



# UPDATE

August 15, 2014

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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*

## EMERGENCY DEPARTMENT VISITS FOR DRUG-RELATED SUICIDE ATTEMPTS RISE OVER SIX YEAR PERIOD

Two new reports highlight the rise in drug-related suicide attempt visits to hospital emergency departments (ED), especially among certain age groups. The reports by the Substance Abuse and Mental Health Services Administration (SAMHSA) show that overall there was a 51 percent increase for these types of visits among people 12 and older -- from 151,477 visits in 2005 to 228,277 visits in 2011. One report analyzed the increase in ED visits by age and found that the overall rise resulted from increases in visits by people aged 18 to 29 and people aged 45 to 64. Visits involving 18 to 29 year olds increased from 47,312 in 2005 to 75,068 -- a 58 percent increase. Visits involving people aged 45 to 64 increased from 28,802 in 2005 to 58,776 visits in 2011 -- a 104 percent increase. In 2011, these two age groups comprised approximately 60 percent of all drug-related ED visits involving suicide attempts. The other SAMHSA report focused on the 45 to 64 age group, which had the largest increase in ED visits involving drug-related suicide attempts, and characterized these visits. The report found that the majority (96 percent in 2011) of these visits involved the non-medical use of prescription drugs and over-the-counter-medications. In 2011, these drugs included anti-anxiety and insomnia medications (48 percent), pain relievers (29 percent), and antidepressants (22 percent).

**Press Release:** <http://www.samhsa.gov/newsroom/advisories/1408062805.aspx>

## EMERGENCY DEPARTMENT VISITS LINKED TO ZOLPIDEM OVERMEDICATION NEARLY DOUBLED

The estimated number of ED visits involving zolpidem overmedication (taking more than the prescribed amount) nearly doubled from 21,824 visits in 2005-2006 to 42,274 visits in 2009-2010, according to a new SAMHSA study. Zolpidem is the active ingredient in the prescription sleep aids Ambien®, Ambien CR®, Edluar® and Zolpimist®. The report also indicates that 68 percent of all zolpidem overmedication visits in 2010 involved females. The number of zolpidem overmedication ED visits for males increased 150 percent from 2005-2006 to 2009-2010 compared to an increase of 69 percent for females over the same time period.

**Press Release:** <http://www.samhsa.gov/newsroom/advisories/1408111602.aspx>

## **SUBSTANCE USE TREATMENT FACILITIES OFFERING OUTREACH SERVICES RISE 10 PERCENTAGE POINTS SINCE 2006**

The number of substance use treatment facilities that provided community outreach increased from 47 percent in 2006 to 57 percent in 2012, according to a SAMHSA report. These substance use treatment facilities outreach services are designed to help people in the community learn about the harmful effects of substance use. They are also designed for people needing treatment to provide encouragement and information on how they can get help. Outreach services can be especially important for underserved populations, such as homeless people, people living in rural areas, and people in certain racial, ethnic, or cultural groups.

**Press Release:** <http://www.samhsa.gov/newsroom/advisories/1408050416.aspx>

## **HHS AWARDS MORE THAN \$106 MILLION TO SUPPORT STATE HOME VISITING PROGRAMS**

The Department of Health and Human Services (HHS) announced \$106.7 million in Fiscal Year 2014 grant awards to 46 states, the District of Columbia, and five jurisdictions as part of the Maternal, Infant, and Early Childhood Home Visiting Program (HVP) established by the Affordable Care Act. These funds will allow states to continue and expand voluntary, evidence-based home visiting services to women during pregnancy and to parents with young children up to age five. The HVP builds upon decades of scientific research, which shows that families that choose home visits by a nurse, social worker, or early childhood educator during pregnancy and in the first years of life benefit from important support services for healthy children and families. HVPs have been shown to prevent child abuse and neglect, and promote child health and development.

