



UPDATE

December 15, 2014

- I. [Science and Service News Updates](#)
- II. [Resources: Publications, Toolkits, Other Resources](#)
- III. [Calendar of Events](#)
- IV. [Calls for Public Input](#)
- V. [Funding Information](#)

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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*

SOLDIERS AT INCREASED SUICIDE RISK AFTER LEAVING HOSPITAL; 12 MONTHS FOLLOWING INPATIENT PSYCHIATRIC TREATMENT IS HIGH-RISK PERIOD - NIH FUNDED STUDY

U.S. Army soldiers hospitalized with a psychiatric disorder have a significantly elevated suicide risk in the year following discharge from the hospital, according to research from the Army Study to Assess Risk and Resilience in Servicemembers (Army STARRS). The yearly suicide rate for this group, 263.9 per 100,000 soldiers, was far higher than the rate of 18.5 suicides per 100,000 in the Regular Army for the same study period, the study found.

Press Release: <http://www.nimh.nih.gov/news/science-news/2014/soldiers-at-increased-suicide-risk-after-leaving-hospital.shtml>

MEDICATIONS FOR PATIENTS WITH FIRST-EPISEDE PSYCHOSIS MAY NOT MEET GUIDELINES; RESEARCHERS CALL FOR MORE PRESCRIBER EDUCATION

Many patients with first-episode psychosis receive medications that do not comply with recommended treatment guidelines, researchers have found. People experiencing a first episode of psychosis have different treatment requirements than those with multi-episode psychosis. Current guidelines emphasize low doses of antipsychotic drugs and strategies for minimizing the side effects that might contribute to patients stopping their medication. A National Institute of Mental Health (NIMH)-funded study finds that almost 40 percent of people with first-episode psychosis in community mental health clinics across the country might benefit from medication treatment changes. The analysis of prescribing patterns for first-episode psychosis suggests that more effort is needed to promote awareness of first episode-specific medication practices at community facilities. .

Press Release: <http://www.nimh.nih.gov/news/science-news/2014/medications-for-patients-with-first-episode-psychosis-may-not-meet-guidelines.shtml>

REGULATING A SINGLE GENE MAY ALTER ADDICTION AND STRESS RESPONSES

Researchers have now used genetically engineered DNA binding proteins to target specific processes within a gene - located within a brain reward center in the mouse. By regulating the activity of this specific gene, the scientists found they were able to alter gene expression and behaviors related to addiction and stress. This technique may lead to new treatments for substance use and mental disorders. This research was funded by the National Institute on Drug Abuse (NIDA) and NIMH.

Press Release: <http://www.drugabuse.gov/news-events/news-releases/2014/12/regulating-single-gene-may-alter-addiction-stress-responses>

NIH FUNDS ROBOTS TO ASSIST PEOPLE WITH DISABILITIES; ROBOTS INTERACT WITH PATIENTS TO HELP IN REHABILITATION AND MOVEMENT

New research in robotics might help with stroke rehabilitation, guide wheelchairs, and assist children with Autism Spectrum Disorder. Projects investigating co-robotics are the focus of new funding from the National Institutes of Health (NIH). This is the third year NIH has participated in the Interagency National Robotics Initiative to support research to develop innovative co-robots — robots that work cooperatively with people. Other participants are the National Science Foundation, the National Aeronautics and Space Administration, and the United States (U.S.) Department of Agriculture. Funding for these projects totals approximately \$2.3 million over the next five years, subject to the availability of funds.

Press Release: <http://www.nih.gov/news/health/dec2014/nibib-08.htm>

NIH UPDATES DOWN SYNDROME RESEARCH PLAN; NEW DIRECTIONS FOR RESEARCH TO IMPROVE THE HEALTH OF THOSE WITH DOWN SYNDROME

The NIH recently released *Down Syndrome Directions: The NIH Research Plan on Down Syndrome*, an updated strategy to advance research related to Down syndrome. The Plan was developed by the NIH Down Syndrome Working Group with input from members of the public-private Down Syndrome Consortium, external researchers, healthcare providers, and self-advocates and families. The first NIH Down Syndrome Research Plan was released in 2007. Since then, the NIH has supported the development of new research resources, including *DS-Connect®: The Down Syndrome Registry*, and promoted increased collaboration among researchers, advocates, and families. The revised Plan encourages continued collaborations to help meet its new research goals and objectives.

