



UPDATE

June 15, 2015

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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*

STUDY MAY HELP DEPARTMENT OF VETERANS AFFAIRS FIND PATIENTS WITH HIGH RISK OF SUICIDE

Clinicians are challenged every day to make difficult decisions regarding patients' suicide risk. Using Veterans Health Administration (VHA) health system electronic medical record data, Veterans Affairs and National Institute of Mental Health (NIMH) scientists were able to identify very small groups of individuals within the VHA's patient population with very high, predicted suicide risk -- most of whom had not been identified for suicide risk by clinicians. Such methods can help the VHA to target suicide prevention efforts for patients at high risk and may have more wide-ranging benefits.

Press Release: <http://www.nimh.nih.gov/news/science-news/2015/study-may-help-department-of-veterans-affairs-find-patients-with-high-risk-of-suicide.shtml>

NIH STUDY FINDS ALCOHOL USE DISORDER ON THE INCREASE

Alcohol use disorder, or AUD, is the medical diagnosis for problem drinking that causes mild to severe distress or harm. A new study supported by the National Institute on Alcohol Abuse and Alcoholism reports that nearly one-third of adults in the United States (U.S.) have an AUD at some time in their lives, but only about 20 percent seek AUD treatment. The study also reveals a significant increase in AUDs over the last decade.

Press Release: <http://www.niaaa.nih.gov/news-events/news-releases/nih-study-finds-alcohol-use-disorder-increase>

NEW REPORT SHOWS STEADY DECLINE IN UNDERAGE DRINKING FROM 2002 TO 2013; YET ALCOHOL STILL REMAINS THE MOST WIDELY USED SUBSTANCE OF ABUSE AMONG YOUTHS AGED 12 TO 20

A new report by the Substance Abuse and Mental Health Services Administration (SAMHSA) shows a significant decline in the level of past month (current) underage alcohol consumption, as well as a drop in underage binge drinking. The report shows that the level of current underage drinking among those aged 12 to 20 decreased from 28.8 percent in 2002 to 22.7 percent in 2013. Likewise, the level of current underage binge drinking also declined from 19.3 percent in 2002 to 14.2 percent in 2013. Binge drinking is defined as having five or more drinks on the same occasion (i.e., at the same time, or within a couple of hours of each other) on at least one day in the past 30 days. Despite this reduction, however, more youths aged 12 to 20 currently use alcohol (22.7 percent) than use tobacco (16.9 percent) or illicit drugs (13.6 percent).

Press Release: <http://www.samhsa.gov/newsroom/press-announcements/201506111200-2>

OPIOID EPIDEMIC: MEDICATION-ASSISTED TREATMENT NEED SIGNIFICANTLY EXCEEDS CAPACITY

A new study indicates that increased access to methadone or buprenorphine-based medication-assisted treatment (MAT) is critical to fully address the epidemic of opioid abuse and dependence in the U.S. MAT is a comprehensive approach to address substance use disorders that combines the use of medication with counseling and behavioral therapies. Despite an increase in MAT capacity nationwide in the past decade, the rate of past-year opioid abuse or dependence significantly exceeded treatment capacity each year, increasing from 634.1 per 100,000 in 2003 to 891.8 per 100,000 in 2012. The study, conducted by researchers at the Food and Drug Administration (FDA), SAMHSA, and the Centers for Disease Control and Prevention (CDC), looked at the discrepancy between the need for MAT and the capacity of treatment programs to provide MAT.

Press Release: <http://www.hhs.gov/news/press/2015pres/06/20150611a.html>

HIGH RATES OF SEXUAL VIOLENCE AGAINST CHILDREN: A GLOBAL PROBLEM

Sexual violence against children is a significant problem in many low- and middle-income countries. At least 25 percent of females and 10 percent of males experienced some form of childhood sexual violence in the majority of seven countries studied, according to findings from the *Violence Against Children Surveys* released in the CDC's *Morbidity and Mortality Weekly Report* (MMWR). Among the children who reported experiencing childhood sexual violence, fewer than 1 in 10 received supportive services, including healthcare, legal/security aid, or counseling support.

