



UPDATE

July 1, 2013

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

Subscribe to Receive the Update

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

Follow NIMH on Social Media

<http://twitter.com/nimhgov>
<http://www.facebook.com/nimhgov>
<http://www.youtube.com/nimhgov>

*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*

COMMUNITY-BASED TREATMENTS OFFSET DEPRESSION DISPARITIES

Improving care for depression in low-income communities -- places where such help is frequently unavailable or hard to find -- provides greater benefits to those in need when community groups such as churches and even barber shops help lead the planning process, according to a new study funded by the National Institute of Mental Health (NIMH).

Science Update and Video: <http://www.nimh.nih.gov/news/science-news/2013/community-based-treatments-offset-depression-disparities.shtml>

SKewed NORMS WEAKEN CASE FOR EARLY BRAIN OVERGROWTH IN AUTISM

Biases in standardized norms used to compare data on head size weaken evidence for early excess brain growth in autism, say NIMH intramural researchers. Their analysis of existing and new data undermines the case that had been building for such early brain enlargement as a potential biomarker that might be used in making treatment decisions. The researchers reported their findings online May 23, 2013, in the journal *Biological Psychiatry*.

Science Update: <http://www.nimh.nih.gov/news/science-news/2013/skewed-norms-weaken-case-for-early-brain-overgrowth-in-autism.shtml>

VIETNAM VETS WITH PTSD MORE THAN TWICE AS LIKELY TO HAVE HEART DISEASE

Male twin Vietnam Veterans with post-traumatic stress disorder (PTSD) were more than twice as likely as those without PTSD to develop heart disease during a 13-year period, according to a study supported by the National Institutes of Health (NIH). This is the first long-term study to measure the association between PTSD and heart disease using objective clinical diagnoses combined with cardiac imaging techniques. The findings appear online in the *Journal of the American College of Cardiology* and in the September 10 print issue.

Press Release: <http://www.nih.gov/news/health/jun2013/nhlbi-25.htm>

VA STARTS CAMPAIGN TO RAISE PTSD AWARENESS

In observance of PTSD awareness month, the Department of Veterans Affairs (VA) National Center for PTSD invites the public to participate in its "Take the Step" campaign. Throughout the month, online at www.PTSD.va.gov, the campaign has highlighted different topics so visitors can "Take the Step" to: know more about PTSD; challenge their beliefs; explore the treatment options available; and reach out to make a difference.

Press Release: <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2455>

NIH FUNDS INDUSTRY COLLABORATIONS TO IDENTIFY NEW USES FOR EXISTING COMPOUNDS

Drug discovery still entails a matter of luck. The average length of time from discovery of a possible compound to its approval is more than 13 years, and the failure rate exceeds 95 percent. And yet these are the odds for the compounds that enter the drug pipeline. For each compound that enters the drug discovery path—a costly venture averaging more than \$1 billion per successful drug—there are of thousands of compounds that remain partially developed. Hoping to increase the chances of success for these underdeveloped compounds, the NIH has funded \$12.7 million to match nine academic research groups with a selection of pharmaceutical industry compounds to explore new treatments for patients in eight disease areas, including Alzheimer’s disease, alcohol and nicotine dependence, and schizophrenia. The collaborative pilot initiative, called Discovering New Therapeutic Uses for Existing Molecules, is led by the National Center for Advancing Translational Sciences (NCATS) and funded by the NIH Common Fund.

Press Release: <http://www.nimh.nih.gov/news/science-news/2013/nih-funds-industry-collaborations-to-identify-new-uses-for-existing-compounds.shtml>

CDC FINDINGS SHOW HIGHER SUICIDE-RELATED BEHAVIORS AMONG YOUTH INVOLVED IN BULLYING

The Journal of Adolescent Health released a special issue focusing for the first time on the relationship between bullying and suicide. The special issue was assembled by an expert panel brought together by the Centers for Disease Control and Prevention (CDC). The panel looked at the latest research that examined youth involvement in bullying as a victim, perpetrator, or both and found them to be highly associated with suicidal thoughts and behaviors. The panel also examined the association of youth involved in bullying who experience suicide-related behaviors and other risk factors for suicide, such as depression, delinquency, physical and sexual abuse, and exposure to violence.

