



UPDATE

November 1, 2013

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<http://www.nimh.nih.gov/outreach/partnership-program/news-and-updates-from-the-program.shtml>

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*Prepared by the U.S. Department of Health and Human Services,
National Institutes of Health, National Institute of Mental Health,
Office of Constituency Relations and Public Liaison*

EXPOSURE / RITUAL PREVENTION THERAPY BOOSTS ANTIDEPRESSANT TREATMENT OF OCD; CBT TRUMPS ANTIPSYCHOTIC FOR AUGMENTATION, AMENDING CURRENT GUIDELINES

A form of behavioral therapy can augment antidepressant treatment of obsessive compulsive disorder (OCD) better than an antipsychotic, researchers have found. The researchers, supported by the National Institute of Mental Health (NIMH), recommend that this specific form of cognitive behavior therapy (CBT) – exposure and ritual prevention – be offered first to OCD patients who don't respond adequately to treatment with an antidepressant alone, which is often the case. Current guidelines favor augmentation with antipsychotics.

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/exposure-ritual-prevention-therapy-boosts-antidepressant-treatment-of-ocd.shtml>

NIMH GRANTEE RECEIVES 2013 NOBEL PRIZE

Congratulations to current NIMH grantee Thomas C. Südhof, M.D., at Stanford University School of Medicine, for winning the Nobel Prize in Physiology or Medicine for his work on how the brain sends and receives chemical messages. "We are extremely proud of Dr. Südhof," said NIMH Director Thomas Insel, M.D. "NIMH has supported Dr. Südhof's ground-breaking research for more than two decades as part of our commitment to understanding the fundamental mechanisms of brain function."

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/nimh-grantee-receives-2013-nobel-prize.shtml>

STREAMLINED METHOD OFFERS SHORTCUT TO GENERATING NEURONS FOR DISCOVERY; NEWLY NAMED NOBEL LAUREATE LED NIMH-FUNDED STUDY

An NIMH-funded research team led by newly-named Nobel Laureate Thomas Südhof, M.D., of Stanford University, has found a shortcut to rapidly convert induced human stem cells into healthy neurons for "disease-in-a-dish" discovery – and, ultimately, personalized medicine. The breakthrough method opens the way to large-scale production of viable, induced human neurons for studying causes of brain disorders, screening potential treatments, and developing regenerative therapies. For example, skin cells from a patient with schizophrenia can be first induced to revert to stem cells and then grown into neurons for study of his or her unique illness.

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/streamlined-method-offers-shortcut-to-generating-neurons-for-discovery.shtml>

THREE NIH SCIENTISTS ELECTED INTO IOM

NIMH congratulates Daniel S. Pine, M.D., one of three National Institutes of Health (NIH) scientists elected as members of the prestigious Institute of Medicine (IOM). Dr. Pine is the chief of the Section on Development and Affective Neuroscience in the NIMH Intramural Research Program. Election to the IOM is considered one of the highest honors in the fields of health and medicine, and recognizes individuals who have demonstrated outstanding professional achievement and commitment to service. Current, active IOM membership elects new members annually from candidates nominated for professional achievement and commitment to service. "Selection to the IOM is a marker of an outstanding scientific career," said NIH Director Francis S. Collins, M.D., Ph.D. "We are proud of our accomplished scientists and congratulate them on this honor."

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/three-nih-scientists-elected-into-iom.shtml>

NIMH SCIENTISTS HONORED WITH 2013 BRAIN & BEHAVIOR RESEARCH FOUNDATION AWARDS

Five NIMH scientists--one intramural scientist and four extramural grantees--were honored by the Brain & Behavior Research Foundation on Friday, October 25, 2013, for their "outstanding research leadership and contributions to mental health research."