Press Release: <http://www.cdc.gov/media/releases/2015/p0525-sexual-violence.html>

NEW REPORT SHOWS INCREASE IN REPORTED ADVERSE HEALTH EFFECTS FROM SYNTHETIC CANNABINOID USE

Between January and May 2015, U.S. poison centers in 48 states reported receiving 3,572 calls related to synthetic cannabinoid use, a 229 percent increase from the 1,085 calls received during the same January through May period in 2014. The 2015 figures included a spike of 1,501 calls in April and 15 reported deaths, a three-fold increase over the five deaths that were reported in 2014. The June 12, 2015 *MMWR* includes an article that discusses the increase and the adverse health effects associated with the use of synthetic cannabinoids.

Press Release: <http://www.cdc.gov/media/releases/2015/a0611-cannabinoid-use.html>

NEW FROM NIMH

DIRECTOR'S BLOG: SOMETHING INTERESTING IS HAPPENING

A National Institutes of Health (NIH) Precision Medicine project plans to create a million person cohort that is beginning to take on something of the Uber, Facebook, and Airbnb spirit. Like these innovative companies that have grown up in a new shared economy where trust is the most important currency, the new cohort study could be a very different kind of biomedical research, also based on trust and empowered by volunteers who want to crowd source their medical data. NIMH Director Thomas Insel discusses this initiative further in his latest blog. <http://www.nimh.nih.gov/about/director/2015/something-interesting-is-happening.shtml>

SPRING 2015 INSIDE NIMH

Inside NIMH is published in conjunction with each meeting of the National Advisory Mental Health Council, which advises the Secretary of Health and Human Services (HHS), the NIH Director, and the Director of NIMH on all policies and activities relating to the conduct and support of mental health research, research training, and other programs of the Institute. This issue provides the latest on the NIMH Strategic plan and budget process as well as program updates. <http://www.nimh.nih.gov/research-priorities/inside-nimh/2015-spring-inside-nimh.shtml>

VIDEO: IPS CELLS AND ORGANOIDS-SCI-FI VS REALITY

Want to learn more about an evolving “disease-in-a-dish” technology that may bring personalized medicine closer to people suffering from mental illness? Watch Dr. David Panchision, program director for stem cell research at NIMH, discuss the promise of induced pluripotent stem cells and organoids for understanding and treating mental illness. <http://www.nimh.nih.gov/news/science-news/2015/a-patients-budding-cortex-in-a-dish.shtml>

SAMHSA INVENTORY OF DISASTER BEHAVIORAL HEALTH INTERVENTIONS

In this issue of the *Supplemental Research Bulletin*, SAMHSA's Disaster Technical Assistance Center provides an inventory of disaster behavioral health interventions that treatment providers and disaster behavioral health coordinators may find helpful in their work. Each entry includes a brief description of the intervention, indication of where and with whom the intervention can be used, and details about its research base. <http://www.samhsa.gov/sites/default/files/dtac/supplemental-research-bulletin-may-2015-disaster-behavioral-health-interventions.pdf>

NEW FROM NIH

THE FACES OF THE PRECISION MEDICINE INITIATIVE

On January 30, 2015, President Obama launched the Precision Medicine Initiative, an innovative approach that will revolutionize medicine. This week, NIH is launching a video series to explain the significance of this historic endeavor. Precision medicine is an innovative approach for disease treatment and prevention that takes into account individual variability in genes, environment, and lifestyle. The goal of precision medicine is to enable an individual's healthcare team to tailor prevention strategies and treatments to the unique characteristics of their disease. To explain exactly why this effort is so important, NIH is asking the many people involved and interested in precision medicine to weigh in. Researchers, doctors, patients, advocates, and others are sharing their thoughts. Starting this week, "The Faces of the Precision Medicine Initiative" will share what they had to say about why precision medicine is so important to the future of healthcare. <http://www.hhs.gov/blog/2015/06/12/faces-precision-medicine-initiative.html>