Media Advisory: <http://www.cdc.gov/media/releases/2013/a0619-bullying-suicide.html>

ESTROGEN THERAPY HAS NO LONG-TERM EFFECT ON COGNITION IN YOUNGER POSTMENOPAUSAL WOMEN: NIH-FUNDED STUDY FINDS NEITHER BENEFIT NOR RISK TO COGNITIVE FUNCTION YEARS AFTER TREATMENT

A randomized clinical trial of estrogen therapy in younger postmenopausal women, aged 50–55, has found no long-term risk or benefit to cognitive function. The NIH-supported study, reported in *JAMA Internal Medicine* on June 24, 2013, looked at women taking conjugated equine estrogens, the most common type of postmenopausal hormone therapy in the United States.

Press Release: <http://www.nih.gov/news/health/jun2013/nia-24.htm>

HHS RELEASES 2013 ALZHEIMER'S DISEASE UPDATE; PLAN UPDATED TO SHOW ACHIEVEMENTS, NEWLY SET GOALS IN RESEARCH, CARE, AND SERVICES

The U.S. Department of Health and Human Services (HHS) released the *National Plan to Address Alzheimer's Disease: 2013 Update*, a follow-up to the initial plan released in May 2012. The update reflects national progress towards accomplishing the goals set a year ago, as well as new and revised action steps. The plan, ordered under the 2011 National Alzheimer's Project Act, includes: finding ways to prevent and effectively treat Alzheimer's disease by 2025; enhancing care for Alzheimer's patients; expanding support for people with dementia and their families; improving public awareness; and carefully tracking data to support these efforts. The Plan was developed collaboratively by experts in aging and Alzheimer's disease from federal, state, private, and non-profit organizations.

Press Release: <http://www.hhs.gov/news/press/2013pres/06/20130614b.html>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NEW ON NIMH WEBSITE

MEETING SUMMARY: OUTREACH PARTNERSHIP PROGRAM 2013 ANNUAL MEETING

In March, representatives of state and national organizations, researchers, and NIMH staff gathered for the 2013 annual meeting of the NIMH Outreach Partnership Program. Outreach Partners from each state, the District of Columbia, and Puerto Rico and other participants came together to learn more about the latest scientific research and best practices in the prevention and treatment of mental disorders across the lifespan. The Partners also had the opportunity to share lessons learned with each other, and to discuss potential collaborations. <http://www.nimh.nih.gov/outreach/partnership-program/meetings/nimh-outreach-partnership-program-2013-annual-meeting-overview.shtml>

LATEST ISSUE OF OUTREACH CONNECTION

The latest edition of *Outreach Connection* is available. This issue highlights activities at the NIMH Outreach Partnership Program Annual Meeting, as well as how NIMH Outreach Partners are distributing and using NIMH information and research throughout their states and communities, and similar efforts carried out at a national level by the more than 80 National Partner organizations that participate in the Program. <http://content.govdelivery.com/bulletins/gd/USNIMH-616072>

LATEST ISSUE OF INSIDE NIMH

The latest edition of *Inside NIMH* discusses recent funding opportunities and some new initiatives the Institute is considering for the future. <http://www.nimh.nih.gov/research-priorities/inside-nimh/2013-spring-inside-nimh.shtml>

NIH RESEARCH MATTERS

BRAIN SCAN MAY PREDICT BEST DEPRESSION TREATMENT

A brain imaging technique may help predict whether people with major depression will respond best to treatment with psychotherapy or a commonly prescribed drug. The approach might eventually be used as a tool to identify treatments that are most likely to succeed.

<http://www.nih.gov/researchmatters/june2013/06242013depression.htm>

BRAIN CIRCUITS INVOLVED IN COMPULSIVE BEHAVIORS

Researchers used optogenetics to identify the brain circuits responsible for compulsive behaviors in mice. The findings could lead to new approaches for treating obsessive-compulsive disorder (OCD) and other conditions that include compulsive behavior.

