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# UPDATE

May 1, 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*

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## SCIENCE AND SERVICE NEWS UPDATES

**SUPPRESSING PROTEIN MAY STEM ALZHEIMER'S DISEASE PROCESS; RUNAWAY REGULATOR CLOGS REMOVAL OF TOXIC DEBRIS – NIH-FUNDED STUDY**

Scientists funded by the National Institutes of Health (NIH) have discovered a potential strategy for developing treatments to stem the disease process in Alzheimer's disease. It's based on unclogging removal of toxic debris that accumulates in patients' brains, by blocking activity of a little-known regulator protein called CD33. The author of the study, a grantee of NIH's National Institute of Mental Health (NIMH) and National Institute on Aging, reported the findings April 25, 2013 in the journal *Neuron*.

**Press Release:** <http://www.nimh.nih.gov/news/science-news/2013/suppressing-protein-may-stem-alzheimers-disease-process.shtml>

**SAMHSA IS ACCEPTING APPLICATIONS FOR UP TO \$11.3 MILLION IN SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT MEDICAL PROFESSIONAL TRAINING PROGRAM GRANTS**

The Substance Abuse and Mental Health Services Administration (SAMHSA) is accepting applications for up to \$11.3 million in Screening, Brief Intervention, and Referral to Treatment Medical Professional Training Program grants. The purpose of the program is to develop and implement training programs to teach health professionals (medical residents and students of nursing, social work, and counseling) the skills necessary to provide evidence-based screening, brief intervention and brief treatment, and to refer patients who are at risk for a substance use disorder to appropriate treatment.

**Press Release:** <http://www.samhsa.gov/newsroom/advisories/1304224347.aspx>

**NIH RESEARCHERS IDENTIFY PATHWAY THAT MAY PROTECT AGAINST COCAINE ADDICTION**

A study by NIH researchers gives insight into changes in the reward circuitry of the brain that may provide resistance against cocaine addiction. Scientists found that strengthening signaling along a neural pathway that runs through the nucleus accumbens – a region of the brain involved in motivation, pleasure, and addiction – can reduce cocaine-seeking behavior in mice.

**Press Release:** <http://www.niaaa.nih.gov/news-events/news-releases/pathway-cocaine-addiction>

**RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES****NEW ON NIMH WEBSITE****DIRECTOR'S BLOG: TRANSFORMING DIAGNOSIS**

NIMH Director Thomas Insel describes the NIMH Research Domain Criteria (RDoC) project, and how NIMH will be supporting research projects that look across traditional diagnostic categories to begin to develop a better diagnostic system. <http://www.nimh.nih.gov/about/director/2013/transforming-diagnosis.shtml>

**MENTAL DISORDERS AS BRAIN DISORDERS: THOMAS INSEL AT TEDXCALTECH**

The past 30 years have seen a decrease in deaths from medical causes such as leukemia and heart disease. Yet the rate of suicide has stayed the same. Given that 90 percent of suicides are related to mental illness, NIMH Director Thomas Insel proposes a new way to approach these conditions and to bring these numbers down in a talk at TEDx Caltech in January 2013. <http://www.nimh.nih.gov/about/updates/2013/mental-disorders-as-brain-disorders-thomas-insel-at-tedxcaltech.shtml>

**ALLIANCE FOR RESEARCH PROGRESS: MEETING SUMMARY**

NIMH has posted a summary of its 18<sup>th</sup> meeting of the NIMH Alliance for Research Progress (Alliance). At the February 8 Alliance meeting, participants heard about accelerating cures, catalyzing translational research, implementing evidence-based psychotherapies in the U.S. Department of Veterans' Affairs (VA), and building the agenda for mental health parity. NIMH staff also solicited public comment on a research concept entitled, "Reducing Duration of Untreated Psychosis in the United States," which was approved by participants. <http://www.nimh.nih.gov/outreach/alliance/alliance-report-february-2013/alliance-for-research-progress-february-8-2013-meeting.shtml>

**NIH RESEARCH MATTERS****RESEARCH HINTS AT NEW APPROACH TO ADDICTION**

A study in rats found that stimulating a specific part of the brain reduces compulsive cocaine seeking. The finding suggests a potential approach to changing addictive behavior.