METHADONE MAINTENANCE IN PRISON RESULTS IN TREATMENT RETENTION, LOWER DRUG USAGE FOLLOWING RELEASE

A new study funded by the National Institute on Drug Abuse (NIDA) shows that, among people incarcerated for six months or less, those who received continued methadone maintenance while imprisoned were more likely to obtain follow-up drug treatment than those who underwent detoxification from methadone while in jail. The findings show that one month after release, participants who continued to receive doses of methadone while incarcerated were more than twice as likely to obtain treatment at a community methadone clinic after their release, compared to those who went through tapered methadone withdrawal. In addition, in the month following their release, opioid use was lower among the methadone maintenance patients (8 percent), versus the tapered withdrawal group (18 percent). Because of the high risk of relapse and fatal overdose that often occurs among inmates following release from prison, the study results emphasize the importance of connecting this population to follow-up treatment and retention. <http://www.drugabuse.gov/news-events/news-releases/2015/05/methadone-maintenance-in-prison-results-in-treatment-retention-lower-drug-usage-following-release>

PRESCRIBING LIFESAVING NALOXONE: ADDRESSING ATTITUDES OF PRIMARY CARE CLINICIANS

NIDA-funded research exploring barriers to prescribing naloxone, a safe, easy-to-use drug that can prevent opioid overdose deaths, suggests that primary healthcare providers have limited knowledge about it, and have concerns about its misuse and safety. Other perceived barriers to naloxone prescribing included insufficient time during patient appointments, inability to follow up with patients, fear of offending patients, privacy issues, and concerns that patients would be less careful in their opioid use if they possessed a perceived "antidote" to overdose. Participants also had difficulty with the concept of prescribing opioids along with an overdose medication as this seemed to send the message that a patient should not be taking the prescribed opioids. <http://www.drugabuse.gov/news-events/news-releases/2015/06/prescribing-lifesaving-naloxone-addressing-attitudes-primary-care-clinicians>

AHRQ: HOSPITAL READMISSIONS FOR PSYCHIATRIC CONDITIONS

Two new briefs from the Agency for Healthcare Research and Quality (AHRQ) examine the issue of readmissions for psychiatric hospitalization.

HOSPITAL READMISSIONS INVOLVING PSYCHIATRIC DISORDERS, 2012

This statistical brief found that 30-day readmission rates in 2012 were 15.7 percent when the primary diagnosis was schizophrenia and nine percent when the primary diagnosis involved mood disorders. This compares with a 30-day readmission rate of 3.8 percent for all other non-mental health/substance abuse conditions. <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb189-Hospital-Readmissions-Psychiatric-Disorders-2012.jsp>

MANAGEMENT STRATEGIES TO REDUCE PSYCHIATRIC READMISSIONS

This technical brief found that the availability and implementation of strategies to reduce hospital readmissions for psychiatric conditions vary widely and that these readmissions are probably undercounted. It concluded that more research is needed to determine which strategies work best to reduce readmissions for psychiatric conditions, ways to accurately measure the most meaningful outcomes, and the best ways to apply effective strategies in settings with varying resources.

<http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=2082>

NEW FROM CDC

RACIAL AND ETHNIC DISPARITIES IN MEN'S USE OF MENTAL HEALTH TREATMENTS

This report uses nationally representative data on frequency of mental health symptoms and related treatment utilization to compare men of color (i.e., non-Hispanic black and Hispanic men) with non-Hispanic white men. It also explores whether racial and ethnic disparities differ by age, health insurance coverage status, and income. <http://www.cdc.gov/nchs/data/databriefs/db206.htm>

THE STATE OF MENTAL HEALTH AND AGING IN AMERICA

This issue brief reviews existing data and lays the foundation for understanding key issues related to mental health in adults over 50. http://www.cdc.gov/aging/pdf/mental_health.pdf

NEW FROM HHS

HHS BLOG: RAISE. YOUR. VOICE.

U.S. Surgeon General Dr. Vivek H. Murthy blogs about mental illness as a pressing public health issue, and encourages everyone to speak out about it. <http://www.hhs.gov/blog/2015/06/05/raise-your-voice.html>

HHS BLOG: EVERYONE CAN HELP STOP BULLYING OF CHILDREN WITH TOURETTE SYNDROME

The theme of this year's Tourette Syndrome Awareness Month, May 15-June 15, is *Everyone Can Play a Role!* This blog post provides the facts about tics and Tourette syndrome (TS), and how anyone can play a role to stop bullying of children with TS. <http://www.hhs.gov/blog/2015/06/08/help-stop-bullying-children-tourette-syndrome.html>

