



UPDATE

January 15, 2015

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

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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*

DESPITE RISKS, BENZODIAZEPINE USE HIGHEST IN OLDER PEOPLE; NATIONAL INSTITUTES OF HEALTH-SUPPORTED STUDY EXAMINES PRESCRIBING PATTERNS

Prescription use of benzodiazepines—a widely used class of sedative and anti-anxiety medications—increases steadily with age, despite the known risks for older people, according to a comprehensive analysis of benzodiazepine prescribing in the United States (U.S.). Given existing guidelines cautioning health providers about benzodiazepine use among older adults, findings from the National Institutes of Health (NIH)-funded study raise questions about why so many prescriptions—many for long-term use—are being written for this age group.

Press Release: <http://www.nimh.nih.gov/news/science-news/2014/despite-risks-benzodiazepine-use-highest-in-older-people.shtml>

SEEKING SINGLE CELLS' SECRETS, NIH AWARDS NEARLY \$8 MILLION IN NEW GRANTS

NIH has awarded grants totaling \$7.9 million in 2014 to 25 research teams who are unraveling the workings of single cells, as part of an effort to spur development of personalized treatments that target disease at the cellular level. The grants are supported by the NIH Common Fund's Single Cell Analysis Program.

Press Release: <http://www.nimh.nih.gov/news/science-news/2014/seeking-single-cells-secrets.shtml>

TEEN PRESCRIPTION OPIOID ABUSE, CIGARETTE, AND ALCOHOL USE TRENDS DOWN; HOWEVER, NIH'S 2014 MONITORING THE FUTURE SURVEY SHOWS HIGH RATES OF E-CIGARETTE USE AND FEWER CONCERNS ABOUT MARIJUANA'S RISKS

Use of cigarettes and alcohol, and abuse of prescription pain relievers among teens has declined since 2013 while marijuana use rates were stable, according to the 2014 Monitoring the Future survey, released by the National Institute on Drug Abuse (NIDA). However, use of e-cigarettes, measured in the report for the first time, is high.

Press Release: <http://www.drugabuse.gov/news-events/news-releases/2014/12/teen-prescription-opioid-abuse-cigarette-alcohol-use-trends-down>

COMBINING BENZODIAZEPINES WITH OTHER SUBSTANCES RAISES RISKS

Benzodiazepines, such as alprazolam, diazepam, clonazepam and lorazepam, are a class of drugs used to relieve symptoms of anxiety, panic attacks, and seizures. They are usually safe when taken as prescribed and directed under a health professional's supervision. However, benzodiazepines can sometimes cause adverse effects – especially if used improperly, or in combination with substances like opioid pain relievers or alcohol. A new report by the Substance Abuse and Mental Health Services Administration (SAMHSA) shows that 32 percent of hospital emergency department visits involving benzodiazepines resulted in serious medical outcomes such as hospitalization (or in rare cases, death).

Press Release: <http://www.samhsa.gov/newsroom/press-announcements/201412181000>

FDA CONSUMER ADVICE ON POWDERED PURE CAFFEINE

The Food and Drug Administration (FDA) is warning about powdered pure caffeine being marketed directly to consumers, and recommends avoiding these products. In particular, FDA is concerned about powdered pure caffeine sold in bulk bags over the internet. The FDA is aware of at least two deaths of young men who used these products. These products are essentially 100 percent caffeine. A single teaspoon of pure caffeine is roughly equivalent to the amount in 25 cups of coffee. Pure caffeine is a powerful stimulant and very small amounts may cause accidental overdose. Parents should be aware that these products may be attractive to young people. Symptoms of caffeine overdose can include rapid or dangerously erratic heartbeat, seizures, and death. Vomiting, diarrhea, stupor, and disorientation are also symptoms of caffeine toxicity. These symptoms are likely to be much more severe than those resulting from drinking too much coffee, tea, or other caffeinated beverages.