<http://www.nih.gov/researchmatters/april2013/04152013addiction.htm>

**SEEING INTO THE BRAIN**

Researchers developed a technique that preserves the brain's 3-D structure down to the molecular level. The accomplishment allows study of the brain's inner workings at a scale never before possible.

<http://www.nih.gov/researchmatters/april2013/04222013brain.htm>

## NEW FROM NIDA

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### OPIOID AND PAIN MANAGEMENT CMES AVAILABLE FROM NIDA

Developed by the NIH's National Institute on Drug Abuse and Medscape Education, with funding from the White House Office of National Drug Control Policy, these continuing medical education (CME) courses provide practical guidance for physicians and other clinicians in screening pain patients for substance use disorder risk factors before prescribing, and in identifying when patients are abusing their medications. The courses use videos that model effective communication about sensitive issues, without losing sight of addressing the pain. <http://www.drugabuse.gov/nidamed/etools>

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### GABAPENTIN TESTED TO TREAT MARIJUANA DEPENDENCE

Marijuana-dependent outpatients who were treated with gabapentin in a pilot clinical trial reduced their cannabis use more and reported fewer symptoms of drug withdrawal than patients who received a placebo. NIDA-supported researchers suggest that their results warrant larger trials to test the medication's potential efficacy in the broad population of individuals dependent on cannabis. <http://www.drugabuse.gov/news-events/nida-notes/2013/04/gabapentin-tested-to-treat-marijuana-dependence>

## AHRQ REPORTS

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### INTERVENTIONS TO IMPROVE CARDIOVASCULAR RISK FACTORS IN PEOPLE WITH SERIOUS MENTAL ILLNESS

A new research review from the Agency for Healthcare Research and Quality (AHRQ) evaluates interventions to improve cardiovascular disease (CVD) risk factors in patients with serious mental illness (SMI). Individuals with SMI have excess mortality from CVD and high rates of risk factors such as diabetes, obesity, and hyperlipidemia. The review finds moderate strength of evidence that behavioral interventions are associated with small decreases in weight. No interventions were found to be effective for glucose control and hyperlipidemia in this patient population. <http://effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productID=1471&ECem=130422>

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### MORE RESEARCH ON CHILD MALTREATMENT NEEDED

An urgent need exists to build and improve upon the evidence base for interventions promoting the well-being of maltreated children, according to a new research review from AHRQ's Effective Health Care Program. While treatment recommendations are still preliminary, a number of interventions show promising comparative benefit for improving child well-being outcomes. The two approaches that have emerged with relatively strong evidence are: SafeCare, a home-visiting approach involving maltreating parents; and Keeping Foster Parents Trained and Supported, a foster parent training program; however, more methodologically rigorous research is needed to evaluate these and other interventions due to limited evidence. <http://www.effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productid=1422&pccem=en>

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#### MARYLAND GUIDES PRESCRIBERS ON USE OF ATYPICAL ANTIPSYCHOTIC MEDICATIONS: CASE STUDY

This case study reports on the Maryland Department of Health and Mental Hygiene use of materials created by AHRQ's Effective Health Care Program to provide education on the appropriate use of antipsychotic medications in children. Maryland's Physician Advisor to the Deputy Secretary for Health Care Financing worked with staff to establish a program to promote the safe and appropriate use of antipsychotics in children through a peer-review authorization program. The program developed criteria for use with input from child psychiatrists, psychiatric pharmacists, pediatric health experts, family advocates, and agencies serving children. It also conducts outreach activities to prescriber groups to discuss issues involved in pediatric antipsychotic medication use and to educate them about the program.

<http://www.ahrq.gov/research/findings/case-studies/comparative-effectiveness/ce2013.html>

### SAMHSA RESOURCES

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#### BEHAVIORAL HEALTH SERVICES FOR PEOPLE WHO ARE HOMELESS

This report equips those who provide services to people who are homeless or at risk of homelessness and who need or are in substance abuse or mental illness treatment with guidelines to support their care. It discusses prevention and treatment as part of integrated care. <http://store.samhsa.gov//product/SMA13-4734>

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#### TWITTER CHAT ON TRAUMA: TRANSCRIPT

On March 28, SAMHSA's Recovery Month project hosted an hour-long #RecoveryChat on Twitter with Paulo del Vecchio, M.S.W., Director of the Center for Mental Health Services, as the host. The theme of the chat was *Trauma: Treatment and Recovery Through the Delivery of Behavioral Health Services*. The conversation focused on how to apply treatment and recovery to best support individuals who have experienced trauma. The full transcript is available at: <http://www.recoverymonth.gov/Press-Room/News/2013/March-28-Recovery-Month-Twitter-Chat-on-Trauma-Transcript.aspx>.