<http://www.nih.gov/researchmatters/june2013/06172013compulsive.htm>

NIH ARCHIVED VIDEOCAST: ELIMINATING BULLYING THROUGH EDUCATION, PRACTICE, RESEARCH, AND ADVOCACY

In honor of National Pride Month, NIH hosted a panel discussion addressing bullying. With a particular focus on new and emerging Lesbian Gay Bisexual Transgender and Intersex (LGBTI) research, as well as various local, state, and federal public policy actions, panelists will demonstrate: 1) how bullying affects the physiological and psychological health of LGBTI youth; 2) how positive school and living environments contribute to the development of resiliency in LGBTI men, women, and youth; and 3) how the intersection of race, poverty, ability, and LGBTI status exacerbates the vulnerability of double and triple minorities.

<http://videocast.nih.gov/Summary.asp?File=18004>

NIDA SCIENCE SPOTLIGHT: TWO STUDIES HIGHLIGHT STRATEGIES TO REDUCE TEEN DRUG USE

Two studies funded by the National Institute on Drug Abuse have reported success in reducing teen drug use. One study examined the effectiveness of specific policies that limit teen access to tobacco products (e.g., ID requirements, vending machine restrictions, repackaging restrictions) on smoking in adulthood. The other study explored the effectiveness of a community-based intervention program called PROSPER in reducing substance abuse in teens up to six and a half years later. <http://www.drugabuse.gov/news-events/news-releases/2013/06/two-studies-highlight-strategies-to-reduce-teen-drug-use>

NIAAA: LATEST ISSUE OF SPECTRUM

The latest issue of this web magazine from the National Institute on Alcohol Abuse and Alcoholism features latest alcohol research findings including results from a new brain scan study which gives clues about which people in recovery are more likely to return to heavy drinking. <http://www.spectrum.niaaa.nih.gov/>

SAMHSA: NATIONAL EXPENDITURES FOR MENTAL HEALTH SERVICES AND SUBSTANCE ABUSE TREATMENT, 1986-2009

This Substance Abuse and Mental Health Services Administration (SAMHSA) report presents estimates and analyses from 1986 through 2009 on expenditures from mental health and substance abuse treatment services, sources of financing, and changes in spending over time. It also compares these expenditures with those for all health care spending. <http://store.samhsa.gov//product/SMA13-4740>

NEW FROM CDC

QUICKSTATS: RATE OF AMBULATORY-CARE VISITS FOR ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD) BY PERSONS AGED ≤18 YEARS, BY SEX

This CDC Quick Stats shows that from 2001–2002 to 2009–2010, the ambulatory-care visit rate for ADHD for females aged 18 years and younger increased by 63 percent, from 3.1 to 5 visits per 100 population. Over the same period, the change in the visit rate for males did not follow a consistent pattern; in 2009–2010, the visit rate for males was 11 per 100. Throughout the period, males were more likely than females to have an ambulatory-care visit for ADHD. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6224a8.htm>

UPDATED HEALTH EDUCATION CURRICULUM ANALYSIS TOOL

CDC's Division of Adolescent and School Health has released the updated *Health Education Curriculum Analysis Tool* (HECAT 2012). The HECAT helps school districts, schools, and others conduct a clear, complete, and consistent analysis of health education curricula based on the National Health Education Standards and CDC's Characteristics of an Effective Health Education Curriculum. The HECAT results can help schools select or develop appropriate and effective health education curricula and improve the delivery of health education. The HECAT 2012 continues to support using science to improve learning across multiple health topics, including alcohol and other drugs, healthy eating, mental and emotional health, personal health and wellness, physical activity, safety, sexual health, tobacco, and violence prevention.

<http://www.cdc.gov/healthyyouth/HECAT/index.htm>

HRSA: DEBUNK THE MYTHS: GRANT APPLICATION VIDEO SERIES

Federal grants can be excellent funding opportunities for a project, but not understanding the process can lead to a great deal of frustration. This video series developed by the Health Resources and Services Administration will debunk common myths about completing grant applications.

<http://www.hrsa.gov/grantmyths/>

INDICATORS OF SCHOOL CRIME AND SAFETY, 2012

This U.S. Department of Education report examines crime occurring in school as well as on the way to and from school, and presents data on crime and safety at school from the perspectives of students, teachers, and principals, drawing from an array of sources.

<http://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2013036>

NEW CAMPAIGN LAUNCHED TO EDUCATE AMERICANS ABOUT HEALTH INSURANCE MARKETPLACE

The Obama administration has launched a new educational campaign about the Health Insurance Marketplace. The new tools will help Americans understand their choices and select the coverage that best suits their health insurance needs when open enrollment begins on October 1, 2013. On the recently updated HealthCare.gov website, individuals can compare plans and get information about the Marketplace in their state. Customer service representatives are also available toll-free at 1-800-318-2596. People with hearing and/or speech disabilities may call using TTY/TDD technology at 1-855-889-4325.