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/nimh-scientists-honored-with-2013-brain-amp-behavior-research-foundation-awards.shtml>

FDA APPROVES NEW DRUG TO TREAT MAJOR DEPRESSIVE DISORDER

The U.S. Food and Drug Administration (FDA) approved Brintellix (vortioxetine) to treat adults with major depressive disorder (MDD). Six clinical studies in which adults with MDD were randomly assigned to receive Brintellix or placebo demonstrated that Brintellix is effective in treating depression. An additional study showed Brintellix decreased the likelihood of participants becoming depressed again after treatment of their MDD episode. These studies were conducted in the United States and other countries. The most common side effects reported by participants taking Brintellix in clinical trials included nausea, constipation, and vomiting. Brintellix will be available in 5 mg, 10 mg, 15 mg, and 20 mg tablets.

Press Release: <http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm370416.htm>

FDA APPROVES SECOND BRAIN IMAGING DRUG TO HELP EVALUATE PATIENTS FOR ALZHEIMER'S DISEASE, DEMENTIA

The FDA approved Vizamyl (flutemetamol F18 injection), a radioactive diagnostic drug for use with positron emission tomography (PET) imaging of the brain in adults being evaluated for Alzheimer's disease (AD) and dementia. Dementia is associated with diminishing brain functions such as memory, judgment, language, and complex motor skills. The dementia caused by AD is associated with the accumulation in the brain of an abnormal protein called beta amyloid and damage or death of brain cells. However, beta amyloid can also be found in the brain of individuals with other dementias and in elderly people without neurologic disease. Vizamyl works by attaching to beta amyloid and producing a PET image of the brain that is used to evaluate the presence of beta amyloid. A negative Vizamyl scan means that there is little or no beta amyloid accumulation in the brain and the cause of the dementia is probably not due to AD. A positive scan means that there is probably a moderate or greater amount of amyloid in the brain, but it does not establish a diagnosis of AD or other dementia. Vizamyl does not replace other diagnostic tests used in the evaluation of AD and dementia.

Press Release: <http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm372261.htm>

NIDA'S DRUG ABUSE INFORMATION FOR TEENS GOES MOBILE

Teens — and adults who care for them — can now find answers to questions about drug abuse and addiction more easily, and through smartphones and tablets. Spanish language versions of easy to understand resources on drug abuse and addiction are now also available. The updates, announced by the National Institute on Drug Abuse (NIDA), were launched as part of National Substance Abuse Prevention Month events in October. For teens, their parents, and teachers, NIDA has upgraded its popular teen website to a “responsive design” model that automatically adjusts to fit the viewer’s screen for better viewing through smartphones and tablets. The new design is also more engaging, with larger, more vibrant buttons that link directly to resources that provide answers to questions and concerns related to drug abuse in adolescents.

Press Release: <http://www.nih.gov/news/health/oct2013/nida-21.htm>

NIH STUDY IDENTIFIES GENE FOR ALCOHOL PREFERENCE IN RATS

Selectively bred strains of laboratory rats that either prefer or avoid alcohol have been a mainstay of alcohol research for decades. So-called alcohol-preferring rats voluntarily consume much greater amounts of alcohol than do non-preferring rats. NIH scientists now report that a specific gene plays an important role in the alcohol-consuming tendencies of both types of rats.

Press Release: <http://www.nih.gov/news/health/sep2013/niaaa-30.htm>

SAMHSA GUIDELINES HELP MEDIA PRODUCE INSIGHTFUL STORIES ABOUT BULLYING

The Media Guidelines for Bullying Prevention, developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) in partnership with a wide range of behavioral health and media experts, provides recommendations for media coverage of bullying. The guidelines are designed to provide journalists, members of the entertainment industry, bloggers, and others with the up-to-date, accurate information needed to cover and depict bullying issues in a factual and sensitive way.