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#### REPORT TO CONGRESS ON THE NATION'S SUBSTANCE ABUSE AND MENTAL HEALTH WORKFORCE ISSUES

This report provides an overview of the facts and issues affecting the substance abuse and mental health workforce in America. It presents demographic data on the workforce, major factors that impact the workforce, and efforts to address workforce challenges. <http://store.samhsa.gov//product/PEP13-RTC-BHWORk>

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#### BLOG: WORKING WITH BOSTON TO RECOVER

This blog post reviews resources developed by SAMHSA to help people get the support they need to cope with a tragedy and foster resilience. <http://blog.samhsa.gov/2013/04/26/working-with-boston-to-recover/>

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## INTEGRATING DISASTER BEHAVIORAL HEALTH INTO PUBLIC HEALTH SERVICES

This issue of the SAMHSA newsletter, *THE DIALOGUE*, provides perspective and insight regarding the need to integrate disaster behavioral health into the provision of public health services; how the uniqueness of substance abuse services can benefit from readiness activities; and how the field can deliver services using new technology, particularly social media, to provide rapid preparedness and response communications and support. [http://www.samhsa.gov/dtac/dialogue/Dialogue\\_vol9\\_issue2.pdf](http://www.samhsa.gov/dtac/dialogue/Dialogue_vol9_issue2.pdf)

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## CHILDREN AND DOMESTIC VIOLENCE FACT SHEET SERIES

SAMHSA's National Child Traumatic Stress Network Domestic Violence Collaborative Group announces a new series of fact sheets created for parents whose children have been affected by domestic violence. The set of 10 fact sheets offers education to support the resilience and recovery of these children and families. <http://www.nctsn.org/content/resources>

## NATIONAL CHILDREN'S MENTAL HEALTH AWARENESS DAY RESOURCES

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### SOCIAL MEDIA MESSAGES

Young adults with serious mental health disorders experience higher rates of unemployment than their peers without serious mental health challenges. A 2009 study found that nearly 50 percent of young adults ages 18 to 25 were employed, compared to 66 percent of same-age young adults in the general population. Young adults with behavioral health challenges can be resilient with the help of family, friends, providers, and other Heroes of Hope. SAMHSA has created sample messages to share this data point via Twitter, Facebook, and email. [http://www.samhsa.gov/children/social\\_media\\_apr2013.asp](http://www.samhsa.gov/children/social_media_apr2013.asp)

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### NEW YOUNG ADULT RESOURCES

Transitioning to adulthood can be a challenging phase. Young adults have to learn how to navigate adult health services, live on their own, find and secure a job, and apply for postsecondary education. For young adults with mental health challenges, the transition can be even more difficult. SAMHSA's Caring for Every Child's Mental Health Campaign has developed and collected resources to address these challenges for young adults, family and friends of young adults, and professionals and providers working with young adults. <http://www.samhsa.gov/children/youngadult-home.asp>

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### AWARENESS DAY 2013 ICON

The Awareness Day icon is available for posting on websites and promotional materials. <http://www.samhsa.gov/children/awarenessdaymat.asp>

## RESOURCES FROM ACF

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### ALTERNATIVES FOR FAMILIES: A COGNITIVE-BEHAVIORAL THERAPY

This Administration for Children and Families issue brief highlights the characteristics and benefits of Alternatives for Families: Cognitive Behavioral Therapy (AF-CBT) to help child welfare caseworkers who work with at-risk families make more informed decisions about when to refer children and their caregivers to AF-CBT programs. <https://www.childwelfare.gov/pubs/cognitive/>