**Press Release:** <http://www.hhs.gov/news/press/2014pres/08/20140804a.html>

## **VA ANNOUNCES NEW GRANTS TO HELP END VETERANS HOMELESSNESS**

The Secretary of Veterans Affairs announced the award of approximately \$300 million in grants that will help approximately 115,000 homeless and at-risk Veterans and their families. The grants will be distributed to 301 community agencies in all 50 states, the District of Columbia, Puerto Rico, and the Virgin Islands. Under the Supportive Services for Veteran Families (SSVF) program, the Department of Veterans Affairs (VA) is awarding grants to private non-profit organizations and consumer cooperatives that provide services to very low-income Veteran families living in – or transitioning to – permanent housing. Those community organizations provide a range of services that promote housing stability among eligible very low-income Veteran families (those making less than 50 percent of the area median income). The grants announced will fund the fourth year of the SSVF program.

**Press Release:** <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2606>

## NEW FROM NIMH

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### DIRECTOR'S BLOG: FUNDING RESEARCH – IT TAKES A VILLAGE

In his blog, NIMH Director Thomas Insel talks about the importance of recent large philanthropic gifts to fund basic research on the brain. <http://www.nimh.nih.gov/about/director/2014/funding-research-it-takes-a-village.shtml>

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### DIRECTOR'S BLOG: ROBIN WILLIAMS

In referring to the recent death of Robin Williams, NIMH Director Thomas Insel talks about the continuing need for research to develop better treatments for serious mental illness.

<http://www.nimh.nih.gov/about/director/2014/robin-williams.shtml>

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### ARCHIVED TRANSCRIPT: TWITTER CHAT ON PREMENSTRUAL DYSPHORIC DISORDER

The transcript from the NIMH Twitter chat on premenstrual dysphoric disorder (PMDD) is available.

<http://www.nimh.nih.gov/health/twitter-chats/index.shtml>

## NIH DIRECTOR'S BLOG: PUBMED COMMONS: CATALYZING SCIENTIST-TO-SCIENTIST INTERACTIONS

National Institutes of Health (NIH) Director Francis Collins describes the newly developed *PubMed Commons* developed by the NIH's National Center for Biotechnology Information. This resource gives researchers the opportunity to engage in online discussions about scientific publications. Specifically, this service allows scientists with at least one publication to comment on any paper in PubMed—the world's largest searchable database of biomedical literature. PubMed Commons is a tool to bring scientists together to share resources and knowledge, boost collaboration, and enhance efforts to advance biomedical knowledge—with the ultimate goal of improving human health. <http://directorsblog.nih.gov/2014/08/05/pubmed-commons-catalyzing-scientist-to-scientist-interactions/>

## NEW FROM NIDA

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### NIDA SCIENCE SPOTLIGHT: REGULAR MARIJUANA USERS MAY HAVE IMPAIRED BRAIN REWARD CENTERS

New research shows that regular marijuana users show impairments in the brain's ability to respond to dopamine – a brain chemical that is involved in reward, among other functions. Although this research can't determine if regular marijuana use causes deficits in brain reward centers – or if users take marijuana to compensate for less reactive dopamine systems – these results could help explain why regular marijuana users are more prone towards depression, anxiety, irritability, and increased sensitivity to stress. The study, first-authored by National Institute on Drug Abuse (NIDA) Director Dr. Nora Volkow, was supported by the intramural research program of the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

<http://www.drugabuse.gov/news-events/news-releases/2014/07/regular-marijuana-users-may-have-impaired-brain-reward-centers>

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### EARLY-LIFE STRESS DIFFERENTIALLY IMPACTS REWARD CIRCUITRY IN MICE

Stressful early-life experiences can have profound effects on lifelong physical and mental health and well-being. Emotional abuse during childhood increases the risk of developing substance abuse and obesity, and may predispose a person to depression and anxiety more than physical maltreatment alone. But little is known about the neurobiology of these effects, particularly in adolescents. This study explored how exposure to physical or emotional stress impacts gene expression and synaptic plasticity in the nucleus accumbens of both adolescent and adult mice. <http://www.drugabuse.gov/news-events/latest-science/early-life-stress-differentially-impacts-reward-circuitry-in-mice>

## NEW FROM SAMHSA

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### SAMHSA'S "KNOWBULLYING" APP HELPS PARENTS AND OTHERS PREVENT BULLYING

*KnowBullying*, a free smartphone app, provides parents, caretakers, educators, and others with information and communication support to help prevent bullying and build resilience in children.