Press Release: <http://www.samhsa.gov/newsroom/advisories/1310280514.aspx>

SAMHSA AWARDS UP TO \$56.9 MILLION IN GRANTS OVER FOUR YEARS IN FY13 TO SUPPORT SAFE SCHOOLS AND HEALTHY STUDENTS

SAMHSA announced it awarded up to \$56.9 million in grants over four years to states across the nation for the Safe Schools/Healthy Students (SSHS) program. This round of grants will run from FY 2013 through FY 2016 and will support state and community partnerships to create safe and supportive schools and communities by building partnerships among educational, behavioral health, and criminal/juvenile justice systems. The SSHS State Program develops and implements evidence-based programs, effective policies, and innovative strategies that address youth violence and promote the wellness of children, youth, and families. These grants will support work to increase the number of children and youth who have access to behavioral health services; decrease the number of students who abuse substances; increase supports for early childhood development; improve school climates; and reduce the number of students who are exposed to violence.

Press Release: <http://www.samhsa.gov/newsroom/advisories/1310230410.aspx>

HHS AWARDS GRANTS FOR HURRICANE SANDY RECOVERY RESEARCH; HARD HIT COMMUNITIES BENEFIT FROM RESEARCH ON LONG-TERM HEALTH RECOVERY

More than \$8 million in grants will support research to aid the long-term recovery in areas hard hit by Hurricane Sandy in October 2012. The grants announced represent the first time the U.S. Department of Health and Human Services (HHS) has funded research needed by local communities to support long-term recovery efforts. Over the next two years, research will focus on physical and behavioral health aspects of recovery, including community resilience, risk communication and the use of social media, health system response and health care access, evacuation and policy decision making, and mental health.

Press Release: <http://www.hhs.gov/news/press/2013pres/10/20131022a.html>

NEW ON NIMH WEBSITE

DIRECTOR'S BLOG: SHUTDOWN

NIMH Director Thomas Insel discusses the impact of the recent government shutdown.

<http://www.nimh.nih.gov/about/director/2013/shutdown.shtml>

ARCHIVED TWITTER CHAT ON BULLYING PREVENTION

In observance of Bullying Prevention Awareness Month, NIMH and the Eunice Kennedy Shriver National Institute of Child Health and Human Development co-hosted a Twitter chat with pediatric psychologists. The transcript of the chat is available.

<http://www.nimh.nih.gov/news/science-news/2013/nimh-twitter-chat-on-bullying-prevention.shtml>

NIMH SEEKS PROPOSALS FOR OUTREACH PARTNERS IN THREE STATES AND THE DISTRICT OF COLUMBIA

NIMH is soliciting proposals for its Outreach Partnership Program from organizations in Alaska, the District of Columbia, Michigan, and Missouri. Non-profit organizations that conduct outreach focused on mental health are invited to submit proposals. Proposals are due December 18, 2013.

<http://www.nimh.nih.gov/outreach/partnership-program/solicitation-process/outreach-partners-solicitation-process.shtml>

NIH DIRECTOR BLOG: BASIC SCIENCE FINDS NEW CLUE TO BIPOLAR DISORDER

Heredity, along with environment, plays an important role in many mental illnesses. For example, studies have revealed that if one identical twin has bipolar disorder, the chance of the other being affected is about 60 percent. There are similar observations for autism, schizophrenia, and major depression. But finding the genes that predispose to these conditions has proven very tricky. In this blog post, NIH Director Francis Collins describes a recent research finding that provides genetic clues to manic episodes.

<http://directorsblog.nih.gov/2013/10/29/basic-science-finds-new-clue-to-bipolar-disorder/>

NIH NEWS IN HEALTH: VIDEO GAME TRAINING IMPROVES BRAIN FUNCTION IN OLDER ADULTS

This *NIH News in Health* article describes the results of a video game training study with older adults. Seniors who played a specialized 3-D video game improved their ability to focus and multitask during laboratory tests. The new findings show the aging brain's potential to improve certain skills.

<http://newsinhealth.nih.gov/issue/Oct2013/Capsule1>

NIDA SCIENCE SPOTLIGHT: MEDICATION TO TREAT MARIJUANA ADDICTION MAY BE ON THE HORIZON

NIDA-funded researchers report that kynurenic acid is a naturally occurring substance in the brain that can lessen the effects of THC, the primary psychoactive ingredient in marijuana, in animal models of drug abuse and addiction. The acid acts by reducing the function of alpha-7-nicotinic acetylcholine receptors. If effective in humans, this could lead to a medication for the treatment of marijuana addiction. There are currently no approved medications for treating marijuana addiction, estimated to occur in nine percent of users.