Advisory:

<http://www.fda.gov/food/recallsoutbreaksemergencies/safetyalertsadvisories/ucm405787.htm>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NEW FROM NIMH

NIMH DIRECTOR'S BLOG: BEST OF 2014

National Institute of Mental Health (NIMH) Director Thomas Insel offers an overview of his top 10 mental health stories for 2014. <http://www.nimh.nih.gov/about/director/2014/best-of-2014.shtml>

NIMH DIRECTOR'S BLOG: WHAT CAUSED THIS TO HAPPEN?

NIMH Director Thomas Insel discusses the idea that chance may have as much to do with the development of mental illness as do genetic and environmental factors.

<http://www.nimh.nih.gov/about/director/2015/what-caused-this-to-happen.shtml>

ARCHIVED TWITTER CHAT: CLINICAL RESEARCH PARTICIPATION

The transcript from the NIMH Twitter chat on clinical research participation is available.

<https://storify.com/NIMHgov/nimh-twitter-chat-on-clinical-research-participati>

OUTREACH CONNECTION: LATEST ISSUE AVAILABLE

The latest issue of the NIMH Outreach Partnership Program e-newsletter, *Outreach Connection*, is available. The issue features how its Program partners are bringing research to the community.

<http://content.govdelivery.com/accounts/USNIMH/bulletins/e5180e>

NEW FROM NIDA

NIDA SCIENCE SPOTLIGHT: PRESCRIPTIONS FOR ANTI-ANXIETY MEDICATIONS PUT TEENS AT RISK

Teens prescribed anxiety or sleep medications are more likely to abuse them later (compared to those who had never had a prescription). Teens reported they used these medications to self-treat insomnia or anxiety, or to get “high.” This research, the first longitudinal study to examine nonmedical use and medical misuse of anxiety and sleep medications among adolescents, was conducted by scientists at the University of Michigan and funded by NIDA and the National Center for Advancing Translational Sciences. The findings highlight the need for prevention strategies targeting youth who may be at risk for prescription medication abuse.

<http://www.drugabuse.gov/news-events/news-releases/2014/12/prescriptions-anti-anxiety-medications-put-teens-risk>

NIDA LATEST SCIENCE: DEPRESSIVE SYMPTOMS AND DRUG ABUSE IN ADOLESCENTS

Research has suggested that depressive symptoms are linked to the initiation of drug taking in adolescents. A recent study by researchers at the University of Southern California examined negative urgency—or acting rashly during periods of extreme negative emotion—as the mechanism linking depressive symptoms and substance abuse initiation. <http://www.drugabuse.gov/news-events/latest-science/depressive-symptoms-drug-abuse-in-adolescents>

NIDA NOTES: COMMUNITIES THAT CARE SYSTEM HELPS PREVENT PROBLEM BEHAVIORS IN YOUTH THROUGH 12TH GRADE

The latest evaluation of a 24-town trial of Communities That Care (CTC) found that CTC-associated reductions in current substance use and delinquency, which had been observed when the children were in grades 8 and 10, were no longer evident in 12th grade. A benefit of CTC persisted, however. Although similar percentages of youths who had lived in CTC-using and comparison towns while in middle school reported that they had avoided those behaviors in 12th grade, higher percentages of those in CTC-using towns had done so in all previous grades as well. <http://www.drugabuse.gov/news-events/nida-notes/2014/12/communities-care-system-helps-prevent-problem-behaviors-in-youth-through-12th-grade>

NIDA SCIENCE SPOTLIGHT: NICOTINE METABOLISM RATES MAY IMPACT SUCCESS OF SMOKING CESSATION TREATMENTS

A randomized clinical trial of smokers trying to quit found that the effectiveness of particular smoking cessation therapies might relate to how quickly their body metabolizes nicotine. The study compared success rates of the nicotine patch versus the prescription medication, varenicline.

