



UPDATE

August 15, 2013

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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*

PRESIDENT OBAMA'S EXECUTIVE ORDER LEADS TO NATIONAL RESEARCH ACTION PLAN

President Obama announced the National Research Action Plan (NRAP). NRAP is a coordinated effort by the Departments of Defense (DoD), Veterans Affairs (VA), Health and Human Services (HHS), and Education (ED) in response to last year's Executive Order that called for improved access to mental health services for Veterans, service members, and military families. NRAP provides a comprehensive approach to accelerating research on traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) as well as strategies for preventing suicide among Veterans and active duty personnel.

Science News: <http://www.nimh.nih.gov/news/science-news/2013/president-obamas-executive-order-leads-to-national-research-action-plan.shtml>

DOD, VA ESTABLISH TWO MULTI-INSTITUTIONAL CONSORTIA TO RESEARCH PTSD AND TBI

In response to President Obama's Executive Order, the DoD and VA highlighted the establishment of two joint research consortia, at a combined investment of \$107 million to research the diagnosis and treatment of PTSD and mild traumatic brain injury (mTBI) over a five-year period. The Consortium to Alleviate PTSD will attempt to develop the most effective diagnostic, prognostic, novel treatment, and rehabilitative strategies to treat acute PTSD and prevent chronic PTSD. The Chronic Effects of Neurotrauma Consortium will examine the factors which influence the chronic effects of mTBI and common comorbidities in order to improve diagnostic and treatment options. A key point will be to further the understanding of the relationship between mTBI and neurodegenerative disease.

Press Release: <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2469>

NEW DATA REVEAL EXTENT OF GENETIC OVERLAP BETWEEN MAJOR MENTAL DISORDERS; SCHIZOPHRENIA, BIPOLAR DISORDER SHARE THE MOST COMMON GENETIC VARIATION

The largest genome-wide study of its kind has determined how much five major mental illnesses are traceable to the same common inherited genetic variations. Researchers funded in part by the National Institutes of Health (NIH) found that the overlap was highest between schizophrenia and bipolar disorder; moderate for bipolar disorder and depression and for ADHD and depression; and low between schizophrenia and autism. Overall, common genetic variation accounted for 17 to 28 percent of risk for the illnesses.

Press Release: <http://www.nimh.nih.gov/news/science-news/2013/new-data-reveal-extent-of-genetic-overlap-between-major-mental-disorders.shtml>

STRAY PRENATAL GENE NETWORK SUSPECTED IN SCHIZOPHRENIA; MAY DISRUPT BIRTH OF NEW NEURONS IN PREFRONTAL CORTEX

Researchers have reverse-engineered the outlines of a disrupted prenatal gene network in schizophrenia, by tracing spontaneous mutations to where and when they likely cause damage in the brain. Some people with the brain disorder may suffer from impaired birth of new neurons, or neurogenesis, in the front of their brain during prenatal development, suggests the NIH-funded study.

Press Release: <http://www.nimh.nih.gov/news/science-news/2013/stray-prenatal-gene-network-suspected-in-schizophrenia.shtml>

GENE COMBINATIONS HELP PREDICT TREATMENT SUCCESS FOR ALCOHOLISM MEDICATION; NIH-FUNDED STUDY SAYS FIVE-MARKER GENOTYPE PANEL CAN GUIDE ONDANSETRON USE

An experimental treatment for alcohol dependence works better in individuals who possess specific combinations of genes that regulate the function and binding of serotonin, a brain chemical affected by the treatment, according to a study supported by NIH. A report of the finding appears online in the *American Journal of Psychiatry*.

Press Release: <http://www.niaaa.nih.gov/news-events/news-releases/gene-combinations-alcoholism-medication>

NIH STUDY EXPLAINS NEUROSCIENCE OF HABIT BREAKING

Recent research from the National Institute on Alcohol Abuse and Alcoholism (NIAAA) sheds new light on habitual behaviors, specifically the circuits in the brain that allow mice to break from routine actions. Such shifting between old habits and new behavior aimed at accomplishing a particular goal are critical to flexible decision-making in everyday life. It also has important implications for mental health and substance abuse interventions. The inability to shift between routine behavior and new goal-directed actions may underlie disorders such as addiction and obsessive compulsive disorder.

Research News: <http://www.niaaa.nih.gov/research/niaaa-research-highlights/neuroscience-habit-breaking>

NEW INSIGHT ON HOW THE BRAIN FORMS HABITS

New data offers a glimpse into the neurobiological mechanisms underlying the formation of habitual actions, such as addiction to alcohol. In a study conducted in mice and rats, scientists in NIAAA's Laboratory for Integrative Neuroscience examined the cellular basis for learning and memory in the dorsolateral striatum, a part of the brain involved in habit learning. A particular receptor in the dorsolateral striatum, the cannabinoid type 1 receptor (CB1), is critical for habit learning.