<http://www.drugabuse.gov/news-events/news-releases/2013/10/medication-to-treat-marijuana-addiction-may-be-horizon>

INFOGRAPHIC HIGHLIGHTS PREVALENCE OF MENTAL HEALTH DISORDERS AMONG YOUTH

Developed by FindYouthInfo.gov, this infographic shows that in 2010, nearly 50 percent of adolescents met the criteria for a mental disorder and 22 percent of those young people exhibited severe impairment or distress. Of the 22 percent, 11.2 percent met the criteria for mood disorders, 8.3 percent met the criteria for anxiety disorders, and 9.6 percent met the criteria for behavior disorders.

http://www.findyouthinfo.gov/img/ymh_infographic.png

NEW FROM SAMHSA

LATEST SAMHSA NEWS AVAILABLE

The latest issue of *SAMSHA News* focuses on the launch of the health insurance marketplace and Veterans courts. The issue also describes the first Community Conversations in response to President Obama's call to action for a national dialogue to increase understanding about mental health.

http://www.samhsa.gov/samhsaNewsletter/Volume_21_Number_4/default.aspx

BEHAVIORAL HEALTH IN THE UNITED STATES

SAMHSA's new publication provides in-depth information about the behavioral health (mental and/or substance use disorders) of the nation. Drawing on 40 different data sources, this publication includes national and state-level trends in private and public sector behavioral health services, costs, and clients.

<http://blog.samhsa.gov/2013/10/29/behavioral-health-in-the-united-states/>

QUICK GUIDE FOR ADMINISTRATORS: CLINICAL SUPERVISION AND PROFESSIONAL DEVELOPMENT OF THE SUBSTANCE ABUSE COUNSELOR

This guide offers tips for program administrators on developing a best-practices program for clinical supervision in the substance abuse treatment field. It presents key issues to consider, including cultural competence, supervisor ethics and values, and more. <http://store.samhsa.gov//product/SMA13-4771>

DIABETES CARE FOR CLIENTS IN BEHAVIORAL HEALTH TREATMENT

This advisory reviews diabetes and its link with mental illness, stress, and substance use disorders, and discusses ways to integrate diabetes care into behavioral health treatment, such as screening and intake, staff education, integrated care, and counseling support. <http://store.samhsa.gov//product/SMA13-4780>

FAMILY THERAPY CAN HELP: FOR PEOPLE IN RECOVERY FROM MENTAL ILLNESS OR ADDICTION

This brochure explores the role of family therapy in recovery from mental illness or substance abuse. It explains how family therapy sessions are run and who conducts them, describes a typical session, and provides information on its effectiveness in recovery. <http://store.samhsa.gov//product/SMA13-4784>

NO LONGER ALONE (A STORY ABOUT ALCOHOL, DRUGS, DEPRESSION, AND TRAUMA): ADDRESSING THE SPECIFIC NEEDS OF WOMEN

This resource tells the stories of three women with substance abuse and mental health problems who have received treatment and improved their quality of life. Featuring flashbacks, the fotonovela is culturally relevant and designed to dispel myths around behavioral health disorders. (Available in English and Spanish) <http://store.samhsa.gov//product/SMA13-4781ENG>

MOTIVATION FOR CHANGE: JOHN'S STORY-CONSEQUENCES OF HIS HEAVY DRINKING AND RECOVERY

This resource equips people who have chronic pain and mental illness or addiction with tips for working with their healthcare provider to decrease their pain without jeopardizing their recovery. It explores counseling, exercise, and alternative therapy, as well as medications. <http://store.samhsa.gov//product/SMA13-4782ENG>