USING SOCIAL MEDIA TO PROMOTE YOUTH PROGRAMS

HHS' Family and Youth Services Bureau developed a series of tutorials to help programs share their services and successes more effectively. The courses are short, online tutorial videos on how to use blogs, videos, and social media to reach target audiences. A recently added tutorial focuses on helping youth programs develop a social media presence in the field. Topics discussed include how to budget time used for social media and maintaining a consistent professional voice. <http://ncfy.acf.hhs.gov/promote-your-youth-program/social-media>

DCOE BLOG POSTS

CLINICIAN'S CORNER: TIPS TO STAY ENGAGED IN THERAPY

This Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) blog post, written for providers, describes strategies to help patients remain engaged in therapy. http://dcoe.mil/blog/15-05-29/Clinician_s_Corner_Tips_to_Stay_Engaged_in_Therapy.aspx

HOW TO IMPROVE HEALTH WITH MINDFULNESS MEDITATION

As described in previous DCoE blog posts, mindfulness meditation has gained popularity as a self-care strategy for improving psychological health. In this post, Dr. Marina Khusid, a family medicine physician and chief of Integrative Medicine with the Deployment Health Clinical Center, outlines some important distinctions between common mindfulness meditation techniques. http://dcoe.mil/blog/15-06-03/How_to_Improve_Your_Health_with_Mindfulness_Meditation.aspx

REAL WARRIORS: SIX APPS FOR STAYING MISSION READY

Mobile apps are great tools for helping individuals manage their psychological health. They can be used to support care or treatment, to connect with others for peer support, and to track and share health information with a healthcare provider. This Real Warriors article describes six apps to stay mission ready.

<http://www.realwarriors.net/active/treatment/fitnessapps.php>

EVENTS

WEBINAR: EVIDENCE-BASED PRACTICES FOR CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCE

JUNE 17, 2015, 3:00-4:30 PM ET

This SAMHSA Children's Webinar Series program will focus on early intervention of behavioral and emotional problems practices that protect children from serious consequences like isolation, substance use, suicidal thinking, school dropout, and homelessness. Panelists will discuss evidenced-based practices that have been proven effective in protecting children, including the Good Behavior Game, Parents as Teachers, and the Texas Youth Suicide Prevention Project. The webinar will provide an overview of each program, guidance on the effective implementation of these practices, and a discussion on the challenges of early intervention for children and youth.

https://nasmhpd.adobeconnect.com/evidence_reg/event/event_info.html

FACEBOOK Q&A ON ADHD

JUNE 18, 2015, 12:00-1:00 PM ET

NIMH and the National Center for Complementary and Integrative Health are hosting a Facebook Q&A on attention deficit hyperactivity disorder (ADHD). Experts from both agencies will be on hand to answer questions. <https://www.facebook.com/events/936062009791216/>

WEBINAR: MENTAL HEALTH AND THE NEW HOME- AND COMMUNITY-BASED SERVICES REGULATION

JUNE 18, 2015, 2:00-3:30 PM ET

States are currently developing transition plans to bring their Medicaid Home- and Community-Based Services systems into compliance with the new rule. This SAMHSA webinar will discuss those plans and how the mental health community can become involved in the transition planning process.

https://nasmhpd.adobeconnect.com/services_reg/event/event_info.html

WEBINAR: TRIBAL LEADERS LEARNING COMMUNITY, REKINDLING THE FIRE

JUNE 18, 2015, 3:00 PM ET

The SAMHSA Tribal Training and Technical Assistance Center is hosting this Tribal Leaders Learning Community, which offers opportunities for tribal leaders to share information with peers. Facilitators and participants will discuss best practices for increasing community involvement and policy changes that place culturally focused prevention in the forefront of tribal leadership practices. Five effective evidence-based strategies will be presented during this learning community.

http://documents.kauffmaninc.com/projects/3tac/TribalLeadersRekindling_the_Fire_Part.pdf

WEBINAR: AFTER ARREST AND JAIL: THE IMPORTANCE OF FORENSIC ASSERTIVE COMMUNITY TREATMENT

JUNE 19, 2015, 1:00-2:30 PM ET

This SAMHSA Criminal Justice Webinar Series program will provide an overview of the Rochester Forensic Assertive Community Treatment (R-FACT) program, which has been helping people with mental illness get their lives back on track after an arrest or time in jail. The program makes the proven assertive community treatment model of comprehensive care available to people who are involved in the justice system, addressing both mental health and legal problems. The program is designed to address the needs of individuals who have cycled repeatedly through jails, emergency departments, homelessness, and other costly services. Now R-FACT is one step closer to being a new evidence-based practice.