<http://www.hhs.gov/news/press/2013pres/06/20130624a.html>

PTSD RESEARCH QUARTERLY: ACUTE STRESS DISORDER

This National Center for PTSD Research Quarterly reviews latest research about acute traumatic stress and how this is influencing the new definition of the Acute Stress Disorder diagnosis.

<http://www.ptsd.va.gov/professional/newsletters/research-quarterly/v24n1.pdf>

DCOE BLOG POSTS

PTSD: READ, LEARN, UNDERSTAND

Everyone should learn more about PTSD because a sister, battle buddy, husband, wife, or best friend could be diagnosed with this disorder. This Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury (TBI) blog post reviews a list of available resources to learn more about PTSD.

http://www.dcoe.health.mil/blog/13-06-25/PTSD_Read_Learn_Understand.aspx

CHAPLAINS DISCUSS RELIEVING TRAUMA THROUGH BODY AWARENESS

This blog post summarizes discussions from the last meeting of the DCoE Chaplain Working Group, a spiritually-focused forum of military and VA chaplains discussing deployment-related challenges. The meeting featured a discussion on “Somatic Experiencing: A Naturalistic Approach to the Healing of Trauma.” “Somatic experiencing” is a body awareness approach to trauma, based on the realization that human beings have a natural ability to overcome the effects of trauma and stress.

http://www.dcoe.health.mil/blog/13-06-24/Chaplains_Discuss_Relieving_Trauma_Through_Body_Awareness.aspx

EVENTS

WEBINAR: FACILITATING EFFECTIVE SMALL-GROUP DIALOGUES ON MENTAL HEALTH

JULY 2, 2013, 1:00 PM-2:00 PM ET

Want to facilitate an effective small-group discussion on mental health? This Community Conversations webinar will describe the role of the facilitator, walk through a typical session, and provide tips for effective facilitation. Creating Community Solutions is an important part of the National Dialogue on Mental Health.

<http://creatingcommunitysolutions.org/partners/upcoming-webinar-facilitating-effective-community-dialogues>

WEBINAR: TBI AND RISK FOR SUICIDAL THOUGHTS AND BEHAVIORS

JULY 2, 2013, 2:00 PM-3:00 PM ET

This VA webinar will include an overview of TBI and suicide, risk factors for suicidal thoughts and behaviors among military personnel and Veterans who have sustained a TBI, and implications for clinical practice. Participants will learn about the fluid vulnerability theory of suicide, an empirically-supported model of suicidal behavior, and the results of a recent study finding increased risk for suicidal ideation among military personnel who have sustained two or more TBIs during their lives.

<https://www3.gotomeeting.com/register/288752742>

WEBINAR: FAITH IN ACTION: WORKING WITH CHILDREN OF INCARCERATED PARENTS

JULY 9, 2013, 2:00 PM-3:30 PM ET

The Office of Juvenile Justice and Delinquency Prevention and the U.S. Department of Justice Center for Faith-Based and Neighborhood Partnerships will present this webinar to inform faith-based and community leaders about trends in youth delinquency, substance abuse, and poor academic attainment due to parent incarceration and resulting absence. Panelists will highlight the impacts on the health and safety of youth at risk of delinquency when parents are incarcerated and will provide resources for leaders to make a positive difference in the lives of youth and their communities. <http://ojjdp.gov/enews/13juvjust/130624.html>

WEBINAR: RECRUITING LARGE, DIVERSE NUMBERS OF PARTICIPANTS

JULY 11, 2013, 2:00 PM-3:00 PM ET

This Community Conversations webinar, a part of the National Dialogue on Mental Health, will describe a range of tried-and-true tactics for recruiting a critical mass of diverse, participants in a community. <http://creatingcommunitysolutions.org/partners/upcoming-webinar-recruiting-large-diverse-numbers-participants>