Research News: <http://www.niaaa.nih.gov/research/niaaa-research-highlights/new-insight-how-brain-forms-habits>

STIMULANT-RELATED EMERGENCY DEPARTMENT VISITS RISE 300 PERCENT AMONG YOUNGER ADULTS

A new report by the Substance Abuse and Mental Health Services Administration (SAMHSA) shows that some drug-related emergency department (ED) visits increased by 300 percent -- from 5,605 visits in 2005 to 22,949 visits in 2011. These visits, made by adults aged 18 to 34, were related to the nonmedical use of central nervous system (CNS) stimulants. On average, about 30 percent of these visits also involved alcohol. In 2011 there were approximately 1.24 million ED visits related to the nonmedical use of pharmaceuticals, which include prescription and over-the-counter medications as well as supplements.

Press Release: <http://www.samhsa.gov/newsroom/advisories/1308080356.aspx>

NEW SAMHSA REPORT SHOWS WHEN TIMES ARE TOUGH, PUBLIC FUNDING FOR BEHAVIORAL HEALTH TREATMENT IS EVEN MORE CRITICAL

A new SAMHSA report shows the importance of public funding for mental health services and substance abuse during difficult economic times, when it helps those who might otherwise be unable to afford the help they need. The *National Expenditures for Mental Health Services and Substance Abuse Treatment, 1986-2009* shows that the annual growth rate for overall spending for the treatment of mental illness and substance use disorders was 6.1 percent from 2004-2007, before the recession. From 2007-2009, during the recession, that growth rate fell to 4.3 percent. This 1.8 percentage point decrease was driven primarily by broader spending changes on all health care by private insurance and in state and local spending (including the state share of Medicaid) during the recession. In the midst of this decrease, an increased federal Medicaid match helped reduce state costs, which allowed State funds to support behavioral health programs during the recession that otherwise might have faced budget cuts

Press Release: <http://www.samhsa.gov/newsroom/advisories/1308140801.aspx>

NIH LAUNCHES NEUROLOGICAL DRUG DEVELOPMENT PROJECTS; NEW PROJECTS WILL TARGET FRAGILE X SYNDROME, NICOTINE ADDICTION, AND AGE-RELATED MACULAR DEGENERATION

NIH has launched three innovative projects that will focus on development of therapeutics for Fragile X syndrome, nicotine addiction, and age-related macular degeneration. These projects are funded through the NIH Blueprint Neurotherapeutics Network which provides access to a variety of drug development resources. The purpose of the NIH Blueprint is to provide in-depth research capabilities to increase the success rate of innovative drug discovery efforts. The program uses a virtual pharma model to provide researchers with access to support and resources that have been traditionally available to large pharmaceutical companies.

Press Release: <http://www.nih.gov/news/health/jul2013/ninds-31.htm>

NEW ON NIMH WEBSITE

HEALING INVISIBLE WOUNDS: AN ACTION PLAN

In his blog, National Institute of Mental Health (NIMH) Director Thomas Insel talks about NRAP, an effort announced by President Obama aimed at improving prevention, diagnosis, and treatment of mental health conditions and TBI in military personnel. <http://www.nimh.nih.gov/about/director/2013/healing-invisible-wounds-an-action-plan.shtml>

A SAMPLING OF SUMMER SCIENCE

NIMH Director Thomas Insel reports in his blog about intriguing findings published this summer on the genes and disruptions in brain circuitry involved in schizophrenia. <http://www.nimh.nih.gov/about/director/2013/a-sampling-of-summer-science.shtml>

GETTING SERIOUS ABOUT MENTAL ILLNESSES

NIMH Director Thomas Insel explains the nuances of the term, “serious mental illness” (SMI) in this recent blog post. <http://www.nimh.nih.gov/about/director/2013/getting-serious-about-mental-illnesses.shtml>

VIDEO: INTRODUCTION TO RESEARCH DOMAIN CRITERIA PROJECT

Bruce Cuthbert, Ph.D., director, NIMH Division of Translational Research and Treatment Development, discusses the Research Domain Criteria (RDoC) initiative, which he coordinates. This long-term project is incorporating genetics, imaging, cognitive science, and other levels of information to lay the foundation for a new mental disorders classification system. <http://www.nimh.nih.gov/news/science-news/2013/introduction-to-rdoc.shtml>

NIH RESEARCH MATTERS: MUTATED GENES IN SCHIZOPHRENIA MAP TO BRAIN NETWORKS

Researchers found that people with schizophrenia have a high number of spontaneous mutations in genes that form a network in the front region of the brain. The findings reveal further clues about the causes of the disorder. <http://www.nih.gov/researchmatters/august2013/08122013schizophrenia.htm>