https://nasmhpd.adobeconnect.com/importance_reg/event/event_info.html

WEBINAR: CREATING A RECOVERY-ORIENTED MENTAL HEALTH WORKFORCE

JUNE 23, 2015, 1:00-2:30 PM ET

This SAMHSA Peer Webinar Series program will discuss programs in training and workforce development that have resulted in creating a recovery-oriented mental health workforce and share lessons on how communities can start to build their own workforce.

https://nasmhpd.adobeconnect.com/workforce_reg/event/event_info.html

STAKEHOLDER CALL: NEW E-LEARNING PROGRAM FOR PROMOTORES DE SALUD

JUNE 23, 2015, 2:00 PM ET

The HHS Office of Minority Health will host a stakeholder call to announce *Promoting Healthy Choices and Community Changes: an E-learning Program for Promotores de Salud*. This new e-learning program is designed to build the capacity of promotores de salud to promote individual- and community-level changes toward better health. It is available in both Spanish and English at no cost to participants. The e-learning program will provide promotores de salud with basic knowledge to: promote healthy choices at the individual and community levels; apply basic principles and strategies to motivate behavioral changes among the community members they serve; and empower those individuals to create change in their communities. Toll Free Number: 888-989-3422; Participant Passcode: 1071091

WEBINAR: GOT COVERAGE? NEXT STEPS IN USING YOUR HEALTH INSURANCE

JUNE 23, 2015, 4:00 PM ET

Many people now have health insurance, but may not know how to use it. This HHS Partnership Center webinar will discuss how to read an insurance card, how to find a doctor, what one needs to know in making an appointment, and what to do in case of a health emergency. Key terms will be discussed as well as recommended health screenings. Presenters will highlight the Coverage to Care materials on health insurance literacy during the webinar. <https://attendee.gotowebinar.com/register/8330203922760973057>

WEBINAR: WHAT RESEARCH INFRASTRUCTURE DO WE NEED TO REDUCE SUICIDAL BEHAVIOR?

JUNE 24, 2015, 2:00-3:00 PM ET

Improving the research infrastructure surrounding suicide prevention can expand knowledge to reduce suicides. Standard definitions of suicidal behavior, as well as common data elements, reviews, and analyses across settings and studies are needed to advance the state of suicide care and research. Opportunities include using 'big data' from medical records to improve risk detection, and establishing clearinghouses for policy and practice changes to be studied further. This final webinar in the series, sponsored by the National Council for Behavioral Health in collaboration with the National Action Alliance for Suicide Prevention and NIMH, will provide an overview of the current research infrastructure and the improvements that are still needed. <http://www.nimh.nih.gov/news/science-news/2015/webinar-series-suicide-prevention-action-plan-to-save-lives.shtml>

WEBINAR: ASSESSING AND REDUCING VIOLENCE IN MILITARY VETERANS

JUNE 25, 2015, 1:00-2:30 PM ET

Research shows that up to one-third of military service members and Veterans report engaging in violence or aggression toward others, highlighting the need to improve violence risk assessment. Healthcare providers have a unique opportunity to identify, treat, and refer patients who may be at high risk. This DCoE webinar discussion will review the complex link between PTSD and violent behavior in the military population, particularly when combined with alcohol misuse. The session will also address important non-post-traumatic stress disorder (PTSD) risk factors and protective factors associated with reduced risk of violence. The presenter will outline a systematic, structured process for assessing and reducing violence risk in clinical practice. http://dcoe.mil/Training/Monthly_Webinars.aspx

WEBINAR: SSI/SSDI HEARING TIPS FOR SOAR PRACTITIONERS

JUNE 25, 2015, 3:00-4:30 PM ET

This SAMHSA webinar sponsored by the SSI/SSDI Outreach, Access, and Recovery (SOAR) project will provide the tips and tools necessary to understand the Social Security Administration's Administrative Law Judge hearing process. The focus of this webinar is to describe the major activities performed by the Office of Disability Adjudication and Review (ODAR), and what is expected from the representative to prepare for and conduct a hearing in a Social Security disability claim. Speakers will include attorney representatives who will share their knowledge and experience with representing SOAR applicants with ODAR.