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### CHRONIC CHILD NEGLECT

This bulletin for professionals discusses what we know about chronic child neglect and then reviews ways to work with families experiencing chronic neglect, including critical elements of successful casework practice. [https://www.childwelfare.gov/pubs/chronic\\_neglect.cfm](https://www.childwelfare.gov/pubs/chronic_neglect.cfm)

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### PARENT-CHILD INTERACTION THERAPY WITH AT-RISK FAMILIES

This issue brief is intended to build a better understanding of the characteristics and benefits of Parent-Child Interaction Therapy (PCIT), a family-centered treatment approach proven effective for abused and at-risk children ages two to eight years old and their caregivers, birth parents, adoptive parents, or foster or kin caregivers. It was written primarily to help child welfare caseworkers and other professionals who work with at-risk families make more informed decisions about when to refer parents and caregivers, along with their children, to PCIT programs. This information may also help parents, foster parents, and other caregivers understand what they and their children can gain from PCIT and what to expect during treatment. [https://www.childwelfare.gov/pubs/f\\_interactbulletin/](https://www.childwelfare.gov/pubs/f_interactbulletin/)

## OFFICE OF INDIAN ALCOHOL AND SUBSTANCE ABUSE NEWSLETTER FOCUS: SEXUAL ASSAULT

The Spring 2013 issue of SAMHSA's Office of Indian Alcohol and Substance Abuse *Prevention and Recovery* newsletter is now available. In recognition of April as Sexual Assault Awareness month, this issue focuses on sexual assault within Native communities. <http://www.samhsa.gov/tloa/>

## BLUEPRINT TO ADVANCE CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES IN HEALTH AND HEALTH CARE

The U.S. Department of Health and Human Services (HHS) has released enhanced *National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care* – a blueprint to help organizations improve healthcare quality in serving the nation's diverse communities. <http://www.hhs.gov/news/press/2013pres/04/20130424b.html>

## NEW FDA PATIENT NETWORK WEBSITE

The Food and Drug Administration (FDA) has released a new website to educate the community about FDA regulatory and policy issues, the medical product development lifecycle, mechanisms in place to provide stakeholder input, Federal Register notices, and public meetings. It also encourages patients and advocates to communicate with FDA, and shows how patient advocates can serve on FDA working groups, become Patient Representatives, speak at meetings, and more. This is one way the FDA hopes to expand inclusion of the patient perspective in FDA initiatives, problem-solving, decision-making, and medical product development, review, and approval. <http://www.patientnetwork.fda.gov>

## VA'S VETERANS EMPLOYMENT TOOLKIT

This VA tool kit assists employers, managers, supervisors, and human resource professionals support employees who are Veterans or members of the Reserve or National Guard. <http://www.va.gov/vetsinworkplace/>

## REAL WARRIORS: PREPARING CHILDREN FOR DEPLOYMENT

Deployment can be emotionally challenging for the entire military family and it can be especially confusing and stressful for children. Parents can also experience stress, as they wonder how the transition will affect their children and parenting responsibilities. This Real Warriors article focuses on pre-deployment tips that can help prepare military families for the absence of one or both parents. <http://www.realwarriors.net/family/children/deployment.php>

## DCOE BLOG POSTS

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### ART THERAPY MAY PROVIDE HEALING FOR SERVICE MEMBERS

This Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) blog post summarizes the recent meeting, *National Summit: Arts, Health and Well-being Across the Military Continuum*, which is part of the National Initiative for Arts and Health in the Military. As part of this initiative, art therapy is gaining recognition as a healing exercise for service members with psychological health concerns and traumatic brain injury. [http://www.dcoe.health.mil/blog/13-04-26/Art\\_Therapy\\_May\\_Provide\\_Healing\\_for\\_Service\\_Members.aspx](http://www.dcoe.health.mil/blog/13-04-26/Art_Therapy_May_Provide_Healing_for_Service_Members.aspx)

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### SUPPORT TOOLS FOR MILITARY FAMILIES, MILITARY KIDS

This DCoE blog post reviews resources to help children of service members cope with whatever military life might bring their way. [http://www.dcoe.health.mil/blog/13-04-23/Support\\_Tools\\_for\\_Military\\_Families\\_Military\\_Kids.aspx](http://www.dcoe.health.mil/blog/13-04-23/Support_Tools_for_Military_Families_Military_Kids.aspx)

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NEW MOBILE APP: PROVIDER RESILIENCE

With the latest mobile app from DCoE's National Center for Telehealth and Technology (T2), healthcare providers can monitor their own mental health. *Provider Resilience* offers self-assessments that rate burnout risk, compassion fatigue, and secondary traumatic stress, and delivers tools and tips on self-care.