<http://www.drugabuse.gov/news-events/news-releases/2015/01/nicotine-metabolism-rates-may-impact-success-smoking-cessation-treatments>

NIDA SCIENCE SPOTLIGHT: EFFECTS OF CIGARETTE SMOKING ON BRAIN DIFFER BETWEEN MEN AND WOMEN

Researchers from Yale University discovered that brain activation during smoking occurs differently in men than in women. The study funded by NIDA and the NIH Office of Research on Women's Health showed that dopamine release in nicotine-dependent men during smoking occurred in the part of the brain associated with drug reinforcement. The dopamine response in women was found within a part of the brain associated with habit formation. The scientists suggest that these findings support previously published data that shows men tend to be reinforced by the nicotine in cigarettes, while women, though no less dependent on nicotine, smoke for reasons that may be related to mood or from habit. Understanding the differences of nicotine's impact on the brains of both men and women could help identify effective gender-sensitive approaches to smoking cessation. <http://www.drugabuse.gov/news-events/news-releases/2015/01/effects-cigarette-smoking-brain-differ-between-men-women>

NIDA SCIENCE SPOTLIGHT: WOMEN WHO RECEIVE GENDER-SPECIFIC SUBSTANCE ABUSE TREATMENT HAVE GREATER CHANCE OF EMPLOYMENT

Women who receive treatment in gender-sensitive programs are more likely to be employed 12 months after treatment admission than women in more traditional treatment programs, according to research funded by NIDA. Additionally, women who complete treatment have greater odds of being employed than women not completing treatment. <http://www.drugabuse.gov/news-events/news-releases/2014/12/women-who-receive-gender-specific-substance-abuse-treatment-have-greater-chance-employment>

METHAMPHETAMINE OR AMPHETAMINE ABUSE LINKED TO HIGHER RISK OF PARKINSON'S DISEASE

People who abuse amphetamine-type drugs such as methamphetamine may be at increased risk for developing dopamine-related disorders such as Parkinson's disease, according to recent research funded by NIDA and the National Cancer Institute. This is consistent with prior studies in animals showing that abuse of these drugs can damage dopamine neurons. <http://www.drugabuse.gov/news-events/news-releases/2014/12/methamphetamine-or-amphetamine-abuse-linked-to-higher-risk-parkinsons-disease>

NIA: UNDERSTANDING MEMORY LOSS: WHAT TO DO WHEN YOU HAVE TROUBLE REMEMBERING

This booklet from the National Institute on Aging describes the difference between mild forgetfulness and more serious memory problems; causes of memory problems and how they can be treated; and how to cope with serious memory problems. <http://www.nia.nih.gov/alzheimers/publication/understanding-memory-loss/introduction>

SAMHSA RESOURCES

SUICIDE PREVENTION RESOURCE CENTER VIDEO SERIES

SAMHSA's Suicide Prevention Resource Center announces the launch of a new video series, *SPARK Talks: Suicide Prevention, Innovation, and Action*. SPARK Talks are short, provocative, action-oriented, realistic, and knowledgeable videos of leaders in the suicide prevention movement. Each of these innovators describes a new development or direction in the field that can have an impact on suicide and issues a call to action. <http://sparktalks.sprc.org/>

HOW TO COPE WITH SHELTERING IN PLACE

This fact sheet offers tips people can use to cope with sheltering in place. It explains reactions people often feel when sheltering in place; suggests ways to care for oneself and the family, such as making a plan and staying connected; and provides additional helpful resources. <http://store.samhsa.gov/product/SMA14-4893>

TAKING CARE OF YOUR BEHAVIORAL HEALTH: TIPS FOR SOCIAL DISTANCING, QUARANTINE, AND ISOLATION DURING AN INFECTIOUS DISEASE OUTBREAK

This fact sheet explains social distancing, quarantine, and isolation in the event of an infectious disease outbreak, such as Ebola. It discusses feelings and thoughts that may arise during this time and suggests ways to cope and support oneself during such an experience. <http://store.samhsa.gov/product/SMA14-4894>