[http://store.samhsa.gov/apps/bullying/?WT.mc\\_id=EB\\_20140815\\_KNOWBULLYINGAPP](http://store.samhsa.gov/apps/bullying/?WT.mc_id=EB_20140815_KNOWBULLYINGAPP)

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### BLOG: DOING MORE TO SAVE LIVES

In this SAMHSA blog post, Center for Mental Health Services Director Paolo del Vecchio describes how SAMHSA and its partners are working to reduce deaths by suicide nationwide.

<http://blog.samhsa.gov/2014/08/12/doing-more-to-save-lives/>

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#### BLOG: SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT

With the recent publication of Screening, Brief Intervention, and Referral to Treatment (SBIRT) studies in the *Journal of the American Medical Association*, Center for Substance Abuse Treatment Director Dr. H. Westley Clark describes the benefits of SBIRT in identifying those with alcohol and other substance use disorders.

<http://blog.samhsa.gov/2014/08/08/screening-brief-intervention-and-referral-to-treatment/>

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#### BLOG: ACHIEVING EQUITY IN BEHAVIORAL HEALTHCARE: Q&A WITH SAMHSA'S ADMINISTRATOR

In observance of National Minority Mental Health Awareness Month, this blog post highlights an interview with SAMHSA Administrator Pamela Hyde about how SAMHSA is addressing the issue of behavioral health disparities and promoting behavioral health equity for minority communities.

<http://blog.samhsa.gov/2014/07/31/achieving-equity-in-behavioral-healthcare-a-q-a-with-samhsas-administrator/>

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#### INTRODUCTION TO THE NATIONAL MENTAL HEALTH SERVICES SURVEY, 2010

This brief provides an overview of the National Mental Health Services Survey (N-MHSS), an annual survey of all known public and private mental health treatment facilities in the United States (U.S.). N-MHSS is used to collect basic data on the number, location, and characteristics of specialty mental health treatment facilities and the persons they serve throughout the 50 states, the District of Columbia, and other U.S. jurisdictions.

<http://www.samhsa.gov/data/2K14/NMHSS178/sr178-nmhss-introduction-2014.pdf>

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#### NEW TOOLS TARGET YOUTH MARIJUANA USE

This set of tools is designed to help practitioners identify which factors are associated with youth marijuana use in their communities, and to assist them in selecting appropriate strategies and interventions. It includes detailed descriptions of interventions that have been shown to prevent or reduce marijuana use among youth, along with a complete bibliography of the literature contained in the suite.

<http://captus.samhsa.gov/access-resources/new-suite-capt-tools-target-youth-marijuana-use>

### **SAMHSA DISASTER RESPONSE RESOURCES—SPANISH-LANGUAGE VERSIONS AVAILABLE IN ELECTRONIC FORMAT**

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

This resource offers self-help tips for coping with the aftermath of trauma. It discusses the long-term impact of trauma, including personal uncertainties, family relationship changes, work disruptions, and financial concerns. <http://store.samhsa.gov/product/Tips-for-Survivors-of-a-Disaster-or-Traumatic-Event-What-to-Expect-in-Your-Personal-Family-Work-and-Financial-Life-Spanish-Version-/All-New-Products/SMA13-4775SPANISH>

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#### TIPS FOR COLLEGE STUDENTS: AFTER A DISASTER OR OTHER TRAUMA (SPANISH VERSION)

This resource helps college students cope with the mental health effects in the aftermath of trauma. It explains normal reactions, emphasizes the importance of talking about feelings, and offers tips for coping.

<http://store.samhsa.gov/product/Tips-for-College-Students-After-a-Disaster-or-Other-Trauma-Spanish-Version-/All-New-Products/SMA13-4777SPANISH>

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#### CRISIS COUNSELING ASSISTANCE AND TRAINING PROGRAM (SPANISH VERSION)

This brochure explains the Crisis Counseling Assistance and Training Program's emergency mental health services and programs for survivors of traumatic events. It helps states, territories, and federally recognized tribes to prepare grant applications for funding.