NIH ISSUES ONLINE COURSE ON SCREENING YOUTH FOR ALCOHOL PROBLEMS

A new online training course will help healthcare professionals conduct fast, evidence-based alcohol screening and brief intervention with youth. NIAAA produced the course jointly with Medscape, a leading provider of online continuing medical education. <http://www.nih.gov/news/health/aug2013/niaaa-12.htm>

NEW FROM SAMHSA

LATEST SAMHSA NEWS--MENTAL HEALTH CONFERENCE CONVENED

The latest *SAMHSA News* features a discussion of the landmark National Conference on Mental Health recently held at the White House. The issue also includes a discussion by SAMHSA Administrator Pamela Hyde about the launch of the National Conversation on Mental Health.

http://www.samhsa.gov/samhsaNewsletter/Volume_21_Number_3/default.aspx

MEDICAID HANDBOOK: INTERFACE WITH BEHAVIORAL HEALTH SERVICES

This handbook reviews Medicaid and its role in financing services and treatment for mental and substance use disorders. It discusses services included in state Medicaid plans, the role of the provider, reimbursement, and other factors related to Medicaid. <http://store.samhsa.gov//product/SMA13-4773>

WEBPAGES: BRINGING RECOVERY SUPPORTS TO SCALE TECHNICAL ASSISTANCE CENTER STRATEGY

SAMHSA has launched webpages for the Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS). Learn about BRSS TACS funding opportunities, how to request training and technical assistance, scan the ever-growing Recovery Library, or learn more about what other organizations, states, and systems are doing to implement recovery concepts, policies, practices, and services.

<http://www.samhsa.gov/brss-tacs/>

PEER SUPPORT IN BEHAVIORAL HEALTH AND ITS EMERGING PRACTICE STANDARDS

Materials are available for the Recovery to Practice August webinar on peer support in behavioral health.

<http://www.samhsa.gov/recoverytopractice/RTPResources.aspx>

LATEST ISSUE OF IMPACT—CREATING SECONDARY TRAUMATIC STRESS-INFORMED ORGANIZATIONS

The 2013 Summer Issue of *IMPACT*, the quarterly newsletter of the National Child Traumatic Stress Network (NCTSN), is now available. This issue showcases grantees that are community-based organizations which provide and evaluate direct services to children and families within child-serving systems. The issue also addresses the importance of creating a secondary traumatic stress-informed organization and provides a perspective on historical trauma.

http://www.nctsn.org/sites/default/files/assets/pdfs/newsletters/impact_summber_2013.pdf

YOUNG ADULTS IN RECOVERY: MEETING THE NEEDS OF THE “MILLENNIAL GENERATION”

This Recovery Month web show focuses on the particular needs and preferences of young adults as they engage in treatment for mental and substance use disorders and follows their journey of recovery. Effective strategies for preventing young adults from initiating substance use, escalating their substance use, or developing mental disorders are also explored. Young adults have been raised in an era in which the Internet provides vast quantities of information with rapid access to this information facilitated by mobile technologies. Also, these lifestyle factors—which have strong implications for prevention strategies, treatment approaches, and recovery systems for this age group—are examined.

<http://www.recoverymonth.gov/Resources-Catalog/2013/Webcast/08-Young-Adults-in-Recovery.aspx>

CDC REPORTS

FIREARM HOMICIDES AND SUICIDES IN MAJOR METROPOLITAN AREAS — UNITED STATES, 2006–2007 AND 2009–2010

This study from the Centers for Disease Control and Prevention (CDC) reported that firearm suicide rates increased in a majority of the 50 most populous metropolitan statistical areas while firearm homicide rates decreased in the majority of these areas.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6230a1.htm>

REDUCING SEVERE TBI IN THE UNITED STATES

TBI increases risk for suicidal behavior. These guidelines discuss primary prevention, approaches to rehabilitation/reintegration, and early management for TBI. Published in *Morbidity and Mortality Weekly Report (MMWR)*, this report is part of the series Grand Rounds, monthly CDC webcasts on high-profile issues in public health science, practice, and policy. The report concludes that TBI can be prevented through available interventions, but requires a coordinated collaborative approach, including efforts at federal, state, local, and community levels. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6227a2.htm>

NEW HIGHER EDUCATION ONLINE RESOURCE

The ED and SAMHSA’s National Center on Safe Supportive Learning Environments (NCSSLE) has launched its new website with a landing page dedicated to higher education concerns. Learn about research, field practice, and resources promoting safe, healthy, and learning-conducive environments within college and university settings. <http://safesupportiveschools.ed.gov/training-technical-assistance/education-level/higher-education>