<http://www.dcoe.health.mil/blog/13-04->

[16/Leader\\_With\\_T2\\_Mobile\\_Health\\_Program\\_Talks\\_About\\_Latest\\_Mobile\\_App.aspx](http://www.dcoe.health.mil/blog/13-04-16/Leader_With_T2_Mobile_Health_Program_Talks_About_Latest_Mobile_App.aspx)

## EVENTS

### WEBINAR: BUILDING RELATIONSHIPS BETWEEN FAMILIES AND SCHOOLS

MAY 1, 2013, 4:00–5:30 PM ET AND MAY 2, 2013, 11:00 AM–12:30 PM ET

The U.S. Department of Education (ED) and HHS announce the National Center for Safe Supportive Learning Environment's webinar, *Moving Beyond Open House: Building Meaningful Relationships Between Parents/Families and Schools*. This webinar will review the importance of engaging families with schools; specifically, the webinar will highlight effective strategies for increasing family engagement (at the elementary, middle, and high school levels). The webinar will also review strategies for engaging parents and families both when students are doing well and when they are struggling, and it will address the common barriers to involving hard-to-reach parents and families. It will be offered twice to accommodate schedules.

<http://safesupportivelearning.ed.gov/index.php?id=9&eid=1759>

### WEBINAR: PREVENTING SUICIDE, RESOURCES FOR SCHOOLS

MAY 2, 2013, 2:00-3:30 PM ET

Join the Office of Safe and Healthy Students, Office of Elementary and Secondary Education for a webinar on suicide prevention, including an overview of the National Strategy for Suicide Prevention, discussion on resources available for schools, and examples of how ED grantees are addressing this issue. **To join the webinar, go to**

<https://educate.webex.com/educate/k2/j.php?ED=204848892&UID=1403059137&HMAC=c2ca449037c6a8b3ecf9d7904ad720e8d2098097&RT=MIMxMQ%3D%3D> (Use the session password "Welcome 1")

To join the teleconference only, use the following call in details: phone--877-951-6686 and participant code- 5828011

## NIMH TWITTER CHAT ON ATTENTION DEFICIT HYPERACTIVITY DISORDER

MAY 3, 2013, 11:00AM-12:00PM ET

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Join NIMH for a discussion of attention deficit hyperactivity disorder (ADHD) to help commemorate National Children's Mental Health Awareness Day. NIMH's Ben Vitiello, M.D, from the Child and Adolescent Treatment and Preventive Intervention Research Branch, Division of Services and Intervention Research, will field questions regarding ADHD in children and teens. <http://www.nimh.nih.gov/news/science-news/2013/nimh-twitter-chat-on-attention-deficit-hyperactivity-disorder.shtml>

## WEBINAR: EXPLORING FAMILY-JUVENILE JUSTICE SYSTEM PARTNERSHIP

MAY 8, 2013, 2:00-3:30 PM ET

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The Office of Juvenile Justice and Delinquency Prevention's National Center for Youth in Custody will present the webinar *Family Comes First: Transforming the Justice System by Partnering with Families*. Presenters will discuss findings from the forthcoming *Campaign for Youth Justice* study of best practices in family-system partnerships, showcase examples from jurisdictions that infuse family voice into their systems, and explore features of a transformed juvenile justice system. Presenters will also introduce the FAMILY Model that jurisdictions can use to assess their own systems from a family perspective.