<https://praincevents.webex.com/praincevents/onstage/g.php?MTID=e08e53ccd4024f8f153222086beaa0d4b>

PTSD AWARENESS FACEBOOK CHAT

JUNE 26, 2:30-3:30 PM ET

DCoE will host its second annual PTSD Awareness Day Chat live on its Facebook page. The question and answer session will feature Navy Capt. Anthony Arita, clinical psychologist and director of the DCoE Deployment Health Clinical Center. Arita will answer questions submitted from service members, Veterans, family members, healthcare providers, and the general public.

http://www.dcoe.mil/MediaCenter/News/details/15-06-02/DCoE_Answers_PTSD_Questions_Live_on_Facebook.aspx

HEALTH OBSERVANCE: NATIONAL PTSD AWARENESS DAY

JUNE 27, 2015

In order to bring greater awareness to the issue of PTSD, the U.S. Senate designated June 27th as National PTSD Awareness Day. SAMHSA's National Child Traumatic Stress Network joins this effort to raise awareness about PTSD and offers resources to help educate individuals, families, professionals, policy makers, and communities about the significant impact that PTSD has on men, women, and children. Effective psychological interventions and drug treatments are available to assist those who suffer with PTSD to heal from their traumas and to lead healthy, productive lives. <http://nctsn.org/resources/public-awareness/national-ptsd-awareness-day>

WEBINAR: EVIDENCE-BASED TRAUMA-SPECIFIC INTERVENTIONS FOR PERSONS WITH BEHAVIORAL HEALTH NEEDS IN THE JUSTICE SYSTEM

JUNE 29, 2015, 2:00-3:45 PM ET

Given the high rates of traumatic experiences among persons with mental and/or substance use disorders in the justice system, trauma-specific interventions are an essential element of the recovery process. This SAMHSA's GAINS Center webinar reviews the research base on trauma-specific interventions and provides guidance on their use in treatment settings. A fact sheet will accompany the webinar as a supporting document. <http://gainscenter.samhsa.gov/eNews/may15.html>

WEBINAR: MEDICAL MONITORING IN BEHAVIORAL HEALTH: THE ROLE OF THE PSYCHIATRIC MEDICAL TEAM

JUNE 30, 1:00-2:30 PM ET

Individuals with mental health and substance use conditions are at greater risk for medical conditions than the general population. While integrating primary care into behavioral health is one solution to reducing the rates of chronic medical conditions, psychiatrists, and other behavioral health providers who operate in stand-alone mental health and addiction treatment organizations can also make strides toward identifying chronic conditions and getting their clients the treatment they need. In partnership with the American Psychiatric Association, the SAMHSA-Health Resources and Services Administration (HRSA) Center for Integrated Solutions is hosting this webinar to learn how to transfer the latest research and on-the-ground experiences in medical monitoring into implementable practices for psychiatrists and other behavioral health providers in community behavioral healthcare settings. <https://goto.webcasts.com/starthere.jsp?ei=1066523>

PUBLIC MEETING: EXPLORING NALOXONE UPTAKE AND USE

JULY 1-2, 2015, SILVER SPRING, MARYLAND

The FDA in collaboration with NIDA, CDC, SAMHSA, and HRSA will hold a public meeting to discuss increasing the use of naloxone to reduce the incidence of opioid drug overdose fatalities. During the meeting, academic and government experts, industry representatives, and patient advocates will discuss which populations are at-risk for opioid drug overdose and how everyone can work together to encourage the use of naloxone to reduce the risk of overdose from opioid drugs. The deadline for registration is June 22.