INFOGRAPHICS GIVE A SNAPSHOT OF TRANSFORMATION PROGRAM GRANTEEES

The SAMHSA GAINS Center has developed infographics for each of the 20 Mental Health Transformation Grant (MHTG) projects in order to display each program's impact. The purpose of the MHTG program is to foster adoption and implementation of permanent transformative changes in how public mental health services are organized, managed, and delivered so that they are consumer-driven, recovery-oriented, and supported through evidence-based and best practices. http://gainscenter.samhsa.gov/grant_programs/mhtg.asp

TRAUMA-INFORMED JUVENILE JUSTICE SYSTEM BRIEF SERIES

The National Center for Child Traumatic Stress announced a series of briefs from the Juvenile Justice Roundtable on special topics related to trauma-informed juvenile justice systems. Topics include assessment, role of family engagement, racial disparities, and cross-system collaboration. <http://www.nctsn.org/resources/topics/juvenile-justice-system>

UPDATED TIP SHEETS: MANAGING BEHAVIORAL HEALTH ISSUES AFTER A DISASTER

SAMHSA has revised tip sheets designed to help specific audiences cope more effectively with the behavioral health challenges that often follow a disaster. Audiences include children to college-age adults, disaster survivors, and responders.

TIPS FOR SURVIVORS OF A DISASTER OR TRAUMATIC EVENT: WHAT TO EXPECT IN YOUR PERSONAL, FAMILY, WORK, AND FINANCIAL LIFE

For some survivors, disasters can remind them of earlier trauma and make it harder to recover. But with good social support and coping skills, most survivors are resilient and have the ability to recover. This tip sheet explains how traumatic events affect survivors in all facets of life and provides tips for managing the effects after the event. <http://store.samhsa.gov/product/Tips-for-Survivors-of-a-Disaster-or-Traumatic-Event-What-to-Expect-in-Your-Personal-Family-Work-and-Financial-Life/SMA13-4775>

TIPS FOR SURVIVORS OF A DISASTER OR TRAUMATIC EVENT: MANAGING STRESS

It is common for survivors to show signs of stress after exposure to a disaster or other traumatic event. This tip sheet lists symptoms of stress, offers tips for relieving it, and provides helpful resources for those who wish to seek additional help for themselves or someone they care about.

<http://store.samhsa.gov/product/Tips-for-Survivors-of-a-Disaster-or-Other-Traumatic-Event-Managing-Your-Stress/SMA13-4776>

TIPS FOR TALKING WITH AND HELPING CHILDREN AND YOUTH COPE AFTER A DISASTER OR TRAUMATIC EVENT: A GUIDE FOR PARENTS, CAREGIVERS, AND TEACHERS

When children experience a trauma, watch it on TV, or overhear others discussing it, they can feel scared, confused, or anxious. Young people react to trauma differently than adults. This tip sheet informs parents, caregivers, and teachers about common reactions children and youth may have after an event. The sheet also provides helpful responses when talking directly to affected children and tips for when to seek additional support. <http://store.samhsa.gov/product/Tips-for-Talking-With-and-Helping-Children-and-Youth-Cope-After-a-Disaster-or-Traumatic-Event-A-Guide-for-Parents-Caregivers-and-Teachers/SMA12-4732>

TIPS FOR COLLEGE STUDENTS: AFTER A DISASTER OR OTHER TRAUMA

This tip sheet lists common reactions to disasters and other traumatic events as a way to reassure students that they are not alone in their reactions. Tips for coping include reaching out to supportive friends and family as well as other ways college students can manage their reactions.

<http://store.samhsa.gov/product/Tips-for-College-Students-After-a-Disaster-or-Other-Trauma/SMA13-4777>

TIPS FOR COLLEGE STUDENTS: AFTER A DISASTER OR OTHER TRAUMA: R U A SURVIVOR OF A DISASTER OR OTHER TRAUMA? HOW R U DOING?

