses on a new mouse model of ADHD that I have used to further our understanding of the molecular mechanisms underlying this disorder. It’s a great feeling to know that my work has developed a useful tool for future research.

(Above) Christopher Muller, Doctoral Student in Neuroscience Graduate Program, Veenstra-VanderWeele Lab

Earlier, I worked in a human genetics laboratory involved in collecting DNA samples from families with a history of autism. Although I enjoyed it, I was frustrated that I could not do more for families. I searched for neuroscience graduate programs with strength in translational autism research, which led me to Vanderbilt, where I am doing research in a lab developing and characterizing novel animal models of autism. If my work can somehow someday help a family affected by autism, it will be worth the struggle.
The Vanderbilt LEND is part of a national network of Leadership Education in Neurodevelopmental Disabilities (LEND) programs. Their goal is to improve the health of infants, children, and adolescents with neurodevelopmental and related disabilities through leadership training. The Vanderbilt LEND prepares graduate and postgraduate students in 13 health-related fields, and provides specialized training in autism and pediatric audiology.

The VKC University Center for Excellence in Developmental Disabilities (UCEDD), also part of a national network, trains university students, practicing professionals and direct care providers, individuals with disabilities and family members, disability advocates and policy makers.

Below we highlight a few LEND and UCEDD trainees. Collectively, VKC LEND and UCEDD trainees are future educators, researchers, clinicians, service providers, and advocates.

(1) Cong Van Tran, 2011-12 TRIAD and LEND Psychology Trainee The VKC has rich resources—experts, seminars, training, tools, tests, facilities—that facilitated my learning. Most important was developing professional and personal relationships with psychologists and autism and disability specialists. Now I’m doing disability training in my home country of Viet Nam.

(2) Kelsey Bush, 2012-13 UCEDD Cognitive Studies and Human & Organization Development Trainee I knew from a young age that I wanted to work with individuals with intellectual and developmental disabilities. I’ve learned that even small acts can have huge ripple effects. I have had amazing opportunities working in the Prader-Willi syndrome project and in VKC Communications. These experiences showed me different ways in which I could contribute to the field.

(3) Hilary Davis, 2011-12 LEND Pediatric Audiology Trainee Last week, I had a 4-year-old light up with excitement and high-five me once he got his new hearing aid—he was hearing things he had never heard before! I work in schools, teaching about hearing loss and how to improve classroom settings. These moments remind me that I am passionate about kids and their success.

(4) Matthew Brock, 2012-2013 UCEDD Special Education Trainee There is an enormous gap between evidence-based practices and the reality of day-to-day special education practice. I get excited every time I am able to help a teacher or paraprofessional use a new intervention strategy effectively, and then measure (and celebrate with them) the difference that it makes for a student with a disability.

(5) Carrie Spero, 2012-2013 LEND and UCEDD Social Work Trainee As a UCEDD trainee, I have worked with Next Steps students and others and increased my knowledge of disabilities. Through LEND, I have seen the influential power that individuals, teams, and communities can have in working toward change. I feel more confident every day in my ability to serve the community.
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ACM Lifting Lives Experience at Vanderbilt

Nashville’s music entertainment industry offers a wide range of vibrant careers. Beginning March 2013, a small group of young adults with intellectual and developmental disabilities will have a unique opportunity to experience the entertainment industry and the various support roles that “make the music happen.” Sweet! • This innovative program is a creative partnership between ACM Lifting Lives, the charitable arm of the Academy of Country Music, and the VKC.

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Unless otherwise noted, events are free and open to the public. Events are subject to change. Please check the website calendar at kc.vanderbilt.edu or contact (615) 322-8240 or toll-free (1-866) 936-VUKC [8852].

Please keep this calendar and check the Event Calendar on the VKC website for updates. If you wish to receive event announcements by email, send your email address to kc@vanderbilt.edu. For disability-related training and other events statewide and nationally, see the searchable Pathfinder Disability Calendar www.familypathfinder.org.

*Event will be held in Room 241 Vanderbilt Kennedy Center/One Magnolia Circle Bldg (110 Magnolia Circle).

**VKC Member or Investigator

- **APRIL 3**
  Developmental Disabilities Grand Rounds
  Big Strokes in Little People: Biology and Clinical Considerations
  BethAnn McLaughlin**, Ph.D., Assistant Professor of Neurology
  Lori Jordan**, Ph.D., Assistant Professor of Neurology. Register at kc.vanderbilt.edu/registration Wednesday 12 p.m.

- **APRIL 5-6**
  Fifth Annual Tennessee Adult Brothers and Sisters (TABS) Conference
  Sibling keynote speakers: (Fri) Scott Modell, Ph.D., Deputy Commissioner of Policy & Innovation, TN Dept of Intellectual & Developmental Disabilities; (Sat) Nancy Webster, President of The Arc. For adults who have a sibling with a disability, siblings-in-law, cousins, professionals interested in sibling issues. $50 ($25 students) includes meals. Register at kc.vanderbilt.edu/registration Contact info.tabs@vanderbilt.edu
  Holiday Inn Nashville-Vanderbilt, 2613 West End Avenue Friday 12-7:30 p.m.
  Saturday 8:30 a.m.-1:30 p.m.

- **APRIL 10**
  Neuroscience Graduate Program Seminar Series
  Epigenetics at the Interface of Genetics and Environment in Autism
  Janine LaSalle, Ph.D., Professor of Medical Microbiology and Immunology, University of California Davis. Co-sponsor Vanderbilt Brain Institute
  208 Light Hall Wednesday 4:10 p.m.