Press Release: <http://www.nichd.nih.gov/news/resources/spotlight/Pages/120814-DS-research-plan.aspx>

NEW HHS GRANTS INCREASE, IMPROVE LEARNING OPPORTUNITIES FOR YOUNG CHILDREN

The U.S. Health and Human Services' (HHS) Administration for Children and Families (ACF) announced preliminary winners for its Early Head Start-Child Care Partnerships grants to improve the quality of existing child care programs and expand access to high-quality care for infants and toddlers.

Press Release: <http://www.hhs.gov/news/press/2014pres/12/20141210a.html>

FDA DRUG SAFETY COMMUNICATION: FDA REPORTING MENTAL HEALTH DRUG ZIPRASIDONE (GEODON) ASSOCIATED WITH RARE BUT POTENTIALLY FATAL SKIN REACTIONS

The U.S. Food and Drug Administration (FDA) is warning that the antipsychotic drug ziprasidone (marketed under the brand name, Geodon, and its generics) is associated with a rare but serious skin reaction that can progress to affect other parts of the body. A new warning has been added to the Geodon drug label to describe the serious condition known as Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS). Ziprasidone is an antipsychotic drug used to treat the serious mental disorders schizophrenia and bipolar I disorder. Ziprasidone helps restore certain natural substances in the brain and can decrease hallucinations, delusions, other psychotic symptoms, and mania. To work properly, ziprasidone should be taken every day as prescribed. Patients should not stop taking their medicine or change their dose without first talking to their healthcare professional.

DRESS may start as a rash that can spread to all parts of the body. It can include fever, swollen lymph nodes, and inflammation of organs such as the liver, kidney, lungs, heart, or pancreas. DRESS also causes a higher-than-normal number of a particular type of white blood cell called eosinophils in the blood. DRESS can lead to death.

RECOMMENDATION: Patients who have a fever with a rash and/or swollen lymph glands should seek urgent medical care. Healthcare professionals should immediately stop treatment with ziprasidone if DRESS is suspected. **Safety Communication:** <http://www.fda.gov/Drugs/DrugSafety/ucm426391.htm>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NIMH DIRECTOR'S BLOG: LOST IN TRANSLATION

Drug testing in mice has been a poor guide to effectiveness in humans. NIMH Director Thomas Insel talks about the need for research approaches that can more reliably guide medication development. <http://www.nimh.nih.gov/about/director/2014/lost-in-translation.shtml>

NIDA: BLENDING INITIATIVE – MOTIVATIONAL INTERVIEWING CME/CE AND PATIENT SIMULATION

These programs provide a unique forum where a continuing medical education (CME) course and patient simulation module jointly provide practical guidance for physicians and other clinicians in effective Motivational Interviewing techniques that will facilitate conversations with patients to address health risk behaviors. The CME course guides physicians and other clinicians through practical skills building and technique development using videos to model effective communication, while the Patient Simulation allows for real-time testing and reinforcement of these skills in the clinical setting.

<http://www.drugabuse.gov/blending-initiative/cme-ce-simulation>

CDC RESOURCES

DATA BRIEF: DEPRESSION IN THE U.S. HOUSEHOLD POPULATION, 2009–2012

This Centers for Disease Control and Prevention (CDC) data brief examines both depression and depressive symptom severity in the past two weeks from a symptom-based questionnaire, by demographic characteristics, functioning difficulties, and recent contact with a mental health professional. Severity is categorized as severe, moderate, mild, or no depressive symptoms. Current depression is defined as severe or moderate symptoms; no depression is defined as mild or no symptoms.