<http://ojjdp.gov/enews/13juvjust/130423.html>

## NATIONAL CHILDREN'S MENTAL HEALTH AWARENESS DAY

MAY 9, 2013

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National Children's Mental Health Awareness Day is a key strategy of the Caring for Every Child's Mental Health Campaign, which is part of the SAMHSA Public Awareness and Support Strategic Initiative. The effort seeks to raise awareness about the importance of children's mental health and that positive mental health is essential to a child's healthy development from birth. <http://www.samhsa.gov/children/national.asp>

## **VIDEOCAST LECTURE: ACHIEVING SCIENTIFIC EQUITY FOR THE PREVENTION OF MENTAL, EMOTIONAL, AND BEHAVIORAL DISORDERS IN MINORITIES AND OTHER POPULATIONS**

MAY 9, 2013, 1:00-3:00 PM ET, BETHESDA, MARYLAND

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In this lecture in the NIH Medicine Mind the Gap series, presenters propose that there is a pressing need for “scientific equity,” or equality in the amount of scientific knowledge that is produced to understand both the potential causes and solutions to many health inequities. The lecture will examine the issue of scientific equity, using prevention interventions as illustrative examples. In addition, key strategies for promoting scientific equity, including conducting more implementation research, utilizing adaptive intervention research designs, and promoting collaborative data synthesis work will be described.

<http://prevention.nih.gov/mindthegap/>

This lecture will be videocast at: <http://videocast.nih.gov/>

## **WEBINAR: CORPORATE PIONEERS—CREATING CULTURES OF CARING: ENHANCING HEALTH AND SAFETY IN THE WORKPLACE AND THE LARGER COMMUNITY**

MAY 9, 2013, 3:00-4:30 PM ET

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This SAMHSA webinar will discuss challenges and workable solutions for promoting wellness in the workplace. Presenters include three employers who have developed and implemented mentally healthy, innovative, cost-effective programs that are making a difference within their respective workplaces. They will share how these can be replicated in other organizations.

<http://promoteacceptance.samhsa.gov/teleconferences/archive/training/teleconference05092013.aspx>

## **WEBINAR: THE AFFORDABLE CARE ACT AND IMPLICATIONS FOR RECOVERY-ORIENTED PRACTICE**

MAY 9, 2013, 3:00-4:30 PM ET

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This SAMHSA Recovery to Practice webinar will address the ways in which implementation of healthcare reform will reinforce and expand the recovery orientation of behavioral healthcare.

<https://events.r20.constantcontact.com/register/eventReg?oeidk=a07e7bqfhfg1d8e4863&oseq=&c=&ch>

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## **NATIONAL PREVENTION WEEK 2013**

MAY 12-18, 2013

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National Prevention Week is a SAMHSA-supported annual health observance dedicated to increasing public awareness of, and action around, substance abuse and mental health issues. This observance is an opportunity to join with other individuals, organizations, and coalitions to promote prevention efforts, educate others about behavioral health issues, and create and strengthen community partnerships. This year's theme emphasizes that the prevention of substance abuse and promotion of mental health starts with the choices everyone makes. Through choices, everyone can set an example of health and well-being for others. With voices—whether spoken or written—everyone can raise awareness of behavioral health issues and help create healthier and safer communities. <http://www.samhsa.gov/preventionweek/>

## **NATIONAL WOMEN'S HEALTH WEEK**

MAY 12-19, 2013

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National Women's Health Week is a weeklong health observance coordinated by the HHS Office on Women's Health. It brings together communities, businesses, government, health organizations, and other groups in an effort to promote women's health and its importance. It also empowers women to make their health a priority and encourages them to take specific steps to improve their physical and mental health and lower their risks of certain diseases. <http://www.womenshealth.gov/nwhw/>

## **WEBINAR: HEALTHY PEOPLE 2020 LEADING HEALTH INDICATOR MENTAL HEALTH**

MAY 23, 2013, 12:00 PM ET

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This Healthy People 2020 webinar will be led by HHS Services Deputy Assistant Secretary for Disease Prevention and Health Promotion and will include a roundtable discussion about the Mental Health Leading Health Indicator. The webinar will highlight how one Tribe has been successful in using data to drive decisions and interventions for addressing youth suicide. <https://hhs-faca.webex.com/hhs-faca/onstage/g.php?t=a&d=992163439>

## THE 8TH ANNUAL NIH PAIN CONSORTIUM SYMPOSIUM ON ADVANCES IN PAIN RESEARCH: INTEGRATED SELF-MANAGEMENT STRATEGIES FOR CHRONIC PAIN