CLINICAL USE OF EXTENDED-RELEASE INJECTABLE NALTREXONE IN THE TREATMENT OF OPIOID USE DISORDERS: A BRIEF GUIDE

This resource offers guidance on the use of medication-assisted treatment (MAT) with extended-release injectable naltrexone for the treatment of an opioid use disorder. It covers patient assessment, initiating MAT, monitoring progress, and deciding when to end treatment. <http://store.samhsa.gov/product/SMA14-4892>

TESTIFYING IN COURT ABOUT TRAUMA: THE COURT HEARING

This fact sheet from SAMHSA's National Child Traumatic Stress Network (NCTSN) helps clinicians prepare for testifying in court. In addition to a case example, it depicts what clinicians can expect in court, defines legal terms, delineates the types of cases in which clinician testimony might be required, explains the roles of "expert" witness and "fact" witness, describes how to testify effectively (with specific talking points), charts behaviors traumatized children may display and possible contributing factors from a trauma perspective, explains witness rights, presents a checklist to use prior to the hearing day, and gives self-care tips for managing anxiety during the hearing.

http://www.nctsn.org/sites/default/files/assets/pdfs/testifying_fact_sheet_final2.pdf

SUPPORTING PATIENTS IN OPIOID TREATMENT PROGRAMS

This blog post describes a new SAMHSA initiative developed to improve the access to, and continuity of, care for patients in opioid treatment programs OTPs. SAMHSA's Health Information Technology (HIT) team partnered with SAMHSA's Division of Pharmacologic Therapies to develop and pilot new data sharing technologies for patients to use in the event of service disruptions. Request for Contracts for this program will be released on February 15, 2015. An important aspect of this new project will be ensuring patient confidentiality – and dignity – is preserved. Patients will use HIT to assist them in sharing their health information with health care providers and ensuring their continued care in the event of an emergency or other service disruption. The pilots will incorporate the Data Segmentation for Privacy standards that allow patients to share specific parts of their medical record.

<http://blog.samhsa.gov/2015/01/14/supporting-patients-in-opioid-treatment-programs/>

TEEN HEALTH BY STATE

The U.S. Department of Health and Human Services (HHS), Office of Adolescent Health updated its fact sheets on teens' healthy relationships, mental health, physical health, reproductive health, and substance abuse. Based on new federal data, these fact sheets enable visitors to see the health status of adolescents across all 50 states, Washington, D.C., Puerto Rico, and Guam. <http://www.hhs.gov/ash/oah/resources-and-publications/facts/>

HHS BLOG: WHY IS SLEEP IMPORTANT?

This HHS blog post discusses the importance of sleep. Recent findings suggest that investing in sleep health contributes to maintaining brain health, and ultimately protecting cognitive functions necessary for aging-in-place. Recognizing and addressing sleep health issues presents opportunities for enhancing public health and improving the well-being of all people. <http://www.hhs.gov/blog/2014/12/29/why-sleep-important.html>

NEW FROM CENTERS FOR DISEASE CONTROL AND PREVENTION

ESSENTIALS FOR PARENTING TODDLERS AND PRESCHOOLERS

Essentials for Parenting Toddlers and Preschoolers, a free, online resource developed by the Centers for Disease Control and Prevention (CDC) for parents of toddlers and preschoolers addresses common parenting challenges. Skills focus on encouraging good behavior and decreasing misbehavior using proven strategies like positive communication, structure and rules, clear directions, and consistent discipline and consequences. Although the examples used are specific for parents of toddlers and preschoolers, the general skills and tips can be applied to children of all ages.

<http://www.stopbullying.gov/blog/2014/12/17/cdc-essentials-parenting-toddlers-and-preschoolers-using-positive-parenting-promote>

VITAL SIGNS: ALCOHOL POISONING DEATHS – UNITED STATES, 2010-2012

Approximately 38 million U.S. adults report binge drinking an average of four times per month and consuming an average of eight drinks per episode. Alcohol poisoning is typically caused by binge drinking at high intensity. CDC analyzed data for 2010 to 2012 from the National Vital Statistics System to assess average annual alcohol poisoning deaths and death rates. This report describes the results of that assessment. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm63e0106a1.htm>