AHRQ RESOURCES

CONTINUING MEDICAL EDUCATION ACTIVITY: TREATMENT FOR DEPRESSION AFTER UNSATISFACTORY RESPONSE TO SSRIS IN ADULTS AND ADOLESCENTS

This continuing medical education (CME) activity is designed to meet the educational needs of primary care clinicians, psychiatrists, and other specialists who care for patients with general medical conditions and depression. The Agency for Healthcare Research and Quality's Effective Health Care Program developed a systematic review of 44 clinical studies that examined the comparative effectiveness, benefits, and adverse effects of interventions for patients who have an unsatisfactory response to treatment with a selective serotonin reuptake inhibitor used for the treatment of major depressive disorder in adults and adolescents. This CME activity summarizes the findings from this report and is provided to inform discussions of options with patients, to assist in decisionmaking along with consideration of a patient's values and preferences, and should not be construed to represent clinical recommendations or guidelines.

http://www.effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?pageaction=displaycmeactivity&activityID=346&cmepage=cme_info

SMOKELESS TOBACCO USE IN NATIVE AMERICANS LINKED TO PTSD

Among various racial/ethnic groups, Native Americans have the highest rate of smokeless tobacco (ST) use. Chewing tobacco can lead to a host of health conditions, including oral cancers and gum disease. A recent study of two Native American tribes found an increased use of ST in Native Americans with PTSD from the Northern Plains tribe; however, it found no significant association between ST use and PTSD among those from the Southwest tribe. <http://www.ahrq.gov/news/newsletters/research-activities/13aug/0813RA18.html>

NATIONAL PARTNERSHIP FOR ACTION TO END HEALTH DISPARITIES BLOG POSTS

WHAT DO THE NEW CLAS STANDARDS MEAN FOR BEHAVIORAL HEALTH?

This blog post reviews what the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS standards) mean for behavioral healthcare systems and practitioners. In April, the HHS' Office of Minority Health unveiled the enhanced CLAS Standards, expanding the definition and scope of the first CLAS standards issued in 2000. The CLAS standards are intended to advance health equity, improve quality, and help eliminate healthcare disparities by providing a blueprint for individuals and healthcare organizations to implement culturally and linguistically appropriate services.

<https://minorityhealth.hhs.gov/npa/blog/BlogPost.aspx?BlogType=P&BlogID=2808>

THROUGH THE SPECTRUM: HEALTH DISPARITIES AND AUTISM

This National Partner for Action to End Health Disparities blog post reviews the disparities of autism diagnosis and quality of care.

<https://minorityhealth.hhs.gov/npa/blog/BlogPost.aspx?BlogType=P&BlogID=2834>

A SPOTLIGHT ON MINORITY MENTAL HEALTH

In recognition of National Minority Mental Health Awareness Month, Nadine Gracia, Deputy Assistant Secretary for Minority Health in the HHS Office of Minority Health discusses the costly burden of mental health problems for diverse communities and reviews how the CLAS standards and the Affordable Care Act will help reduce disparities and improve quality of care.

<http://minorityhealth.hhs.gov/npa/blog/BlogPost.aspx?BlogID=2665>

NEW FROM REAL WARRIORS CAMPAIGN

QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

Standard Form 86 (SF86), "Questionnaire for National Security Positions," is the form that is used to apply for security clearances. This article explains what to consider when answering Question 21 of the form, which addresses psychological and emotional health history. The article shows that service members and Veterans can reach out for psychological support or care with successful outcomes, including maintaining their security clearance, and continuing to succeed in their careers.

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

NAVIGATING THE INTEGRATED DISABILITY EVALUATION SYSTEM

If a service member's military service is cut short because of a service-related disability that occurred in the line of duty, the service member may be eligible to receive benefits. Federal law and military regulations require a thorough review of the case through the Integrated Disability Evaluation System (IDES) to determine the level of disability and entitlement to disability retirement. Understanding the IDDES process can be complicated and even stressful at times. This article provides an overview of the different phases of the IDDES and support resources that can help reduce the stress of navigating the system.

<http://www.realwarriors.net/active/disability/disability.php>

DCOE BLOG POSTS

TAKING TOTAL CHARGE OF YOUR HEALTH

Fitness may mean different things to different people. One approach is to look at it holistically — mind, body, and spirit. The DoD uses a holistic approach and framework called, "Total Force Fitness" to support warriors' health and wellness. This Defense Centers of Excellence for Psychological Health and TBI (DCoE) blog post highlights information and resources geared toward service members that discuss the importance of a fit mind, body, and spirit for overall health and resilience. http://www.dcoe.health.mil/blog/13-08-08/Taking_Total_Charge_of_Your_Health.aspx