BETHESDA, MARYLAND, MAY 29-30, 2013

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The NIH Pain Consortium holds their annual symposium to highlight new and exciting advances in pain research, featuring work done through NIH support. This year's theme will be *Integrated Self-Management Strategies for Chronic Pain*. Session topics will include: Self-Management Strategies in Community Health Care Settings, Tailored Self-Management Strategies for Patients and Caregivers, and Predictors and Indicators of Outcomes in Integrated Self-Management Strategies. Members of the extramural scientific community, the NIH scientific community, health care providers, and the public are invited to attend. The symposium will be videocast live and archived at <http://videocast.nih.gov>.  
<https://nccam.nih.gov/research/blog/painmanagementsymposium?nav=upd>

## 2013 NIH REGIONAL SEMINAR ON PROGRAM FUNDING AND GRANTS ADMINISTRATION

JUNE 26-28, 2013, BALTIMORE, MARYLAND

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The NIH Regional Seminar on Program Funding and Grants Administration is intended for those new to the grants process, including sponsored project officers and departmental administrators, investigators, faculty, graduate students, etc. Over the course of two days, it also provides an opportunity to those with more experience to obtain updates on grants policies and procedures. Due to the popularity of these seminars, early registration is highly recommended. Space is limited. An optional NIH Electronic Research Administration (eRA) workshop is offered the day before the two-day seminar. This workshop will be one full day for one price. It is designed for administrators and investigators who are new to working with NIH, using the eRA Commons, and desire a better understanding of the overall electronic grants process.  
[http://grants.nih.gov/grants/regionalseminars/Baltimore\\_2013/index.html](http://grants.nih.gov/grants/regionalseminars/Baltimore_2013/index.html)

## CLINICAL TRIAL PARTICIPATION NEWS

### 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]

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/BipolarDisorderPediatric.aspx>

### FDA CONSUMER UPDATES ON RESEARCH

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#### CLINICAL TRIALS SHED LIGHT ON MINORITY HEALTH

This FDA *Consumer Update* discusses the importance of increasing minority participation in clinical trials that test new medical products. Members of minority groups are more vulnerable to certain diseases, but are under-represented in these trials. <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm349063.htm>

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#### RESEARCH IMPROVES MINORITY HEALTH

Medical advances have provided Americans with the potential for longer, healthier lives, but not all Americans are benefitting equally. FDA's Office of Minority Health collaborates with researchers to help improve health for all. <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm349115.htm>

## CALLS FOR PUBLIC INPUT

**COMMENTS SOUGHT: DRAFT RECOMMENDATION STATEMENT ON SCREENING FOR SUICIDE RISK IN ADOLESCENTS, ADULTS, AND OLDER ADULTS**

The U.S. Preventive Services Task Force (Task Force) invites comments on a draft recommendation statement on screening for suicide risk in adolescents, adults, and older adults. This draft recommendation statement applies to teens, adults, and older adults who have not been diagnosed with a mental health condition that increases suicide risk, such as depression, or drug or alcohol abuse. The draft recommendation statement summarizes what the Task Force learned about the potential benefits and harms of screening for suicide risk in a primary care setting: there is not enough evidence to weigh the benefits and harms of screening the general population for suicide risk. Comments will be accepted through May 20, 2013. <http://www.uspreventiveservicestaskforce.org/uspstf13/suicide/suicfact.pdf>

**PROVIDE COMMENTS REGARDING POSSIBLE HIPAA IMPACTS ON REPORTING OF PERSONS WITH CERTAIN MENTAL HEALTH ISSUES TO NATIONAL BACKGROUND CHECK DATABASE**

On January 16, 2013, President Obama announced a series of Executive Actions to reduce gun violence in the United States. These actions include efforts to improve the Federal Government's background check system, called the National Instant Criminal Background Check System (NICS), for the sale or transfer of firearms by licensed dealers. Among those persons who are disqualified from possessing or receiving firearms under Federal law are those "adjudicated to be mentally defective, or who have been committed to a mental institution" (mental health prohibitor). Concerns have been raised that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule may be a barrier to states' reporting to NICS the identities of individuals subject to the mental health prohibitor.

HHS is seeking public comments on how HIPAA may prevent state reporting to NICS, and how these barriers can be addressed without discouraging individuals from seeking mental health services. Additional comments are encouraged on proposals to establish "express permission" for reporting relevant information and on best methods of disseminating HIPAA-related information to state reporting entities.