<http://store.samhsa.gov/product/Crisis-Counseling-Assistance-and-Training-Program-CCP-Spanish-Version-/All-New-Products/SMA09-4373SPANISH>

### METHAMPHETAMINE AND SUICIDE PREVENTION INITIATIVE

A project of the Indian Health Service Division of Behavioral Health, the Methamphetamine and Suicide Prevention Initiative is a nationally-coordinated demonstration project providing methamphetamine and suicide prevention and intervention resources for Indian Country. This initiative promotes the use and development of evidence-based and practice-based models that represent culturally-appropriate prevention and treatment approaches to methamphetamine abuse and suicide prevention from a community-driven context. <http://www.ihs.gov/mspi/>

### UPDATES FROM AHRQ

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#### THERAPIES FOR CHILDREN WITH AUTISM SPECTRUM DISORDER: BEHAVIORAL INTERVENTIONS UPDATE

New research suggests that behavior-focused therapies have positive results for some children with autism spectrum disorder (ASD), according to an updated Agency for Healthcare Research and Quality (AHRQ) research review. The update reports that the quality of research studies on these therapies has improved since AHRQ's 2011 review of studies on ASD, and that many young children who receive early intervention with intensive, long-term applied behavior analysis types of approaches showed improvements in cognitive and language skills, compared with children receiving other interventions. It indicated that the effects of the applied behavior analysis-based interventions on ASD symptoms related to communication difficulties and repetitive behaviors are less clear. Therapies focusing on social skills showed some positive effects on social behaviors for older children in small studies. <http://effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productid=1945>

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#### USING MOBILE TECHNOLOGY TO ENHANCE CARE

The latest issue of AHRQ's *Health Care Innovations Exchange* focuses on using mobile technology to enhance care. It describes three initiatives that used mobile technology in various ways to improve care management.

[http://www.innovations.ahrq.gov/innovations\\_qualitytools.aspx?find=mobile+application+OR+mobile+technology+OR+mobile+phone](http://www.innovations.ahrq.gov/innovations_qualitytools.aspx?find=mobile+application+OR+mobile+technology+OR+mobile+phone)

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#### CONTINUING EDUCATION VIDEO: CHILDREN EXPOSED TO TRAUMA AND INTERVENTIONS FOR MALTREATMENT

According to a new continuing education video by AHRQ, an urgent need currently exists to augment the evidence base on interventions addressing child maltreatment. Several interventions show promise in improving child well-being and child welfare outcomes; however, the video, based on a 2013 comparative effectiveness review *Child Exposure to Trauma: Comparative Effectiveness of Interventions Addressing Maltreatment*, explores major research gaps and highlights the need for collaborative clinical trials supported by a multisite research network. <http://ahrq.cmeuniversity.com/course/disclaimer/110307>

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#### AHRQ FINDS INCREASE IN HOSPITALIZATIONS DUE TO OPIOID OVERUSE

The rate of hospitalizations for overuse of pain medications has increased more than 150 percent since 1993, according to a new statistical brief from AHRQ. The brief's authors examined data from AHRQ's Healthcare Cost and Utilization Project and found that the rate of hospital stays involving opioid (pain medication) overuse among adults increased from 116.7 to 295.6 stays per 100,000 population from 1993 to 2012. The authors found that hospitalization rates were climbing among every adult age group and in every region of the country, making the problem more uniformly widespread than has previously been observed.

<http://www.hcup-us.ahrq.gov/reports/statbriefs/sb177-Hospitalizations-for-Opioid-Overuse.jsp>

#### NEW FROM OJJDP

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#### LAW ENFORCEMENT GUIDE ON RECOGNIZING CHILD ABUSE

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) has published a new guide which provides information to help law enforcement differentiate between physical abuse and accidental injury during a child abuse investigation. The guide also identifies questions that law enforcement should address during an investigation, describes how to conduct a caretaker assessment when a child is injured, and highlights ways to work with the medical community to distinguish types of injuries and bruises.