THE SHAME OF EMBARRASSMENT

As a caregiver for a husband with TBI, Rosemary Rawlins shares insights garnered from her own experiences along with insights from other caregivers and family members in her blog, “Learning by Accident,” on BrainLine. In this DCoE blog post, Rosemary shares advice on coping with a particularly awkward and often shameful feeling that sometimes surfaces when caring for a loved one with TBI — embarrassment.

http://www.dcoe.health.mil/blog/13-08-13/The_Shame_of_Embarrassment.aspx

VA: IMPROVING CARE FOR SERIOUS MENTAL ILLNESS

This VA Health Services Research and Development (HSR&D) spotlight describes the Mental Health Quality Enhancement Research Initiative (MH-QUERI), which is committed to improving the quality of care, outcomes, and health-related quality of life for Veterans with mental illness. For example, MH-QUERI's research in the area of improving physical health treatment and outcomes for Veterans with SMI has culminated in several national impacts. The most common causes of morbidity and mortality among Veterans with SMI include cardiovascular disease, which can be exacerbated by the metabolic side effects of antipsychotics. MH-QUERI's work in improving metabolic side-effect monitoring and management for Veterans taking antipsychotics informed the MIAMI Project (MIRECC Initiative on Antipsychotic Management Improvement), helping them train VA clinicians on how to safely prescribe antipsychotics for Veterans and improve care in this area. <http://www.hsr.dresearch.va.gov/news/feature/smi-0813.cfm>

EVENTS

WEBINAR: TRAUMA-INFORMED AND SOLUTION-FOCUSED DOMESTIC VIOLENCE PRACTICE IN CHILD PROTECTIVE SERVICES: SAFETY PLANNING AND CASE PLANNING

AUGUST 20, 2013, 3:00-4:30 PM ET

The National Resource Center for Child Protective Services is hosting this webinar as part of its *Safety Organized, Trauma-informed, Solution-focused Approaches to Domestic Violence in Child Protection* webinar series. Presenters will discuss trauma-informed, solution-focused strategies for effective, family-centered safety and case planning in situations involving domestic violence. <http://nrccps.org/peer-networks/slo-support/slo-webinars/>

WEBINAR: IMPLEMENTING PSYCHOLOGICAL FIRST AID IN SCHOOL AND POSTSECONDARY SETTINGS

AUGUST 21, 2013, 1:00-2:00 PM ET

This webinar by the ED Readiness and Emergency Management for Schools Technical Assistance Center will provide participants with a description of Psychological First Aid (PFA), its role following an emergency, and its use in both the K-12 and higher education settings. Additionally, strategies for developing the necessary supports prior to an emergency and for implementing PFA when needed will be presented.

<http://remstacenter.org/webinars/WebinarRegistration.aspx?WebinarID=43>

WEBINAR: CULTURALLY APPROPRIATE STRATEGIES FOR PREVENTION-BASED WORK IN TRIBAL COMMUNITIES

AUGUST 21, 2013, 3:00-4:30 PM ET

SAMHSA, in partnership with the National Association of State Mental Health Program Directors, is hosting this webinar as part of a series focusing on key prevention-related topics to further expand the national dialogue on prevention. Presenting are Spero Manson, Ph.D., director of the Center for American Indian and Alaska Native Health, University of Colorado, and Beverly Cotton, R.N., M.S.N., CPNP, acting director of behavioral health at the Indian Health Service.

<http://www.nasmhpd.org/content/Pat's%20list%20of%20webinars%20.pdf>

TELECONFERENCE: THE ADA AND EXPANDING USE OF PSYCHIATRIC SERVICE DOGS

AUGUST 26, 2013, 11:00 AM-12:30 PM ET; JOIN BY PHONE: 1-888-769-9722, PASSCODE: 5281183

SAMHSA is looking back at the advances of the Americans With Disabilities Act (ADA) and what the future may hold for people with behavioral health conditions with a teleconference panel discussion series focused on exploring the ADA's impact on the work of SAMHSA, opportunities created by the ADA for recovery and community integration, and ongoing challenges for those with behavioral health concerns. This interactive session will include: 1) an overview of the ADA's impact on the use of service animals for people with disabilities related to behavioral health conditions; 2) what is a psychiatric service dog (PSD) and how have PSDs impacted community integration; 3) the power of PSDs for trauma healing; and 4) video clips of PSDs at work and first-person testimonials about the impact of PSDs on peoples' lives. Please note that lines are limited and calls will be handled on a first come, first serve basis. The event will be recorded.