This tip sheet uses text-message shorthand to reach college students whose primary means of communication is electronic. Tips for coping after a disaster or other traumatic events are presented using common icons and text-messaging abbreviations. <http://store.samhsa.gov/product/Tips-for-College-Students-After-a-Disaster-or-Other-Trauma-R-U-A-Survivor-of-a-Disaster-or-Other-Trauma-/SMA13-4778>

STOPBULLYING.GOV BLOG POST

WHY STOPBULLYING.GOV DOESN'T USE THE WORD "BULLY" TO LABEL KIDS

The labels bully, victim, and target are used often by media, researchers, and others to refer to children who bully others and children who are bullied. This StopBullying.gov blog post discusses why these terms are not used in this way on its website. For example, rather than calling a child a "bully," the site refers to "the child who bullied." <http://www.stopbullying.gov/blog/2013/10/23/why-we-dont-use-word-bully-to-label-kids>

FACEBOOK AND CYBERBULLYING

When using a site such as Facebook, parents need to discuss how their teen uses the site and with whom they share their posts. Is the teen communicating privately or publicly? Have they witnessed or been part of any form of online bullying? This blog post provides tips and tools for individuals being bullied, harassed, or attacked online. <http://www.stopbullying.gov/blog/2013/10/29/facebook-and-cyberbullying>

ENTERING THE WORLD OF WORK: WHAT YOUTH WITH MENTAL HEALTH NEEDS SHOULD KNOW ABOUT ACCOMMODATIONS

This Department of Labor fact sheet provides guidance for young adults with mental illness about a successful transition into the workforce by answering questions regarding disclosure, accommodations, and resources. <http://www.dol.gov/odep/pubs/fact/transitioning.htm>

DEPRESSION AND SUICIDALITY DURING THE POSTPARTUM PERIOD AFTER FIRST TIME DELIVERIES

Although suicide is a leading cause of death among new mothers during the postpartum period, there has been limited research on self-harm in the postpartum period and associated risk factors. This article in the Armed Forces Health Surveillance Center *Medical Surveillance Monthly Report* summarizes findings from a study of risk factors for suicide during the postpartum period among women in active service and dependent spouses. http://www.afhsc.mil/viewMSMR?file=2013/v20_n09.pdf#Page=02

AHRQ RESEARCH ACTIVITIES

FEW INTERVENTIONS EFFECTIVE FOR CHILDREN EXPOSED TO NONRELATIONAL TRAUMA

Approximately two-thirds of children and adolescents will have exposure to at least one traumatic event before they reach the age of 18. Some of these children later develop traumatic stress symptoms and syndromes, including post-traumatic stress disorder (PTSD). An Agency for Healthcare Research and Quality (AHRQ) comparative effectiveness review found only a few psychotherapy interventions that appear promising. The review focused on the evidence for interventions to help children who have experienced traumas due to nonrelational (non-interpersonal) trauma, such as accidents, natural disasters, or war. The more promising interventions were school-based treatments with elements of CBT. There was also some evidence for promising interventions targeting already existing symptoms, each of which had elements of CBT. No pharmacological intervention demonstrated efficacy. Additionally, no evidence was found that provided insight into how interventions targeting children exposed to traumatic events, with or without symptoms, might influence long-term development. The researchers conclude that psychotherapeutic interventions may provide benefit relative to no treatment in children exposed to nonrelational trauma and appear not to have associated harms. <http://www.ahrq.gov/news/newsletters/research-activities/13oct/1013RA14.html>

EVIDENCE LACKING ON EFFECTIVENESS OF INTERVENTIONS FOR INCARCERATED ADULTS WITH SERIOUS MENTAL ILLNESS

Treatment with antipsychotics other than clozapine appears to improve psychiatric symptoms more than clozapine in offenders with serious mental illness (SMI) who are incarcerated, concludes a new review of studies from AHRQ's Effective Health Care Program. For all other incarceration-based interventions, including pharmacologic therapies, cognitive therapy, and modified therapeutic community, evidence was insufficient to draw any conclusions. Among incarcerated adults, 15 to 25 percent suffer from SMI, which includes schizophrenia, schizoaffective disorder, bipolar disorder, or major depression. Two interventions, discharge planning with Medicaid-application assistance and integrated dual disorder treatment programs, appear to be effective interventions compared with standard of care for seriously mentally ill offenders transitioning back to the community. More research is needed to increase the confidence in current low-evidence-strength findings, and to address interventions and populations where evidence is lacking. <http://www.ahrq.gov/news/newsletters/research-activities/13oct/1013RA21.html>