<https://www.federalregister.gov/articles/2015/05/19/2015-12061/exploring-naloxone-uptake-and-use-public-meeting-request-for-comments>

WEBINAR: EVIDENCE-BASED HOUSING APPROACHES FOR PERSONS WITH BEHAVIORAL HEALTH NEEDS IN THE JUSTICE SYSTEM

JULY 8, 2015, 2:00-3:15 PM ET

Programs that work with adults in the justice system often identify access to safe and affordable housing as their most significant challenge. This SAMHSA's GAINS Center webinar examines the evidence on the role of a variety of housing approaches in reducing criminal behavior and improving behavioral health outcomes. In addition, the webinar offers strategies that government agencies and providers can take to establish and implement effective housing options. <http://gainscenter.samhsa.gov/eNews/may15.html>

WEBINAR: THE ROLE OF PEER SUPPORT IN SUICIDE PREVENTION

JULY 13, 2015, 3:00-4:00 PM ET

This VA seminar will cover the various roles peers have in supporting individuals at high risk for suicide. The talk will include a brief review of the literature and a presentation of the framework for an ongoing pilot randomized controlled trial of peer mentorship by certified peer support specialists for reducing suicide risk following psychiatric hospitalization. <https://attendee.gotowebinar.com/register/2245480186524609794>

WEBINAR: MOTIVATIONAL INTERVIEWING FOR PERSONS WITH BEHAVIORAL HEALTH NEEDS IN THE JUSTICE SYSTEM

JULY 14, 2015, 2:00-3:15 PM ET

Motivational interviewing is a widely implemented approach for promoting engagement and adherence to treatment for people with mental and/or substance use disorders. This SAMHSA GAINS Center webinar discusses the evidence for motivational interviewing with justice-involved persons. Practical considerations for the use of motivational interviewing in mental health courts and other program models will be discussed as well. A fact sheet will accompany the webinar as a supporting document.

<http://gainscenter.samhsa.gov/eNews/may15.html>

WEBINAR: WOMEN UNBARRED: RECOVERY AND SUPPORTS FOR WOMEN INVOLVED WITH CRIMINAL JUSTICE

JULY 23, 2015, 3:00–4:30 PM ET

This session in SAMHSA's Women Matter webinar series discusses the unique experiences of women who are incarcerated, and the barriers to recovery and re-entry that women leaving incarceration often experience. Presenters will discuss effective interventions and supports for helping women to rebuild their lives as well as community programs and policies. <http://www.samhsa.gov/women-children-families/trainings/women-matter>

DCOE SUMMIT: CONTINUUM OF CARE AND CARE TRANSITIONS IN THE MILITARY HEALTH SYSTEM AT DEFENSE HEALTH HEADQUARTERS

SEPTEMBER 9-11, 2015, FALLS CHURCH, VIRGINIA

This DCoE virtual and in-person training event is geared towards professionals involved in all aspects of psychological health and traumatic brain injury (TBI) care, education, and research for the military population. The summit's psychological health and TBI tracks will address factors that challenge and facilitate the provision of quality, sustained health services across care transitions, and the continuum of care. <http://www.dcoe.mil/Training/Events/2015-Psychological-Health-and-Resilience-Summit.aspx>

REQUEST FOR INFORMATION (RFI): BUILDING AN EVIDENCE BASE FOR EFFECTIVE PSYCHIATRIC INPATIENT CARE AND ALTERNATIVE SERVICES FOR SUICIDE PREVENTION

NIMH, NIDA, SAMHSA, and the American Foundation for Suicide Prevention are seeking information on approaches to better understand: 1) what components of inpatient care are safe and effective in reducing suicide risk for various populations; 2) what are effective alternatives to inpatient care (e.g., telephone counseling, home visits, intensive day/residential treatment, types of respite care) and how they can be broadly implemented; and 3) what type of research designs could compare inpatient interventions with alternative approaches in a safe, acceptable, and fair manner. While a number of interventions for suicide attempters have been effective and even replicated, the effectiveness of inpatient care interventions or alternative approaches in reducing later morbidity (e.g., suicide attempts) and mortality (e.g., suicide deaths) remains a question for many U.S. healthcare systems. Testing the effectiveness of inpatient or alternative approaches is critical for suicidal patients as few empirically-based practices exist for acute care interventions and their follow-up care.