<http://blog.samhsa.gov/2013/08/07/happy-23rd-birthday-ada/>

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/>

WEB SHOW: PEER RECOVERY SUPPORT: LEVERAGING PERSONAL EXPERIENCE IN HELPING OTHERS

SEPTEMBER 4, 2013

Peer recovery support in behavioral health is a powerful and essential component of the recovery process. More recently, however, the recognition of the importance of peer support has led to more structured and intentional applications of this recovery support approach. For example, many peer “recovery support specialists” and “recovery coaches” have received training on the most effective ways to help peers in recovery. Use of trained individuals along with other strategies for providing peer support is found in both mental health and substance use settings. Peer support is especially effective within certain groups such as military service members and Veterans, young adults, and lesbian, gay, bisexual, and transgender populations. In some applications, online technologies are used to facilitate peer support processes. This Recovery Month show will also address the use of peer support in recovery community centers and recovery living settings. <http://www.recoverymonth.gov/Multimedia/Road-to-Recovery-Television-Series.aspx#September>

WEBINAR: EARLY CHILDHOOD PREVENTION: PROJECT LAUNCH

SEPTEMBER 4, 2013, 4:00-5:30 PM ET AND SEPTEMBER 5, 2013, 11:00 AM-12:30 PM ET

Using a public health approach, Project LAUNCH, a SAMHSA grant program, focuses on improving the systems that serve young children and addressing their physical, emotional, social, cognitive, and behavioral growth. This National Center on Safe Supportive Learning Environments webinar will focus on the five core service areas of Project Launch that address key prevention and health promotion strategies: developmental screenings and assessments in a range of child-serving settings; integration of behavioral health into primary care settings; mental health consultation in early care and education; enhanced home visiting through increased focus on social and emotional well-being; and family strengthening and parent skills training. The webinar will be offered twice. <http://safesupportiveschools.ed.gov/events/early-childhood-prevention-project-launch>

FDA PATIENT NETWORK ANNUAL MEETING: DEMYSTIFYING FDA: AN EXPLORATION OF DRUG DEVELOPMENT

SEPTEMBER 10, 2013, WASHINGTON DC

This meeting will serve as a forum for the Food and Drug Administration's (FDA) patient stakeholders and the general public, including health professionals, academia, and industry to learn about regulatory issues related to drug development, analyze where in the process patient input may be most practical and most valuable, and explore practicable approaches to incorporating meaningful patient input that will represent broad patient perspectives in medical product development and regulatory decision-making.

<http://www.patientnetwork.fda.gov/patient-network-annual-meeting-september-10-2013>

WEBINAR: SIX STEPS TO IMPROVE YOUR DRUG COURT OUTCOMES FOR ADULTS WITH CO-OCCURRING DISORDERS

SEPTEMBER 11, 12:00-1:15 PM ET

Treatment court professionals know that people with co-occurring disorders (COD) are among the most challenging groups of participants in their programs, and many are both "high risk and high need" offenders. The National Association of Drug Court Professionals and SAMHSA's GAINS Center recently collaborated on the Fact Sheet *Six Steps to Improve Your Drug Court Outcomes for Adults with Co-Occurring Disorders* to assist drug courts and other treatment courts in effectively working with persons with co-occurring substance use and mental health disorders. This webinar features Dr. Roger Peters, of the University of South Florida, Louis de la Parte Florida Mental Health Institute, who will discuss the newly-released Fact Sheet document. This webinar addresses common concerns across all types of adult treatment courts including drug courts, mental health courts, veterans' treatment courts, and DWI courts.

<http://gainscenter.samhsa.gov/eNews/solicit-814.html>

WEBINAR: POLYVICTIMIZATION AND SEXUAL EXPLOITATION OF YOUNG GIRLS AND WOMEN

SEPTEMBER 12, 2013, 3:00 PM ET

This NCTSN webinar will examine the nuances of polyvictimization as it relates to the commercial sexual exploitation of both girls and women.

http://learn.nctsn.org/calendar/view.php?view=day&cal_d=12&cal_m=9&cal_y=2013

NATIONAL WELLNESS WEEK

SEPTEMBER 16-22, 2013

During National Wellness Week, SAMHSA aims to inspire individuals, families, behavioral health and primary care providers, and peer-run, faith-based, and other community organizations to improve their health behaviors, while also exploring their talents, skills, interests, social connections, and environment to incorporate the Eight Dimensions of Wellness into their lives as part of a holistic lifestyle. National Wellness Week's overarching theme every year is *Living Wellness*, to emphasize that no matter which dimension of wellness one focuses on, the ultimate goal is to live well—within bodies, minds, and communities. The theme also shows that wellness is not static or finite; rather, it's a continuous journey.

<http://www.promoteacceptance.samhsa.gov/10by10/default.aspx>

WEBINAR: PTSD, MILITARY SEXUAL TRAUMA, AND PRETERM BIRTH—EVIDENCE FROM 16,000 PREGNANCIES.