DCOE BLOG POSTS

COMBAT STRESS VS. PTSD: HOW TO TELL THE DIFFERENCE

This Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) blog post describes the similarities and differences of combat stress and PTSD to help service members prevent or effectively manage both. http://www.dcoe.mil/blog/13-10-03/Combat_Stress_vs_PTSD_How_to_Tell_the_Difference.aspx

WARRIOR RESILIENCE CONFERENCE: CONTENT AVAILABLE ONLINE

Sessions from the recent DCoE Warrior Resilience Conference were recorded and are available. Subject matter experts from across the country examined the relationship between physical and psychological resilience with presentations on the factors of sleep and fatigue, nutrition, exercise, family resilience, the role of chaplains in mental health care, PTSD, and traumatic brain injury. Conference content can be accessed through December 13, 2013. http://dcoe.mil/blog/13-10-16/Warrior_Resilience_Conference_Content_from_Virtual_Event_Still_Available_Online.aspx

HELPING MILITARY PARENTS BUILD STRONGER FAMILIES

This blog post describes a new web-based course, *Parenting for Service Members and Veterans*, which looks at parenting through the eyes of military and Veteran parents. While the free course covers common challenges, such as how to improve communication or find discipline that works, it also addresses returning from deployment and the challenges of reconnecting with your child, or parenting with PTSD or a physical injury. http://dcoe.mil/blog/13-10-28/Helping_Military_Parents_Build_Stronger_Families.aspx

BENEFITS OF MINDFULNESS: PUSH-UPS FOR THE BRAIN

This blog describes the practice of mindfulness and its potential benefits. Service members practicing mindfulness may find it also helps reduce stress and anxiety and suppress distressing or distracting thoughts, which can translate to improved performance on and off the battlefield and overall mental health http://dcoe.mil/blog/13-10-30/Benefits_of_Mindfulness_Push-ups_for_the_Brain.aspx

A SYSTEMATIC REVIEW: INTIMATE PARTNER VIOLENCE AMONG VETERANS AND ACTIVE DUTY SERVICE MEMBERS

The Veterans Administration Evidence-Based Synthesis Program conducted a systematic review of the literature on the prevalence of interpersonal violence (IPV) among active duty service members and Veterans as well as intervention strategies to address IPV. Compared with population-based studies conducted in samples not selected for active duty or Veteran status, investigators report higher rates of 12-month IPV perpetration and victimization among active duty women service members; considerably higher 12-month IPV victimization rates for active duty men; and comparable rates of both 12-month IPV perpetration among active duty men and lifetime IPV victimization among Veteran women. This review also shows that the 12-month victimization estimate is higher among active duty men than active duty women—a pattern that also has been observed in civilian studies.

http://www.hsrd.research.va.gov/publications/management_briefs/eBrief-no71.cfm

EVENTS

PEER PRACTICE AND CONTEXT: DEVELOPING QUALITY STANDARDS

NOVEMBER 7, 2013, 2:00 -3:30 PM ET

This SAMHSA Recovery to Practice webinar follows up to its August webinar on peer support in behavioral health and emerging practice standards with a discussion on how these standards will impact practice by providing guidance on what peer support is (coaching, mentoring, disclosing, empowering, etc.) and what it is not (coercing, not disclosing, etc.) for peers and agencies. Presenters will address the uniqueness of peer support and how it complements other services, as well as its niche among the array of services available to persons with mental and substance use disorders. <https://www1.gotomeeting.com/register/368506673>

INTEGRATION OF TECHNOLOGY INTO PSYCHOLOGICAL HEALTH AND TRAUMATIC BRAIN INJURY CARE

NOVEMBER 14, 2013, 1:00-2:30 PM ET

Save the date for DCOE's next webinar.