<http://www.cdc.gov/nchs/data/databriefs/db172.htm>

QUICKSTATS: AVERAGE ANNUAL RATE OF EMERGENCY DEPARTMENT VISITS FOR BIPOLAR DISORDER AMONG PERSONS AGED 15 YEARS AND OLDER

During 2010 to 2011, approximately 468,000 emergency department visits were made each year by persons aged 15 years and older with a diagnosis of bipolar disorder, an overall rate of 3.8 visits per 1,000 persons per year. The visit rate declined significantly as age increased. Persons aged 15 to 24 years had the highest rate (6.5 per 1,000), which was nearly three times the rate for persons aged 50 years and older (2.2 per 1,000). <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6349a12.htm>

SAMHSA RESOURCES

TREATING SLEEP PROBLEMS OF PEOPLE IN RECOVERY FROM SUBSTANCE USE DISORDERS

This resource discusses the relationship between sleep disturbances and substance use disorders and provides guidance on how to assess for and treat sleep problems for people in recovery. It reviews non-pharmacological as well as over-the-counter and prescription medications.

<http://store.samhsa.gov/product/Treating-Sleep-Problems-of-People-in-Recovery-From-Substance-Use-Disorders/All-New-Products/SMA14-4859>

AN INTRODUCTION TO CO-OCCURRING BORDERLINE PERSONALITY DISORDERS AND SUBSTANCE USE DISORDERS

This resource introduces professional care providers to borderline personality disorder. It covers signs and symptoms, with or without co-occurring substance use disorder; monitoring clients for self-harm and suicide; and referrals to treatment. <http://store.samhsa.gov/product/An-Introduction-to-Co-Occurring-Borderline-Personality-Disorders-and-Substance-Use-Disorders/All-New-Products/SMA14-4879>

AFFORDABLE CARE ACT (ACA) ENROLLMENT ASSISTANCE FOR LGBT COMMUNITIES

This resource guides health professionals in helping lesbian, gay, bisexual, and transgender (LGBT) people understand health insurance options, particularly mental health and substance abuse benefits and services, under the Affordable Care Act (ACA) and enroll in plans. <http://store.samhsa.gov/product/PEP14-LGBTACAENROLL>

PREVALENCE OF FETAL ALCOHOL SPECTRUM DISORDERS (FASD)

This issue of the Substance Abuse and Mental Health Services Administration (SAMHSA) *FASD in Review* examines a new article in the journal *Pediatrics* that the prevalence of FASD among school children may be significantly higher than previous estimates. The review summarizes the findings and discussions their implications for the FASD field. <http://fasdcenter.samhsa.gov/FASDResearchReview/FASDinReview.aspx>

MEDICAID COVERAGE AND FINANCING OF MEDICATIONS TO TREAT ALCOHOL AND OPIOID USE DISORDERS

This report presents information about Medicaid coverage of medication-assisted treatment for opioid and alcohol dependence. It covers treatment effectiveness and cost effectiveness as well as examples of innovative approaches in Vermont, Massachusetts, and Maryland.

<http://store.samhsa.gov/product/SMA14-4854>

SAFETY NET HEALTH PLAN EFFORTS TO INTEGRATE PHYSICAL AND BEHAVIORAL HEALTH AT COMMUNITY HEALTH CENTERS

The Association for Community Affiliated Plans and the SAMHSA-Health Resources and Services Administration Center for Integrated Health Solutions recently released a fact sheet profiling four communities that brought together teams from safety net health plans, community health centers, and community behavioral health provider organizations to integrate physical and behavioral health for Medicaid beneficiaries. Not-for-profit safety net health plans are well positioned to work collaboratively with community health and behavioral health providers to integrate primary care, mental health, and addiction services for their members. These collaborations can take a variety of approaches based on available resources, community, and population characteristics. Common themes for success highlighted in the fact sheet include building strong working relationships and measurement of quality and outcomes.

http://www.integration.samhsa.gov/integrated-care-models/Integrated_Health_Fact_Sheet_ACAP.pdf

DEPARTMENTS OF JUSTICE, EDUCATION RELEASE CORRECTIONAL EDUCATION GUIDANCE PACKAGE FOR SERVING JUVENILE JUSTICE SYSTEM-INVOLVED YOUTH