MORTALITY IN THE UNITED STATES, 2013

This report presents 2013 U.S. final mortality data on deaths and death rates by demographic and medical characteristics. These data provide information on mortality patterns among U.S. residents by such variables as sex, race and ethnicity, and cause of death. Information on mortality patterns is key to understanding changes in the health and well-being of the U.S. population. Life expectancy estimates, age-adjusted death rates by race, ethnicity and sex, 10 leading causes of death, and 10 leading causes of infant death were analyzed by comparing 2013 final data with 2012 final data. Life expectancy for the U.S. population in 2013 was unchanged from 2012 at 78.8 years. The 10 leading causes of death in 2013 remained the same as in 2012, except unintentional injuries, which became the fourth leading cause, while stroke became the fifth.

<http://www.cdc.gov/nchs/data/databriefs/db178.htm>

THE BULLY-SEXUAL VIOLENCE PATHWAY IN EARLY ADOLESCENCE

This information brief highlights the early findings from a three-year study aimed at examining the overlap between bullying and sexual violence victimization and perpetration in five middle schools in a Midwest state. The first two waves of the study have shown that bullying perpetration and homophobic teasing were significant predictors of sexual harassment perpetration over time. While these findings are preliminary, they do suggest that homophobic teasing may be a component of bullying that may increase the potential for sexual harassment later. http://www.cdc.gov/violenceprevention/pdf/asap_bullyingsv-a.pdf

NATIONAL CENTER FOR POST-TRAUMATIC STRESS DISORDER: ANIMATED WHITEBOARD VIDEOS

The National Center for Post-Traumatic Stress Disorder (PTSD) has released new “whiteboards”—short animated videos that combine narration with hand-drawn images—about PTSD. The series can also be found and shared easily on YouTube. <http://www.ptsd.va.gov/public/materials/videos/whiteboards.asp>

WHAT IS PTSD

Get an overview of PTSD basics, such as types of trauma and symptoms.
https://www.youtube.com/watch?v=YMC2jt_QVEE&feature=youtu.be

“EVIDENCE-BASED” TREATMENT: WHAT DOES IT MEAN?

Learn what it takes for a treatment to be considered evidence-based.
<https://www.youtube.com/watch?v=7dzkS0ioqqw&feature=youtu.be>

PTSD TREATMENT: KNOW YOUR OPTIONS

Get an overview of evidence-based treatments for PTSD, such as Prolonged Exposure (PE) and Cognitive Processing Therapy (CPT). <https://www.youtube.com/watch?v=FeLLt39DI8A&feature=youtu.be>

PROLONGED EXPOSURE FOR PTSD

Learn what happens in PE and how this treatment can help improve PTSD.
https://www.youtube.com/watch?v=rHg_SIEqJGc&feature=youtu.be

COGNITIVE PROCESSING THERAPY FOR PTSD

Learn what happens in CPT and how this treatment can help improve PTSD.
<https://www.youtube.com/watch?v=Jqj5zDbkPxY&feature=youtu.be>

PRESCRIBING FOR PTSD: KNOW YOUR OPTIONS

Explains PTSD screening and evidence-based treatment options.
<https://www.youtube.com/watch?v=k08Kryo1HiE&feature=youtu.be>

HEALTH OBSERVANCE: HUMAN TRAFFICKING AWARENESS MONTH

JANUARY 2015

In support of Human Trafficking Awareness Month, the National Child Traumatic Stress Network (NCTSN) has resources for mental health professionals, law enforcement personnel, healthcare professionals, and survivors on the signs of trafficking and services for human trafficking survivors.

<http://www.nctsn.org/resources/public-awareness/human-trafficking>

WEBINAR: AFFORDABLE CARE ACT 101 (IN SPANISH)

JANUARY 17, 2015 2:00-3:00 PM ET

This HHS Partnership Center and the Centers for Medicare and Medicaid Services webinar on the health care law for faith and community organizations will discuss what is the Affordable Care Act (ACA) and the Health Insurance Marketplace, how to enroll in the Marketplace, and key websites and resources on the law.