http://www.dcoe.mil/Training/Monthly_Webinars.aspx

NATIONAL DRUG FACTS WEEK 2014

JANUARY 27-FEBRUARY 2, 2014

Coordinated by NIDA, National Drug Facts Week encourages and stimulates community-based events where teens ask questions of addiction scientists or health experts. Events can be sponsored by a variety of organizations, including schools, community groups, sports clubs, and hospitals. Topics for discussion include the science behind illicit drug use, prescription drug abuse, and use of alcohol and tobacco. Event holders who register will receive free booklets with science-based facts about drugs, designed specifically for teens. <http://drugfactsweek.drugabuse.gov/>

SAVE THE DATE: TWENTY-SECOND NIMH CONFERENCE ON MENTAL HEALTH SERVICES RESEARCH

APRIL 23-25, 2014, BETHESDA, MARYLAND

Join NIMH for the twenty-second NIMH Conference on Mental Health Services Research (MHSR 2014) on the NIH campus April 23-25, 2014. This is a biennial national conference featuring state-of-the-art mental health services research presented via keynote speakers, thematic panels, pre-conference workshops, and paper and poster presentations of findings from recent research studies. MHSR 2014 will solicit original research papers, posters and symposia that advance the principles of a learning mental health care system. Call for abstracts coming soon! For further information, please contact Janet Sorrells at jsorrell@mail.nih.gov

CALLS FOR PUBLIC INPUT

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The AHRQ Effective Health Care Program encourages the public to participate in the development of its research projects. The Program uses these comments to help focus its research and ensure that the final comparative effectiveness reviews answer the most important questions that clinicians, patients, consumers, and policymakers have about a given treatment, test, or procedure. The Program is currently seeking comments for:

TREATMENT OF DEPRESSION DURING PREGNANCY AND THE POSTPARTUM PERIOD (COMMENTS DUE 11/8/13)

<http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayProduct&productID=1718>

PHARMACOTHERAPY FOR ADULTS WITH ALCOHOL-USE DISORDERS IN OUTPATIENT SETTINGS (COMMENTS DUE 11/20/13)

<http://effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayProduct&productID=1729>

INSOMNIA DISORDER: DIAGNOSIS AND MANAGEMENT OUTSIDE OF SLEEP MEDICINE CLINICS (COMMENTS DUE 11/14/13)

<http://effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displaytopic&topicid=548>

NATIONWIDE RECRUITMENT: SCHIZOPHRENIA AND GENETICS

(Outpatient: 1-2 days) This study examines the role genes play in schizophrenia. Eligible participants have a diagnosis of schizophrenia and no serious drug or alcohol abuse. If possible, the siblings and/or parents of the individuals are invited for interviews and blood donation. Travel and lodging assistance may be available. Recruiting ages 18-55. [95-M-0150] <http://patientinfo.nimh.nih.gov/SchizophreniaAdult.aspx#161>

National Institute of Mental Health, National Institutes of Health, Department of Health and Human Services.

For more information on research conducted by the National Institute of Mental Health in Bethesda, MD click here <http://patientinfo.nimh.nih.gov>.

FUNDING INFORMATION

MODELING SOCIAL BEHAVIOR

<http://grants.nih.gov/grants/guide/pa-files/PAR-13-374.html>



National Institute
of Mental Health

The **Outreach Partnership Program** is a nationwide outreach initiative of the National Institute of Mental Health (NIMH) that enlists state and national organizations in a partnership to help close the gap between mental health research and clinical practice, inform the public about mental illnesses, and reduce the stigma and discrimination associated with mental illness. For more information about the program please visit: <http://www.nimh.nih.gov/outreach/partnership-program/index.shtml>. To subscribe to receive the **Update** every two weeks, go to: <http://www.nimh.nih.gov/outreach/partnership-program/news-and-updates-from-the-program.shtml>.

The information provided in the **Update** is intended for use by NIMH Outreach Partners, National Partners and their associates for the express purpose of exchanging information that may be useful in the development of state and local mental health outreach, information, education and partnership programs.