This RFI is intended to seek information about current practices and solicit perspectives on the need for empirical research from stakeholders who are associated with relevant systems of care (e.g., state commissioners, healthcare administrators, insurers, providers, patients, suicide attempt survivors, and family members), and who play a role in the provision of interventions for individuals at acute risk for suicide, as well as researchers focused on such interventions and services research. Responses will be accepted through August 1, 2015. <http://grants.nih.gov/grants/guide/notice-files/NOT-MH-15-019.html>

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:

COMPARATIVE EFFECTIVENESS OF STRATEGIES TO DE-ESCALATE AGGRESSIVE BEHAVIOR IN PSYCHIATRIC PATIENTS (COMMENTS ACCEPTED THROUGH JUNE 29, 2015)

<http://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-key-questions/?pageAction=displayQuestions&topicID=613&questionSet=268>

FIRST AND SECOND GENERATION ANTIPSYCHOTICS FOR CHILDREN AND YOUNG ADULTS-COMPARATIVE EFFECTIVENESS REVIEW UPDATE (COMMENTS ACCEPTED THROUGH JUNE 29, 2015)

<http://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-key-questions/?pageAction=displayQuestions&topicID=615&questionSet=270>

RFI: IHS SEEKS INPUT ABOUT THE HEALTH NEEDS OF THE AMERICAN INDIAN/ALASKA NATIVE LGBT COMMUNITY

The Indian Health Service is seeking broad public input as it begins efforts to advance and promote the health needs of the American Indian/Alaska Native Lesbian, Gay, Bisexual, and Transgender (LGBT) community. The Deadline for comments is July 6, 2015.

<https://www.federalregister.gov/articles/2015/06/05/2015-13774/notice-of-request-for-information>

RFI: NIH SCIENCE VISION FOR HEALTH DISPARITIES RESEARCH

The National Institute of Minority Health and Health Disparities (NIMHD) is embarking on a scientific planning process in collaboration with other NIH Institutes and Centers to define a vision that will guide the development of the science of health disparities research for the next decade. The NIMHD serves as the focal point at the NIH for the conduct of research, research training, capacity-building, and outreach and dissemination of minority health and health disparities information. Deadline for responses is July 31, 2015.

<http://grants.nih.gov/grants/guide/notice-files/NOT-MD-15-006.html>

SUBMIT AN INNOVATIVE TOOL OR APP TO HELP INDIVIDUALS RE-ENTERING THEIR COMMUNITY AFTER INCARCERATION

Studies show that people leaving the criminal justice system have a higher proportion of substance use and mental disorders than the general population. SAMHSA invites developers to create an innovative software-based solution, with housing, employment, prevention, treatment, and recovery information, to assist offenders and their friends, family, probation officers, jail and prison case workers, and others who help them reintegrate into their communities. No need to create new content—this is a chance to get creative with how to present existing SAMHSA content and other information. Submissions accepted through July 31, 2015. <http://offenderreintegrationtoolkit.challengepost.com/>

SUBMIT AN INNOVATIVE TOOL OR APP TO PREVENT OPIOID-RELATED OVERDOSES

Overdose is common among people who use illicit opioids such as heroin, and among those who misuse medications prescribed for pain. SAMHSA invites developers to create an innovative, software-based solution that helps people understand what to do if a family member or friend overdoses on heroin or opioid pain medications. No need to create new content—this is a chance to get creative with how to present existing opioid overdose prevention information. Submissions accepted through July 31, 2015.

<http://opioidoverdoseprevention.challengepost.com/>

FUNDING INFORMATION

CAREER DEVELOPMENT PROGRAM IN EMERGENCY CARE RESEARCH
<http://grants.nih.gov/grants/guide/rfa-files/RFA-HL-16-019.html>

DIMENSIONAL APPROACHES TO RESEARCH CLASSIFICATION IN PSYCHIATRIC DISORDERS
<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-16-510.html>

NIH TRANSFORMATIVE RESEARCH AWARDS
<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-15-005.html>

PHS 2015-02 OMNIBUS SOLICITATION OF THE NIH, CDC, FDA AND ACF FOR SMALL BUSINESS INNOVATION RESEARCH GRANT APPLICATIONS (PARENT SBIR [R43/R44])
<http://grants.nih.gov/grants/guide/pa-files/PA-15-269.html>

PHS 2015-02 OMNIBUS SOLICITATION OF THE NIH FOR SMALL BUSINESS TECHNOLOGY TRANSFER GRANT APPLICATIONS (PARENT STTR [R41/R42])
<http://grants.nih.gov/grants/guide/pa-files/PA-15-270.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 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.