

Assistance for Needy Families benefits at some point during participation; of those, 18.5% (5/27) also received disability.

Although OnTrackNY participants differ from RAISE-ETP participants, our findings show variations in disability enrollment among coordinated specialty care programs. Like participants in RAISE-ETP, we found that individuals with lower occupational and social functioning are particularly at risk for disability enrollment. Symptoms were not predictive. Our MIRECC GAF symptom measure may be less sensitive to symptom differences than the Positive and Negative Syndrome Scale used in RAISE-ETP.

Preventing disability is a goal of coordinated specialty care programs, and many young people with psychosis want to work. Coordinated specialty care programs must continue to help participants pursue meaningful work and education to help them achieve their goals.

REFERENCE

1. Rosenheck RA, Estroff SE, Sint K, et al: Incomes and outcomes: Social Security disability benefits in first-episode psychosis. *Am J Psychiatry* 2017; 174:886–894

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Drs. Bello, Malinovsky, Nossel, Smith, and Dixon may be part of training and consultation efforts to help others provide the type of services for first-episode psychosis described here. They do not expect to receive compensation for this training other than that received as part of work done for their employers. The other authors report no financial relationships with commercial interests.

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CORRECTION

In the September 2016 article “Performance of DSM-5 Persistent Complex Bereavement Disorder Criteria in a Community Sample of Bereaved Military Family Members” by Stephen J. Cozza, M.D., et al. (*Am J Psychiatry* 2016; 173:919–929), a clinical threshold was incompletely defined. The last sentence of the section “Applying DSM-5 Persistent Complex Bereavement Disorder, Complicated Grief, and Prolonged Grief Disorder Criteria Sets to Clinical and Nonclinical Samples” within the Method portion of the paper should read as follows:

Individual symptoms within criteria B and C were considered present if at least one of the matched Complicated Grief Questionnaire items was endorsed as being present “often” or “very often” (i.e., a rating of 3 or 4 on a 5-point Likert scale using the following anchors: “0=never,” “1=rarely,” “2=sometimes,” “3=often,” “4=very often”) in the last month.