<http://www.ojjdp.gov/enews/14juvjust/140728.html>

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## NEW BULLETIN IN JUSTICE RESEARCH SERIES: CHANGING LIVES: PREVENTION AND INTERVENTION TO REDUCE SERIOUS OFFENDING

This bulletin reviews effective programs that mitigate risk factors for delinquency and crime among juveniles and young adults to prevent future serious criminal behavior. These programs are grouped by family, school, peers and community, individual, and employment. <http://www.ojjdp.gov/enews/14juvjust/140808.html>

## DCOE BLOG POSTS

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### FIVE CLINICAL TOOLS HELP DIAGNOSE, TREAT PTSD

Healthcare providers have much to consider when diagnosing and treating posttraumatic stress disorder (PTSD) in service members and Veterans. To assist them, the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE), in collaboration with Department of Defense (DoD) and the VA, developed five provider and patient PTSD clinical support tools. The DCoE blog post describes these resources that offer quick tips, insights, and recommendations on proper screening, diagnosis, treatment, referral, and patient and family education. [http://www.dcoe.mil/blog/14-07-31/5\\_Clinical\\_Tools\\_Help\\_Diagnose\\_Treat\\_PTSD.aspx](http://www.dcoe.mil/blog/14-07-31/5_Clinical_Tools_Help_Diagnose_Treat_PTSD.aspx)

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### LEARN COPING SKILLS TO HELP MOVE FORWARD

*Moving Forward* is a website that offers education and life coaching for military members. It was developed by the DoD's National Center for Telehealth and Technology and VA as part of a joint initiative to provide collaborative and integrated mental health services to service members and Veterans. This DCoE blog post describes the *Moving Forward* training that helps individuals better understand their own problem-solving abilities and teaches new skills to overcome obstacles in life. [http://www.dcoe.mil/blog/14-08-12/Are\\_You\\_Stuck\\_Learn\\_Coping\\_Skills\\_to\\_Help\\_You\\_Move\\_Forward.aspx](http://www.dcoe.mil/blog/14-08-12/Are_You_Stuck_Learn_Coping_Skills_to_Help_You_Move_Forward.aspx)

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### TEN TIPS FOR MANAGING MOOD CHANGES AFTER BRAIN INJURY

Most people who are diagnosed with a concussion, also known as mild traumatic brain injury, recover quickly and fully. But some people experience symptoms that last for days, weeks, or longer such as sleep problems and trouble with memory. A concussion can also change the way one acts and feels. This DCoE blog post offers tips on how to manage changes in mood related to brain injury. [http://www.dcoe.mil/blog/14-08-06/10\\_Tips\\_for\\_Managing\\_Mood\\_Changes\\_After\\_Brain\\_Injury.aspx](http://www.dcoe.mil/blog/14-08-06/10_Tips_for_Managing_Mood_Changes_After_Brain_Injury.aspx)

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## EQUITY RESEARCH ON VA HEALTHCARE

This brief summarizes a newly published *American Journal of Public Health* Health Equity Supplement that highlights health disparities research conducted within the VA and with Veterans. Studies include a comparison of suicidal ideation and attempts among lesbian, gay, bisexual, and heterosexual Veterans; the feasibility of sending mobile phone text appointment reminders to homeless Veterans to increase their engagement in VA healthcare; and a study examining the factors associated with suicidal behavior and ideation in more than 89,000 Veterans who underwent major surgery over a one year period.

[http://www.hsrd.research.va.gov/publications/management\\_briefs/default.cfm?ManagementBriefsMenu=eBrief-no83](http://www.hsrd.research.va.gov/publications/management_briefs/default.cfm?ManagementBriefsMenu=eBrief-no83)

## EVENTS

### WEBINAR: MAKING APPS AND WEB-BASED TOOLS PART OF YOUR INTEGRATED BEHAVIORAL HEALTH TEAM

AUGUST 21, 2014, 2:00-3:30 PM ET

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On this SAMHSA-Health Resources and Services Administration Center for Integrated Health Services webinar, one health center will describe how it uses new behavioral Health Information Technology (HIT) patient engagement tools in its integrated behavioral healthcare services. An HIT expert will review the technologies available to primary care providers, how to ensure IT tools support clinical outcomes goals, and tips for implementing them into clinic workflow. <http://www.integration.samhsa.gov/about-us/webinars>

### WEBINAR: MINNESOTA'S HEALTHY MINNESOTA PARTNERSHIP AND HEALTH EQUITY IN ALL POLICIES APPROACH

AUGUST 22, 2014, 3:00 PM ET

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This webinar in the Federal Interagency Health Equity Team webinar series will outline the purposeful efforts in Minnesota to change the narrative about what creates health, and highlight the “health in all policies” approach being taken by state agencies that has evolved from the use of the new narrative about health and equity.