Questions will be answered at the end of the webinar. Please send any questions to ACA101@hhs.gov prior to January 16 at Noon ET. This webinar is open to the public and will include a question-and-answer session.

<https://attendee.gotowebinar.com/register/30000000011214062;jsessionid=abcmHOrFTUi9o67dK2ERu>

WEBINAR: HELPING PEOPLE WITH DISABILITIES GET THE HEALTHCARE COVERAGE THEY NEED

JANUARY 20, 2015, 1:00-2:30 PM ET

This SAMHSA webinar will highlight the National Disability Navigator Resource Collaborative (NDNRC) and help participants think about what questions a person with a disability needs to think about when he or she is considering his or her healthcare options in the ACA Marketplace. In addition, this webinar will discuss NDNRC's leadership in conducting outreach to the disability community to encourage enrollment and how one can be involved in helping people with disabilities get the healthcare coverage they need.

<https://event.on24.com/eventRegistration/EventLobbyServlet?target=registration.jsp&eventid=916863&sessionid=1&key=3CB95ACAD9606E712BFF2936E6CB9BC9&sourcepage=register>

WEBINAR: EXPLORING THE IMPACT OF SUICIDE PREVENTION RESEARCH IN MULTIPLE SETTINGS

JANUARY 20, 2015, 2:00-3:00 PM ET

The Injury Control Research Center for Suicide Prevention, a CDC-funded research center focusing on a public health approach to suicide prevention and research, will begin its third annual webinar series on January 20, 2015. The speakers for the first webinar in the series will be Eric Caine, M.D., ICRC-S Director and Chair, Department of Psychiatry, University of Rochester, and Jane Pearson, Ph.D., Chair, NIMH Suicide Research Consortium, NIMH. Drs. Caine and Pearson will launch this series with an overview of the impact of research on national goals for suicide prevention. They will discuss the efforts of the National Action Alliance for Suicide Prevention, the 2014 work of the Research Prioritization Task Force, and the links between research and practice. <http://edc.adobeconnect.com/e67djhffw6h/event/registration.html>

WEBINAR: SUPPORTING CAREGIVERS OF YOUTH WITH SUBSTANCE USE PROBLEMS AFFECTED BY TRAUMA

JANUARY 21, 2015, 1:00 PM ET

Presenters in this NCTSN webinar will provide a picture of the challenges experienced by families caring for youth with trauma and substance use, address the effect of trauma and substance use in the context of the family, and provide information on promising practices, supports, and resources for families. Featured speakers have experience leading local and national advocacy and support efforts, and will share their personal connection to these family struggles. Participants will be able to (1) identify ways in which trauma and substance use are linked for youth and families; (2) understand the effect of youth substance use and family trauma on family functioning; and (3) learn about promising practices, supports, and resources for families. http://nctsn.org/nctsn_assets/ebulletin/NCTSN_eBulletin_2015_01.html

WEBINAR: HOW TO HOST A HEALTHCARE OUTREACH AND ENROLLMENT EVENT

JANUARY 22, 2015, 1:00-2:00 PM ET

To Join By Phone Only: Dial: +1 (702) 489-0001, Access Code: 479-552-017

For those joining by phone only, the PIN Number is the # key

This HHS Partnership Center and the Centers for Medicare and Medicaid Services webinar on the healthcare law for faith and community organizations will discuss how to hold a successful outreach and enrollment event. Consider hosting an outreach and enrollment event on a Faith Weekend of Action, or the Second Saturday and Second Sunday of the month. Presenters will share a guide to help with hosting enrollment events, show key websites, and answer questions. Experts in hosting enrollment events will share their tips to a successful event. Please send any questions to ACA101@hhs.gov before 10 AM on January 22.