Developed through a partnership between the U.S. Departments of Justice and Education, this correction education guidance package is designed to inform the efforts of states, school districts, and juvenile justice facilities that serve system-involved youth. The package includes recommendations and federal requirements for ensuring that youth in confinement receive an education comparable to those provided in traditional public school settings. <http://www.ojjdp.gov/enews/14juvjust/141208.html>

DEPARTMENT OF JUSTICE RESOURCES

TEEN DATING VIOLENCE: HOW PEERS CAN AFFECT RISK AND PROTECTIVE FACTORS

This National Institute of Justice brief explores the latest research on teen dating relationships to uncover how peers can encourage or hinder help-seeking behavior after violence.

<https://ncjrs.gov/pdffiles1/nij/248337.pdf>

A CIRCLE OF HEALING FOR NATIVE CHILDREN ENDANGERED BY DRUGS

This seven-part video series offers examples of successful programs and practices used to help drug-endangered Native youth heal from trauma. A companion resource guide accompanies this product.

<http://www.ovc.gov/library/videoclips.html#youthvict>

EVENTS

TWITTER CHAT: CAREGIVER STRESS DURING THE HOLIDAYS

DECEMBER 17, 2014, 12:00 PM ET

Stress and anxiety can often take their toll on caregivers, and research is looking at what techniques and approaches are effective for managing these conditions. According to recent and promising research, complementary health approaches such as yoga and meditation may improve cognitive function and symptoms of depression in caregivers, and stress in more general populations. The National Center for Complementary and Alternative Medicine is hosting a Twitter chat with the National Institute on Aging to discuss how caregivers can manage their stress during this holiday season, and what the science says about the safety and efficacy of managing symptoms with mind and body practices like yoga and meditation.

<http://nccam.nih.gov/news/events/livechat?nav=upd>

WEBINAR: SOCIAL MEDIA MEASUREMENT, ANALYSIS, AND NEXT STEPS FOR IVP

DECEMBER 17, 2014, 1:00-2:00 PM ET

This is the fourth and final webinar in the series "Getting Started with Social Media for Injury and Violence Prevention (IVP)" series offered by the Safe States Alliance and CDC. Presenters will describe how to measure and analyze social media efforts as well as discuss next steps for being an active participant on social media. http://safestates.site-ym.com/events/event_details.asp?id=501905&group=

WEBINAR: EVIDENCE BASE FOR USING TECHNOLOGY SOLUTIONS IN BEHAVIORAL HEALTHCARE

DECEMBER 17, 2014, 1:00-2:30 PM ET

Recent advances in the evidence base for technology-based behavioral health applications have provided clinicians a better understanding and guidance on the integration of these tools into clinical care. Participants in this Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury webinar will learn about research findings on current technologies in use in clinical practice, such as audio conferencing, video conferencing, and virtual reality, in addition to tools available for use between patients, such as the use of websites and mobile applications and wearable sensors. Clinicians will leave this training with a review of the evidence base for using technology solutions in behavioral healthcare that will inform their clinical practice. <https://continuingeducation.dcri.duke.edu/evidence-base-using-technology-solutions-behavioral-health-care>

WEBINAR: TEXT4BABY: A RESOURCE IN YOUR COMMUNITY

DECEMBER 17, 2014, 2:00 PM ET

Participants in this HHS Office of Minority Health webinar will learn how the program, *Text4Baby*, reinforces maternal and child health education and assists with retention through social media messages and mobile reminders. <https://attendee.gotowebinar.com/register/6721055458742562561>

SAMHSA TWITTER CHAT ABOUT SUBSTANCE USE PREVENTION AND YOUR HEALTH

DECEMBER 17, 2014, 8:00-9:00 PM ET

This upcoming SAMHSA Twitter chat about substance abuse prevention will focus on supporting the behavioral health of youth in diverse communities. Join using #ChoiceChangeChat. <http://bit.ly/SAMHSAchoiceChangeChat>

WEBINAR: THE ROLE FOR THE ELECTRONIC HEALTH RECORDS IN PATIENT SAFETY: WHAT DOES THE EVIDENCE TELL US?