<https://event.on24.com/eventRegistration/EventLobbyServlet?target=registration.jsp&eventid=781550&sessionid=1&key=AF52CA2714D3C5FCC3AFD8F494EEA6D5&sourcepage=register>

## WEBINAR: SPECIAL ENROLLMENT PERIODS AND RESOURCES FOR THE UNINSURED

AUGUST 26, 2014, 3:00 PM ET

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The HHS Partnership Center offers updated webinars on the healthcare law for faith and community organizations. These webinars are open to the public and include a question and answer session. The healthcare law has created special enrollment periods for those who experience special circumstances such as graduating from college and losing health insurance, getting married and needing coverage for a spouse, losing employer insurance, or turning 26 and losing coverage on a parent's health plan. Join this webinar to learn more about special enrollment periods and how to enroll in the Health Insurance Marketplace. For those who are uninsured and don't qualify for the special enrollment period, learn what resources are available, and when and how to enroll in the Health Insurance Marketplace. Please email [ACA101@hhs.gov](mailto:ACA101@hhs.gov) by August 26 at 10:00 am ET with any questions. *To Join By Phone Only:* Dial +1 (480) 297-0021, Access Code: 428-471-870. For those joining by phone only, the Pin Number is the # key.

<https://www4.gotomeeting.com/register/967770055>

## SAVE THE DATE: WEBINARS ON THE USE OF PEER SUPPORT IN STATE CORRECTIONAL FACILITIES

PART 1: AUGUST 27, 2014, 3:00-4:30 PM ET AND PART 2: SEPTEMBER 3, 2014, 3:00-4:30 PM ET

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SAMHSA and the Association of State Correctional Administrators are pleased to announce a two-part webinar series focusing on the successful and innovative use of peers in state correctional facilities. Attendees will learn about the use of peers in Special Needs Units and in Reentry Planning. The first session will highlight several exemplary programs and the second session will focus on how to fund, develop, implement, sustain, and expand these programs in correctional facilities. Save the date with additional details forthcoming. Contact: [GAINS@prain.com](mailto:GAINS@prain.com).

## WEBINAR: A POPULATION APPROACH TO TREATMENT ENGAGEMENT IN BEHAVIORAL HEALTH CARE

AUGUST 28, 2014, 1:00-2:30 PM ET

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This DCoE webinar will address two major challenges relating to psychological treatment engagement in the military. First, many with psychological health conditions don't access timely services. Second, most who access services drop out of treatment before it's completed. Webinar participants will review systems-level interventions that improve access and continuity of behavioral health care.

<http://continuingeducation.dcri.duke.edu/population-approach-treatment-engagement-behavioral-health-care>

## RECOVERY MONTH

SEPTEMBER 2014

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The 25th anniversary of Recovery Month highlights the theme, "Join the Voices for Recovery: Speak Up, Reach Out" and encourages people to openly discuss—or speak up about—mental and substance use disorders and the reality of recovery. The observance also promotes ways first responders, faith leaders, youth and young adults, and policymakers can recognize these issues and intervene—or reach out to help—others, as well as themselves. <http://www.recoverymonth.gov/>

## WORKSHOP/WEBINAR ON NEUROBIOLOGY OF ADDICTION

SEPTEMBER 2, 2014, ROCKVILLE, MARYLAND

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NIAAA will host this one-day workshop to highlight recent progress in the understanding of neuroimmune mechanisms contributing to brain function and alcohol dependence. This workshop will bring together scientists from the alcohol research field and other fields to highlight recent science advances, identify research gaps, and discuss future directions and potential collaborations. The workshop will also be webcast live through the NIH Videocast site: <http://videocast.nih.gov/>.  
<http://www.niaaa.nih.gov/news-events/meetings-events-exhibits/niaaa-workshop>