WEBINAR: UNDERSTANDING EVIDENCE FOR SUICIDE PREVENTION: CDC'S INTERACTIVE TOOL TO SUPPORT EVIDENCE-BASED DECISION MAKING

JULY 11, 2013, 3:00 PM-4:30 PM ET

This Suicide Prevention Resource Center Training Institute webinar will provide an overview of *Understanding Evidence*, a new interactive web resource developed by the CDC's Division of Violence Prevention that supports public health practitioners in making evidence-informed decisions. The goal of evidence-based decision making is to bring a high standard of research evidence into the decision-making process while taking into account the contextual and experiential factors that influence decisions. This webinar will also provide real-world scenarios illustrating how practitioners, coalitions, and evaluators can use the tool to strengthen practice and evaluation of suicide prevention strategies. <http://www.sprc.org/training-institute/r2p-webinars/understanding-evidence-suicide-prevention-cdcs-interactive-tool-supp>

UNWRAPPING WRAP®: UTILIZING WELLNESS RECOVERY ACTION PLANS (WRAP®) TO PROMOTE THE RECOVERY OF JUSTICE-INVOLVED CONSUMERS--NEW DATE

JULY 18, 2013, 3:00 PM-5:00 PM ET

Wellness Recovery Action Plans® (WRAP®) are becoming increasingly available to consumers who are involved in the criminal justice system. They are being used by consumers in multiple settings, including jails, prisons, and reentry programs; those using WRAP® report that it has helped them successfully cope with many of the stressors of incarceration and reentry back into the community, and the setting of personal recovery goals. This SAMSHA GAINS Center webinar will highlight several innovative programs across the nation that are offering WRAP® and discuss effective strategies for integrating WRAP® in a variety of criminal justice settings. <https://www.mymeetings.com/nc/join.php?i=PW2670172&p=WRAP&t=c>
To call-in for audio, dial 888-677-3788; Passcode: WRAP

WEBINAR: BUILDING COMMUNITY RESILIENCY AND HEALING: PREPARING FOR, RESPONDING TO, AND RECOVERING FROM COMMUNITY TRAUMA AND DISASTERS

JULY 23, 2013, 11:00 AM-12:45 PM ET

During this SAMHSA webinar, participants will hear four speakers describe how communities can work together before, during, and after disasters or other traumatic events to build resilience and encourage personal and community healing. Participants will learn about Federal Emergency Management Agency (FEMA) initiatives that help those with mental health problems and other disabilities prepare for, respond to, and recover from disasters, including how FEMA continues to support peers in New Jersey in helping others recover. In addition, participants will learn about the valuable leadership role peers played in post-Hurricane Katrina community healing efforts and about the development of Emotional CPR (eCPR), a simple yet powerful community-building tool that teaches people how to support each other through emotional crisis. The webinar will also feature how the community leaders of Omaha, NE, are addressing gun violence as a public health problem through immediate response activities, ongoing recovery, survivor empowerment, and their recent adoption of eCPR.

<http://promoteacceptance.samhsa.gov/teleconferences/archive/training/teleconference07232013.aspx>

RECOVERY MONTH

SEPTEMBER 2013

Recovery Month promotes the societal benefits of prevention, treatment, and recovery for mental and substance use disorders, celebrates people in recovery, lauds the contributions of treatment and service providers, and promotes the message that recovery in all its forms is possible. Recovery Month spreads the positive message that behavioral health is essential to overall health, that prevention works, treatment is effective, and people can and do recover. <http://recoverymonth.gov/>

SAMHSA SEEKS PUBLIC COMMENT ON FEDERAL GUIDELINES FOR OPIOID TREATMENT

SAMHSA is seeking public comments on the *Federal Guidelines for Opioid Treatment*. SAMHSA published this preliminary set of guidelines to provide more detailed information to opioid treatment programs (OTP), and organizations that accreditate them, about what they need to comply with new requirements under the Code of Federal Regulations (42 CFR Part 8). As part of its effort to finalize the guidelines, SAMHSA is asking representatives from OTPs, accreditation organizations, patients groups, the medical community and other interested members of the public to review and comment on these preliminary guidelines. All comments submitted by the deadline of July 16, 2013 will be carefully considered.