DECEMBER 18, 2014, 1:00–2:30 PM ET

This HHS Office of the National Coordinator for Health IT for the first webinar in a 10-part series on health information technology (IT) and patient safety. This webinar examines research on the role of health IT in adverse events. The first presentation looks at the impact of advanced electronic health records (EHRs) on adverse events reported to the Pennsylvania Patient Safety Authority. The second explores how health IT contributed to sentinel events reported to the Joint Commission. These presentations suggest that EHRs have reduced adverse events and created a new, significantly better foundation for patient safety, but have also introduced new sources of potential harm which must be addressed.

<https://attendee.gotowebinar.com/register/1922833994130616066>

WEBINAR: PEERS IN HEALTH REFORM OUTREACH AND EDUCATION

DECEMBER 18, 2014, 1:00-2:30 PM ET

The ACA is changing how Americans access healthcare. Recovery community organizations/peer-run organizations are playing increasingly vital roles in ensuring that the benefits of health reform reach individuals with behavioral health needs. These efforts include educating recovery communities about health reform, developing and refining eligibility and enrollment processes, assisting with access to primary and specialty care, identifying risks to sustaining coverage and access to care, and contributing to changes to policy and program guidelines. This webinar will highlight the efforts of SAMHSA's 2014 Peer Awards for Health Reform Education projects, focusing on what the projects learned about effective education, outreach, enrollment, and treatment access activities. Other topics will include the need to build health reform-specific organizational capacity and the potential long-term impact of health reform on access to peer recovery support services. <https://www.eventbrite.com/e/peer-involvement-in-health-reform-outreach-and-education-case-studies-from-brss-tacs-awardees-tickets-14479236787>

WEBINAR: EXPLORING THE IMPACT OF SUICIDE PREVENTION RESEARCH IN MULTIPLE SETTINGS

JANUARY 20, 2014, 2:00-3:00 PM ET

The Injury Control Research Center for Suicide Prevention (ICRC-S), a CDC-funded research center focusing on a public health approach to suicide prevention and research, will begin its third annual webinar series on January 20, 2015. The speakers for the first webinar in the series will be Eric Caine, M.D., ICRC-S Director and Chair, Department of Psychiatry, University of Rochester, and Jane Pearson, Ph.D., Chair, NIMH Suicide Research Consortium, National Institute of Mental Health. Drs. Caine and Pearson will launch this series with an overview of the impact of research on national goals for suicide prevention. They will discuss the efforts of the National Action Alliance for Suicide Prevention, the 2014 work of the Research Prioritization Task Force, and the links between research and practice.

<http://edc.adobeconnect.com/e67djhffw6h/event/registration.html>

NATIONAL DRUG FACTS WEEK 2015

JANUARY 26-FEBRUARY 1, 2015

National Drug Facts Week (NDFW) is a national health observance for teens to promote local events that use NIDA science to shatter the myths about drugs. The week brings together teens and scientific experts to shatter persistent myths about drug use and addiction. Ideas for community-based events as well as success stories from previous years are highlighted on the NDFW web portal. Last year, more than 1,000 events were held with teens throughout all states, and several internationally.

<http://teens.drugabuse.gov/national-drug-facts-week>

2015 HEALTHY AGING SUMMIT

JULY 27-28, 2015, WASHINGTON, DC

The HHS Office of Disease Prevention and Health Promotion is requesting abstracts addressing the science of healthy aging for presentation at the 2015 Healthy Aging Summit. The deadline for submission of abstracts is February 2, 2015. <http://www.2015healthyagingsummit.org>

MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION REQUESTS COMMENTS ON CHILDREN'S HEALTHCARE COVERAGE

The Medicaid and Children's Health Insurance Program (CHIP) Payment and Access Commission is interested in learning the views of stakeholder organizations on policies to help ensure affordable and adequate healthcare coverage for children. The commission would like to hear from stakeholders on the factors affecting how well exchange coverage meets children's health and developmental needs, and any changes that should occur to ensure that such needs are met. Comments are due on or before 12 noon ET, December 19, 2014. <http://www.macpac.gov/home/public-comments>