SEPTEMBER 18, 2013, 2:00-3:00 PM ET

This VA HSR&D webinar presents the findings from an analysis of the over 16,000 deliveries (12 percent with active PTSD diagnoses) covered by the VA since 2000, to determine the extent to which post-traumatic stress is associated with preterm birth. Preterm delivery rates are found to be significantly higher in those with an active diagnosis of PTSD, and this association remained in multivariate analysis that included adjustment for history of deployment and military sexual trauma, and was a stronger predictor than alternative mental health diagnoses.

<http://www.hsrd.research.va.gov/cyberseminars/registration.cfm?SessionID=733>

WEBINAR: EVIDENCE-BASED TREATMENT FOR DEPRESSION AND SUICIDAL BEHAVIOR

SEPTEMBER 26, 2013, 1:00-2:30 PM ET

Save the date for the next DCoE webinar on evidence based treatment.

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

WEBINAR: POLYVICTIMIZATION AND SEXUAL EXPLOITATION OF YOUNG BOYS AND MEN

SEPTEMBER 26, 2013, 3:00 PM ET

This NCTSN webinar will examine the nuances of polyvictimization as it relates to the commercial sexual exploitation of both boys and men.

http://learn.nctsn.org/calendar/view.php?view=day&cal_d=26&cal_m=9&cal_y=2013

THIRD ANNUAL FDA HEALTH PROFESSIONAL ORGANIZATIONS CONFERENCE

OCTOBER 24, 2013, 8:00 AM-12:00 PM, SILVER SPRING, MARYLAND

The FDA is announcing a conference for representatives of health professional organizations. Topics on the agenda include FDA Updates, an overview of FDA's Network of Experts (public/private partnerships), and a FDA Town Hall. RSVP by September 30, 2013. <http://www.cvent.com/events/third-annual-fda-health-professional-organizations-conference/invitation-0cce20cdcfc545a793e1b535eeeb0421.aspx>

CALLS FOR PUBLIC INPUT

REQUEST FOR COMMENTS: EVALUATION OF THE FDA'S GENERAL MARKET YOUTH TOBACCO PREVENTION CAMPAIGNS

FDA is currently developing and implementing youth-targeted public education campaigns to help prevent tobacco use among youth and thereby reduce the public health burden of tobacco. The campaigns will feature televised advertisements along with complementary ads on radio, on the Internet, in print, and through other forms of media. FDA is looking for public comment on the Agency's current plans to conduct two studies to evaluate the effectiveness of its youth tobacco prevention campaigns: an outcome evaluation study and a media tracking survey. The timing of these studies will be designed to follow the multiple, discrete waves of media advertising planned for the campaigns. Comments are due by August 20, 2013.

<https://www.federalregister.gov/articles/2013/06/21/2013-14809/agency-information-collection-activities-proposed-collection-comment-request-evaluation-of-the-food>

FDA SEEKS COMMENTS ON COMMUNICATIONS ACTIVITIES

The FDA has issued a report on how the agency communicates the benefits and risks of medical products to healthcare providers and patients, especially underrepresented populations, including racial subgroups. FDA is seeking public comment on the report's findings and FDA's communication plans going forward. Submit electronic or written comments by September 9, 2013.

<https://www.federalregister.gov/articles/2013/07/11/2013-16617/establishment-of-a-public-docket-for-comment-on-the-report-prepared-under-the-food-and-drug>

JOIN IN THE "STAY COVERED" CHALLENGE

Join SAMHSA in the mission to develop innovative communications strategies to target individuals who experience high levels of involuntary breaks ("churn") in health insurance coverage. The "Stay Covered Challenge" calls for the development of a marketing/outreach campaign designed for use by providers and community-based organizations in targeting individuals in Medicaid due to disability. For example, competitors should consider developing marketing materials communicating the importance of maintaining eligibility by responding to communications from the Medicaid agency, and by communicating to the agency about housing changes or other changes of circumstance that might impact program eligibility. The materials submitted as a part of the challenge competition will be evaluated as to how useful they would be in targeting individuals experiencing or at risk of churn and fostering the use of the materials by the full range of providers and community-based organizations serving Medicaid populations with behavioral health needs.

The "Churn Marketing Research Methodology Development Challenge" asks organizations to develop a research methodology on how to identify actionable marketing data on this group. The challenge will not involve the development of communications materials targeting these individuals. This challenge tasks researchers with developing a methodology for identifying the marketing communications profile of uninsured individuals who have been disenrolled from coverage affordability programs, but remain eligible for enrollment. Submissions are due by August 31 at 11:00 PM ET. <http://staycovered.challenge.gov/>

INVITING COMMENTS AND SUGGESTIONS ON THE HEALTH AND HEALTH RESEARCH NEEDS, SPECIFIC HEALTH ISSUES, AND CONCERNS FOR LGBTI POPULATIONS