- **APRIL 11**
  Augmentative and Alternative Communication (AAC) Presentation
  Assistive Technology for Students With Disabilities: The Legal Ins and Outs
  Erin Richardson, Co-Director for Advocacy, Special Education Advocacy Center. Free and open to the public. Register at kc.vanderbilt.edu/registration Thursday 6:30-8 p.m.

- **APRIL 12**
  Augmentative and Alternative Communication (AAC) All-Day Workshop
  AAC Assessment: Making the Match
  Karen Casey, M.A., CCC-SLP, Associate Professor of Hearing & Speech Sciences
  600 Marriott Dr (615-889-9300) $175 professionals, $50 students $125 group rate for 2 or more from same agency/school. Register by April 5 at kc.vanderbilt.edu/registration. Friday 8 a.m.-3:30 p.m.

- **APRIL 13**
  Saturday
  For siblings 5-7 and 8-13 years who have a brother/sister with a disability Games, friends, conversation $10/child, $20 max/family (assistance available). Register at kc.vanderbilt.edu/registration (required in advance)
  Info (615) 936-8852 or laurie.fleming@vanderbilt.edu
  Saturday 10 a.m.-2 p.m.

- **APRIL 20**
  TRIAD Families First Workshops
  Developing Basic Communication
  Register at kc.vanderbilt.edu/registration. Info (615) 322-6027 or families.first@vanderbilt.edu
  Saturday 9 a.m.-12 p.m.
  See website for Summer workshops

- **MAY 17**
  Next Steps at Vanderbilt Open House
  Info (615) 322-5658. Register at kc.vanderbilt.edu/registration Friday 2-4 p.m.

- **MAY 30-31**
  11th Annual Tennessee Disability MegaConference
  Deep Roots, Broad Branches, and Strong Wings
  World-class speakers, interactive workshops, educational sessions, exhibits. Info at www.tndisabilitymegaconference.org (includes breakfast/lunch) $105 one day (Thursday or Friday) $195 for 2 days (Thursdays-Friday) Nashville Airport Marriott, 600 Marriott Dr (615-889-9300)
Next Steps at Vanderbilt Summer Institute, a postsecondary education preparatory program, is accepting applications for its July 14–19 on-campus program.

Two lunch-time plenary sessions and selection among 6 (90-minute) small group sessions (1.1 ASHA CEUs) Register at kc.vanderbilt.edu/registration. Info languagelab@vanderbilt.edu Tuesday-Wednesday 8:30 a.m.-3 p.m.

VKC SUMMER PROGRAMS
Info laura.mcleod@vanderbilt.edu
*Registration is closed. Contact TN Disability Pathfinder for information on summer activities.
• JUNE 3-15
SENSE Theatre Camp*
For youth, 7-18 years of age, with and without autism spectrum disorders
• JUNE 23-29
ACM Lifting Lives Music Camp*
Residential camp for individuals with Williams syndrome (16 yrs+)
• JULY 14-19
Next Steps at Vanderbilt Summer Institute. Residential college transition program for rising high school seniors, juniors, and young adults with developmental disabilities up to age 24

READING CLINIC SUMMER SESSION
• JUNE 3-JULY 15
(no sessions Wk July 4)
Tutoring students through middle school. 24 (40-minute) sessions, ranging 8 a.m.-12 noon Monday-Thursday Space limited. Apply early. Contact (615) 936-5118, readingclinic@vanderbilt.edu

ARTS AND DISABILITIES EXHIBIT
Monday-Friday 7:30 a.m.-5:30 p.m. Lobby VKC/One Magnolia Circle Bldg. Info (615) 936-8852
• APRIL THROUGH JULY

AUTISM TRAININGS FOR K-12 SCHOOL PERSONNEL
With the Tennessee Department of Education, TRIAD offers free autism-specific workshops for school personnel, parents, and the community in locations across the state. Dates/locations TBA; see kc.vanderbilt.edu/TRIAD/events.

LEARNING ASSESSMENT CLINIC
Multidisciplinary academic assessments of students, 5-25 years, to identify learning strengths and challenges and to recommend strategies to improve academic learning. Info (615) 936-5118

A 2-year certification postsecondary education program for students with intellectual disabilities providing individualized Programs of Study in education, social skills, and vocational training. Info (615) 322-5658 or NextSteps@vanderbilt.edu

TAKE PART IN RESEARCH
VKC Research Studies
For children and adults, with and without disabilities Lynnette Henderson (615) 936-0448 Toll-free (1-866) 936-VUKC [8852]
• Research Family Partners
kc.vanderbilt.edu/rfp
Register and be notified of research studies
• StudyFinder
kc.vanderbilt.edu/studyfinder
View lists of studies, criteria, and contact information
• See also VUMC Clinical Trials
www.vanderbilthealth.com/clinicaltrials

TENNESSEE DISABILITY PATHFINDER • MULTI-CULTURAL OUTREACH
Helpline; Web site with Searchable Database, Calendar, and Resource Library; Print Resources
www.familypathfinder.org
English (615) 322-8529
Español (615) 479-9568
Toll-free (1-800) 640-INFO [4636]
tropathfinder@vanderbilt.edu
Project of VKC UCEDD and TN Council on Developmental Disabilities

TENNESSEE WORKS
Web hub for information related to employment of people with disabilities
TennesseeWorks.org
(615) 936-0448