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The Agency for Healthcare Research and Quality 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:

MANAGEMENT STRATEGIES TO REDUCE PSYCHIATRIC READMISSIONS (COMMENTS ACCEPTED THROUGH DECEMBER 29, 2014)

<http://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-draft-reports/?pageaction=displayDraftCommentForm&topicid=596&productID=2015>

CALL FOR APPLICATIONS: SAMHSA'S LIFT LEADERS

SAMHSA is recruiting young emerging leaders in the field of behavioral health for the 2015 Behavioral Health Leadership Development Program (BHLDP), a component of its Project LIFT (Leadership Initiatives for Tomorrow). BHLDP is designed to increase the knowledge and skills of emerging leaders in the behavioral health field. Participants will form an interactive learning community, enhancing their own leadership competencies while learning about the policy and practice implications of health reform. SAMHSA recognizes that investments in leadership development can improve employee retention, performance, problem-solving abilities, organizational agility, and business sustainability – ultimately improving the health outcomes of individuals as well as the community's overall wellness. To qualify, individuals must be between the ages of 20 and 30 and currently working in – or committed to a future career in – the behavioral health field. There is no cost to apply or to participate. Participants are required to have a computer with high-speed Internet access, the necessary software, and a webcam. Applications are due January 12, 2015.

<http://www.liftleaders.org>

COMMENTS SOUGHT ON DRAFT POLICY: NIH TAKES STEP TO SPEED THE INITIATION OF CLINICAL RESEARCH BY ENSURING USE OF SINGLE IRB

NIH issued a draft policy to promote the use of single institutional review boards or IRBs, in multi-site clinical research studies. IRBs play a critical role in assuring the ethical conduct of clinical research, and studies must be reviewed and approved by an IRB before they can begin. When the regulations for protection of human subjects were first published, most clinical research was conducted at a single institution. Since then, the research landscape has evolved, and many studies are carried out at multiple sites and within large networks. Studies that go beyond a single site are often able to recruit more individuals from diverse populations. These multi-site studies can often generate important results in less time. However, working through IRB review at each site can add delay without increasing the protections for the research participants in the study.

The draft NIH policy proposes that all NIH-funded, multi-site studies carried out in the U.S., whether supported through grants, contracts, or the NIH intramural program, should use a single IRB. Exceptions to the policy would be allowed if local IRB review is necessary to meet the needs of specific populations or where it is required by federal, state, or tribal laws or regulations. Wider use of single IRB review in multi-site studies will help achieve greater efficiencies in the initiation of studies across NIH's entire clinical research portfolio. NIH is seeking public comments on the draft policy through January 29, 2014.

<http://www.nih.gov/news/health/dec2014/od-03.htm>

WHITE HOUSE STUDENT FILM FESTIVAL: SUBMISSIONS

The White House is seeking submissions for the second White House Student Film Festival. The theme of this year's festival is The Impact of Giving Back, and it's open to U.S. students, grades K-12. So tell a story about paying it forward, about community service, or what making a difference looks like in your eyes and through your lens. All film submissions must be received by 11:59 PM ET on January 20, 2015.

<http://www.whitehouse.gov/filmfestival>

FUNDING INFORMATION

EVALUATING INNOVATIVE AND PROMISING STRATEGIES TO PREVENT SUICIDE AMONG MIDDLE-AGED MEN

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=269965>

EVALUATING STRUCTURAL, ECONOMIC, ENVIRONMENTAL, OR POLICY PRIMARY PREVENTION STRATEGIES FOR INTIMATE PARTNER VIOLENCE AND SEXUAL VIOLENCE

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=270468>

ALCOHOL EDUCATION PROJECT GRANTS

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=269898>

SAMHSA STATEWIDE CONSUMER NETWORK PROGRAM

<http://www.samhsa.gov/grants/grant-announcements/sm-15-002>

SAMHSA STATEWIDE FAMILY NETWORK PROGRAM

<http://www.samhsa.gov/grants/grant-announcements/sm-15-001>



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 increase the public's access to science-based mental health information through partnerships with national and state organizations. 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.