NIH is inviting comments and suggestions on the health and health research needs, specific health issues and concerns for lesbian, gay, bisexual, trans/transgender, and intersex (LGBTI) populations. As part of its efforts to advance LGBTI health, NIH is requesting input on the following issues to inform the development of an NIH LGBTI Research Strategic Plan:

1. Challenges (including, but not limited to):
 - Methodological or other challenges to data collection and analysis for small and/or hard-to-reach and/or heterogeneous LGBTI populations, including the development of valid and reliable methods for asking individuals about their sexual orientation and gender identity to better understand and advance LGBTI health.
2. Opportunities (including, but not limited to):
 - Opportunities to expand the knowledge base of LGBTI health (including those identified in the NIH LGBT Research Coordinating Committee report, *Consideration of the Institute of Medicine Report on the Health of LGBT Individuals*), existing data collection efforts, and other resources and scientific advances on which further research could be built.

- Training in LGBTI health research and enhancing the cultural competency of researchers and individuals working with LGBTI persons in clinical settings; specifically how NIH can collaborate with other federal agencies to develop programs for enhancing cultural competency.
 - Effective ways to engage with the LGBTI health research and advocacy communities, which include the broad range of populations that may be encompassed by the term LGBTI, including, but not limited to:
 - People who identify as gay, lesbian, bisexual, or transgendered;
 - People with congenital “intersex” (disorders of sex development) conditions;
 - People who do not identify as LGBT, but nonetheless experience same-sex attraction and/or engage in same-sex sexual behaviors, which includes those who identify as queer and/or questioning; and
 - People whose gender identity differs from the sex assigned to them at birth; whose gender expression varies significantly from what is traditionally associated with or is typical for that group; and/or who vary from or reject for themselves traditional cultural conceptualizations of gender in terms of male-female dichotomy. This group includes people who identify (or are identified) as transgendered, transsexual, cross-dressers, transvestites, two-spirit, queer, and/or questioning.
 - Effective ways to enhance communication between the NIH and the LGBTI research community to enhance practical understanding of the NIH mission, as well as the NIH funding and review processes, and encourage individuals engaged in research and/or training in LGBTI health to compete for funding through various NIH mechanisms (both targeted and non-targeted to LGBTI health).
3. Outcome Indicators (including, but not limited to):
- Potential measures that NIH could use to indicate whether the proposed activities addressed the challenges or opportunities successfully.

Responses to will be accepted through October 28, 2013. <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-13-076.html>

GRANTS.GOV RELEASES A NEW APPLICANT TRAINING VIDEO

Grants.gov website has developed a new "Find and Apply" training video. In the video, potential applicants will receive a walk-thru of the recently redesigned Grants.gov website.

<http://www.grants.gov/web/grants/outreach/grants-blog.html/-/blogs/grants-gov-releases-a-new-applicant-training-video>

RESEARCH TO IMPROVE THE CARE OF PERSONS AT CLINICAL HIGH RISK FOR PSYCHOTIC DISORDERS

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-14-210.html> (Collaborative R01)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-14-211.html> (R01)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-14-212.html> (R34)

BEHAVIORAL AND SOCIAL SCIENCE RESEARCH ON UNDERSTANDING AND REDUCING HEALTH DISPARITIES

<http://grants.nih.gov/grants/guide/pa-files/PA-13-288.html> (R21)

<http://grants.nih.gov/grants/guide/pa-files/PA-13-292.html> (R01)

RESEARCH PROJECT GRANT

<http://grants.nih.gov/grants/guide/pa-files/PA-13-302.html> (Parent R01)

NIH EXPLORATORY/DEVELOPMENTAL RESEARCH GRANT PROGRAM

<http://grants.nih.gov/grants/guide/pa-files/PA-13-303.html> (Parent R21)

NIH SMALL RESEARCH GRANT PROGRAM

<http://grants.nih.gov/grants/guide/pa-files/PA-13-304.html> (Parent R03)

2014 NIH PIONEER AWARD PROGRAM

<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-13-006.html>

2014 NIH DIRECTOR'S NEW INNOVATOR AWARD PROGRAM

<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-13-007.html>

NIH HEALTH CARE SYSTEMS RESEARCH COLLABORATORY - DEMONSTRATION PROJECTS FOR PRAGMATIC CLINICAL TRIALS FOCUSING ON MULTIPLE CHRONIC CONDITIONS (UH2/UH3)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-13-012.html>

DNA SEQUENCING CORE FOR AN UNDIAGNOSED DISEASES NETWORK (UDN) (U01)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-RM-13-018.html>

HEALTH PROMOTION AMONG RACIAL AND ETHNIC MINORITY MALES

<http://grants.nih.gov/grants/guide/pa-files/PA-13-328.html> (R01)

<http://grants.nih.gov/grants/guide/pa-files/PA-13-331.html> (R21)



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.