## 3RD ANNUAL PATIENT NETWORK MEETING: UNDER THE MICROSCOPE: PEDIATRIC DRUG DEVELOPMENT

SEPTEMBER 10, 2014, WASHINGTON, DC

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The Food and Drug Administration (FDA) Patient Network announced a one day meeting to explore challenges related to pediatric product development. The meeting will serve as a forum for FDA's stakeholders (patients, caregivers, patient advocates, healthcare professional groups, the general public, academia, and industry) to learn about regulations that encourage pediatric product development, discuss ways to advance pediatric product development, discuss how health disparities impact pediatric product development, discuss the importance of transparency in pediatric clinical trials, describe how analysis of information from failed pediatric clinical trials might improve future designs for pediatric trials, and identify ways patient input can benefit clinical trial design for pediatric trials. <http://www.cvent.com/d/p4qdf/1Q>

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

SEPTEMBER 10, 2014, 1:00 PM ET

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The HHS Partnership Center offers updated webinars on the healthcare law for faith and community organizations. These webinars are open to the public and include a question and answer session. Many people now have health insurance, but may not know how to use it. This webinar and conference call will discuss how to read your insurance card, how to find a doctor, what you need to know in making an appointment, and what to do in case you have a health emergency. Key terms will be discussed as well as recommended health screenings. Please send questions to [ACA101@hhs.gov](mailto:ACA101@hhs.gov) prior to September 10 at 10:00 am ET. *To Join By Phone Only:* Dial: +1 (702) 489-0001, Access Code: 163-133-543. For those joining by phone only, the Pin Number is the # key. <https://www4.gotomeeting.com/register/306673327>

## TWITTER CHAT ON CHRONIC PAIN AND COMPLEMENTARY HEALTH APPROACHES

SEPTEMBER 16, 2014, 2:00 PM ET

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This National Center for Complementary and Alternative Medicine Twitter chat will focus on chronic pain and complementary health approaches. Follow the conversation at [#nccamchat](https://twitter.com/nccamchat). <http://nccam.nih.gov/news/events/livechat?nav=upd>

## VIRTUAL TRAINING: PSYCHOLOGICAL HEALTH AND RESILIENCE SUMMIT

SEPTEMBER 17-19, 2014

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DCoE will host the Psychological Health and Resilience Summit for multidisciplinary military healthcare providers and line leaders. Formerly called the Warrior Resilience Conference, this cross-service training will focus on prevention and treatment of psychological health concerns affecting service members and their families, and current and evolving best practices to enhance resilience and readiness. The virtual learning environment of the summit will feature presentations, an exhibit hall, networking opportunities, resource downloads, and facilitated chat sessions. <http://www.dcoe.mil/Training/Conferences.aspx>

## 2ND U.S. CONFERENCE ON AFRICAN IMMIGRANT HEALTH: HEALTH BEHAVIORS OF AFRICAN IMMIGRANTS AND REFUGEES: CULTURE, INTEGRATION, MIGRATION

SEPTEMBER 19-21, 2014, PITTSBURGH, PENNSYLVANIA

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The HHS Office of Minority Health Resource Center and African-serving organizations in the U.S., are hosting the 2nd U.S. Conference on African Immigrant Health to enhance the capacity of community- and faith-based organizations to address health disparities among African immigrants and refugees (African Diaspora) within the U.S. <http://www.minorityhealth.hhs.gov/USCAIH2register/>

## 2014 NIH PATHWAYS TO PREVENTION WORKSHOP ON THE ROLE OF OPIOIDS IN THE TREATMENT OF CHRONIC PAIN

SEPTEMBER 29-30, 2014, BETHESDA, MARYLAND

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The 2014 NIH Pathways to Prevention workshop on The Role of Opioids in the Treatment of Chronic Pain will seek to clarify the long-term effectiveness of opioids for treating chronic pain; potential risks of opioid treatment in various patient populations; effects of different opioid management strategies on outcomes related to addiction, abuse, misuse, pain, and quality of life; effectiveness of risk mitigation strategies for opioid treatment; and future research needs and priorities to improve the treatment of pain with opioids. The workshop is sponsored by the NIH Office of Disease Prevention and the NIH Pain Consortium.