Public input is also being sought on unintended consequences that such actions may have on individuals seeking mental health services. An important consideration when responding is the effect of the proposed HIPAA change on "temporary hold" cases. Comments will be accepted through June 7, 2013.

[http://www.regulations.gov/#!documentDetail;D=HHS\\_FRDOC\\_0001-0494](http://www.regulations.gov/#!documentDetail;D=HHS_FRDOC_0001-0494)

## HHS OFFICE OF MINORITY HEALTH SEEKING NOMINATIONS FOR ADVISORY COMMITTEE ON MINORITY HEALTH

HHS Office of Minority Health is seeking nominations for the Advisory Committee on Minority Health. The advisory committee advises the HHS Secretary on ways to improve the health of racial and ethnic minority populations, and on the development of goals and program activities within the Department. The deadline for nominations is May 31, 2013. <http://minorityhealth.hhs.gov/templates/content.aspx?ID=3872>

## NEW OPEN DOOR FORUM CREATED ON THE HEALTH INSURANCE MARKETPLACE

The Centers for Medicare and Medicaid Services (CMS) sponsors regularly scheduled "Open Door Forums," providing an opportunity for live dialogue between CMS and the stakeholder community at large. These forums are intended for all stakeholders who interact with CMS, or work with consumers who rely on services that CMS provides. They provide an opportunity for CMS to share current information about new initiatives and policies related to Medicare, Medicaid, the Children's Health Insurance Program, and the new Affordable Care Act benefits, and allow participants to ask questions for further clarification. The ultimate goal of these Open Door Forums is to foster strong collaboration and communication between CMS and a diverse spectrum of stakeholders. To be notified when Open Door Forums are scheduled or when new information is posted to the website, subscribe using the link below: <http://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/index.html?redirect=/OpenDoorForums/>.

## FEEDBACK SOLICITED ABOUT THE NEW SAMHSA.GOV

SAMHSA.gov is being redesigned, reorganized, and rewritten so that it's easier to find and understand information. The new site will be a robust, easy-to-navigate website and will launch in sections over the summer. In the first section that's now live, users can experience the more user-friendly approach to SAMHSA.gov, and provide feedback and suggestions about the new design.

<http://blog.samhsa.gov/2013/05/01/explore-the-new-samhsa-gov/>

## FUNDING INFORMATION

### PEDIATRIC SUICIDE PREVENTION IN EMERGENCY DEPARTMENTS

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-14-070.html>

### LAW ENFORCEMENT AND BEHAVIORAL HEALTH PARTNERSHIPS FOR EARLY DIVERSION

<http://www.samhsa.gov/grants/2013/sm-13-005.aspx>

### YOUTH VIOLENCE TRAINING AND TECHNICAL ASSISTANCE

<http://www.grants.gov/search/search.do;jsessionid=15fhR2LYZDCQfBGMtj6GHcYRjKYLc2GCXkh5FH0sLkVnKfpmpNvj!904487948?oppld=231634&mode=VIEW>



SECOND CHANCE ACT REENTRY PROGRAM FOR ADULT OFFENDERS WITH CO-OCCURRING  
SUBSTANCE ABUSE AND MENTAL HEALTH DISORDERS

<https://www.bja.gov/Funding/13SCACoOccurringDisordersSol.pdf>

COMMUNITY-BASED VIOLENCE PREVENTION FIELD-INITIATED RESEARCH AND EVALUATION  
PROGRAM

<http://www.ojjdp.gov/grants/solicitations/FY2013/CBVPFIRE.pdf>

CMS FUNDING OPPORTUNITY ANNOUNCEMENT FOR MARKETPLACE NAVIGATOR GRANTS

<http://cciio.cms.gov/programs/exchanges/assistance.html>

OUTCOME MEASURES FOR USE IN TREATMENT TRIALS FOR INDIVIDUALS WITH INTELLECTUAL AND  
DEVELOPMENTAL DISABILITIES

<http://grants.nih.gov/grants/guide/pa-files/PAR-13-213.html>



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/partners>. To subscribe to receive the **Update** every two weeks, go to: <http://www.nimh.nih.gov/outreach/partnership-program/subscribe-to-the-update.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.