<http://www.samhsa.gov/newsroom/advisories/1306274327.aspx>

CHALLENGE.GOV: DEVELOP A SUICIDE PREVENTION APP

The "Continuity of Care and Follow-Up App Challenge" challenges individuals and organizations with the development of an application (app) for a mobile handheld device. The app will provide linkages to continuity of care and follow-up care for a person at risk for suicide who was discharged from an inpatient unit or ED. Proposed activities can include, but are not limited to, the following: Live chatting via the National Suicide Prevention Lifeline website; Safety planning; SMS (short message service) functionality; Scheduling functionality and appointment reminders; and Mapping/transportation functionality that shows locations of health care resources. Innovation is highly encouraged. At a minimum, entrants must include safety planning and utilize two resources to provide users with access to services through the crisis centers within the National Suicide Prevention Lifeline and the SAMHSA Treatment Locator. The top three entrants will be eligible for a total of \$100,000.

Note: SAMHSA is not looking for an application that simply connects a user to a crisis line via a single button; that functionality is found in a number of other suicide prevention applications. Deadline for submission is August 9, 2013 at 5:00PM ET. <http://suicidepreventionapp.challenge.gov/>

NATIONWIDE RECRUITMENT: BIPOLAR DISORDER PEDIATRIC RESEARCH STUDY TREATMENT OF SEVERE MOOD DYSREGULATION (SMD)

(Inpatient: 12 to 15 weeks)

This study tests the efficacy of different treatments for decreasing irritability in children with severe mood and behavioral problems. Participants have symptoms of severe irritability and are not doing well on their current medications. The child must be currently in treatment with a physician, medically healthy, and not currently hospitalized, psychotic, or suicidal. The study includes day or full hospitalization to discontinue medication, followed by either methylphenidate plus citalopram, or methylphenidate plus placebo. Recruiting ages 7-17. [09-M-0034] <http://patientinfo.nimh.nih.gov/BipolarDisorderPediatric.aspx>

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>.

NEW ALZHEIMER'S DISEASE NEUROIMAGING STUDIES SEEK VOLUNTEERS WITH MEMORY CONCERNS AND VIETNAM VETERANS

The Alzheimer's Disease Neuroimaging Initiative (ADNI), a landmark study in the early detection of Alzheimer's, is seeking volunteers for two new studies. For the first study, researchers are recruiting people 65 to 90 years old with a "significant memory concern," but no signs of memory loss or other cognitive impairment. The volunteers will help scientists define the biological markers and structural brain changes of Alzheimer's, which can appear years before symptoms become evident. Volunteers must have no significant problems with cognitive function or the ability to perform everyday activities. They will undergo neurological testing and brain imaging. The study is being conducted at 54 sites in the United States and five in Canada. For specific eligibility criteria, contact information for each study site, and other details call 1-800-438-4380, or visit: <http://www.nia.nih.gov/alzheimers/clinical-trials/alzheimers-disease-neuroimaging-initiative-2-adni2>

Another new ADNI study will examine the possible connections between TBI, PTSD, and signs of Alzheimer's disease in Vietnam War Veterans as they age. Researchers will examine the results of brain scans and cognitive tests as well as changes in cerebrospinal fluid over time. The study is the first step toward a larger, more comprehensive study of dementia risk factors in Veterans. A Study of Brain Aging in Vietnam War Veterans (DOD-ADNI) will take place at ADNI sites nationwide. The University of California, San Francisco, has begun recruiting, and other sites will begin this spring. For more information, contact Jacqueline Hayes of the San Francisco Veterans Administration office at Jacqueline.Hayes@va.gov, or call 1-415-221-4810, extension 4593. <http://www.clinicaltrials.gov/ct2/show/NCT01687153>

FUNDING INFORMATION

NATIVE AMERICAN RESEARCH CENTERS FOR HEALTH

<http://grants.nih.gov/grants/guide/pa-files/PA-13-239.html>

RESEARCH TO CHARACTERIZE AND REDUCE STIGMA TO IMPROVE HEALTH

<http://grants.nih.gov/grants/guide/pa-files/PA-13-246.html> (R21)

<http://grants.nih.gov/grants/guide/pa-files/PA-13-247.html> (R03)

<http://grants.nih.gov/grants/guide/pa-files/PA-13-248.html> (R01)

UNVEILING THE GENOME: GENETIC ARCHITECTURE OF SEVERE MENTAL DISORDERS REVEALED

<http://grants.nih.gov/grants/guide/pa-files/PA-13-241.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.