<https://prevention.nih.gov/programs-events/pathways-to-prevention/upcoming-workshops/opioids-chronic-pain>

## WEBINAR: SPECIAL ENROLLMENT PERIODS AND RESOURCES FOR THE UNINSURED

SEPTEMBER 30, 2014, 2:00 PM ET

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The HHS Partnership Center offers updated webinars on the health care law for faith and community organizations. These webinars are open to the public and include a question and answer session. The health care law has created special enrollment periods for those who experience special circumstances such as graduating from college and losing health insurance, getting married and needing coverage for a spouse, losing employer insurance or turning 26 and losing coverage on a parent's health plan. Join this webinar to learn more about special enrollment periods and how to enroll in the Health Insurance Marketplace. For those who are uninsured and don't qualify for the special enrollment period, learn what resources are available and when and how to enroll in the Health Insurance Marketplace. Please email [ACA101@hhs.gov](mailto:ACA101@hhs.gov) by September 30 at 10:00 am ET with any questions. *To Join By Phone Only:* Dial +1 (646) 307-1719, Access Code: 754-339-340. For those joining by phone only, the Pin Number is the # key.

<https://www4.gotomeeting.com/register/637483015>

## CALLS FOR PUBLIC INPUT

### REQUEST FOR INFORMATION: FOSTERING INNOVATION IN RESEARCH ON REDUCING DISPARITIES IN MENTAL HEALTH SERVICES IN THE U.S.

NIMH seeks input on approaches to fostering innovation and accelerating progress in the development and testing of disparity-reduction strategies related to mental health service provision, access, or outcomes in the U.S. Comments are invited from any interested parties. Responses will be accepted through August 18, 2014. <http://grants.nih.gov/grants/guide/notice-files/NOT-MH-14-021.html>

## COMMENT ON SAMHSA'S STRATEGIC PLAN FOR 2015–2018

SAMHSA is the agency within HHS that leads public health efforts to advance the behavioral health of the Nation. Its mission is to reduce the impact of substance abuse and mental illness on America's communities. This strategic plan outlines work to increase the awareness and improve understanding about mental and substance use disorders; promote emotional health and wellness, and the prevention of substance abuse and mental illness; increase access to effective treatment; and support recovery. Comments accepted through August 18, 2014. <http://store.samhsa.gov/leadingchange/feedback/>

## SEEKING INPUT FROM THE RESEARCH COMMUNITY ON THE UPCOMING LONGITUDINAL STUDY OF ADOLESCENT SUBSTANCE USE

The NIH is exploring optimal ways to configure a large longitudinal cohort study to prospectively examine the effects of substance use on the human brain during early adolescence into young adulthood. The proposed study will recruit a large sample of children prior to substance use initiation and follow them for a decade, throughout adolescence and into young adulthood, deploying a range of neuroimaging, behavioral, and other assessment tools to monitor individual trajectories of brain development and related outcomes. NIH has issued a request for information to solicit advice for this project from the extramural research community and other stakeholders. Comments accepted through August 31, 2014.

<http://www.drugabuse.gov/about-nida/noras-blog/2014/07/seeking-input-research-community-upcoming-longitudinal-study-adolescent-substance-use>

## FUNDING INFORMATION

HEALTHY HABITS: TIMING FOR DEVELOPING SUSTAINABLE HEALTHY BEHAVIORS IN CHILDREN AND ADOLESCENTS GRANT

<http://grants.nih.gov/grants/guide/pa-files/PA-11-328.html>

ENHANCING PUBLIC HEALTH SURVEILLANCE OF AUTISM SPECTRUM DISORDER AND OTHER DEVELOPMENTAL DISABILITIES THROUGH THE AUTISM AND DEVELOPMENTAL DISABILITIES MONITORING NETWORK

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=261185>

NIMH MENTORING NETWORKS FOR MENTAL HEALTH RESEARCH EDUCATION (R25)

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=260868>

NIMH SHORT COURSES FOR MENTAL HEALTH-RELATED RESEARCH EDUCATION (R25)

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=260870>

NIMH RESEARCH EDUCATION PROGRAMS FOR PSYCHIATRY RESIDENTS (R25)

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=260871>

INTERVENTIONS FOR YOUTH WHO MISUSE/ABUSE PRESCRIPTION STIMULANT MEDICATIONS IN HIGH SCHOOL AND/OR COLLEGE-ATTENDING YOUTH

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=260043>



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 nonprofit 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.