<https://attendee.gotowebinar.com/register/5402301213338428417>

WEBINAR: ADDRESSING THE NEEDS OF SERVING UNACCOMPANIED IMMIGRANT MINORS

JANUARY 22, 2015, 3:00-4:30 PM ET

Together, the Child Welfare League of America and the NCTSN are offering this upcoming webinar addressing the overall mental health and trauma needs of young children and youth that come to the U.S. unaccompanied. The recent growth in the number of minors that have been placed in sponsor homes throughout the country has further increased the gap in available and appropriate services. Presenters will share examples of culturally and linguistically competent interventions to respond to the needs of these youth and families that sponsor them. Presenters will also provide resources and information on available training that can help communities and providers better serve this population.

http://nctsn.org/nctsn_assets/ebulletin/NCTSN_eBulletin_2015_01.html

WEBINAR: NOW IS THE TIME! AFFORDABLE CARE ACT ENROLLMENT TIPS FOR BEHAVIORAL HEALTH PROVIDERS

JANUARY 22, 2015, 3:00-4:30 PM ET

The implementation of the ACA and Parity place behavioral health at the forefront of our Nation's healthcare system, expanding health coverage and the range of available services to millions of individuals who are both uninsured and live with a behavioral health diagnosis. This SAMHSA webinar will explore year two of the healthcare exchanges, best practices in providing enrollment assistance, and why enrollment is critical to the sustainability of behavioral health organizations.

<https://event.on24.com/eventRegistration/EventLobbyServlet?target=registration.jsp&eventid=921644&sessionid=1&key=8304E9FBEC0C98F58869E97BAE114C67&sourcepage=register>

NATIONAL DRUG FACTS WEEK 2015

JANUARY 26-FEBRUARY 1, 2015

National Drug Facts Week (NDFW) is a national health observance for teens to promote local events that use NIDA science to shatter the myths about drugs. This weeklong health observance is an opportunity for teens to learn the facts about drugs and addiction from scientists and other experts. Communities can register their events and receive support from NIDA staff to plan a successful and engaging event. NIDA staff can help organizations order science-based materials to complement events, brainstorm activity ideas, partner with other organizations, and get events nationally recognized by adding them to the official 2015 map for NDFW. <http://teens.drugabuse.gov/national-drug-facts-week>

WEBINAR: THE COURT'S ROLE IN SOLVING MENTAL HEALTH ISSUES IN THE CRIMINAL JUSTICE SYSTEM

JANUARY 27, 2015, 1:00 PM ET

Individuals with mental illness enter the criminal justice system on a repeat basis. What are courts doing to stop the cycle? Should courts get into the business of coordinating mental health treatment for those involved in the criminal justice system? The presenter in this webinar sponsored by the National Center for State Courts, Bureau of Justice Assistance, and the U.S Department of Justice Clearinghouse will discuss these questions in the context of the multitude of mental health court models in operation across the country. <https://www.ncjrs.gov/App/eventscalendar/CalendarSearchDetail.aspx?strConfID=24196>

WEBINAR: CREDENTIALING, LICENSING, AND REIMBURSING PEERS WORKING TO SUPPORT THE BEHAVIORAL HEALTH OF SERVICE MEMBERS, VETERANS, AND THEIR FAMILIES

JANUARY 28, 2015, 2:00-3:30 PM ET

The role of peers is becoming recognized as invaluable to supporting the behavioral health of service members, Veterans, and their families (SMVF). Workforce development includes peer support services as an essential component to meeting this need. Credentialing and licensing SMVF peers can play an important role in workforce development. Although most states now have credentialing and licensing for peer support services, new enhancements include tailoring services to the unique needs of SMVF. This SAMHSA's SMVF Technical Assistance Center webinar will explore the trends and benefits of credentialing, licensing, and reimbursement for peer support services to enhance care for SMVF in every community.

<https://attendee.gotowebinar.com/register/300381442973075969>

WEBINAR: AFFORDABLE CARE ACT 101 FOR INDIVIDUALS AND FAMILIES (IN ENGLISH)

JANUARY 29, 2015, 12:00-1:00 PM ET

To Join By Phone Only: Dial: +1 (646) 307-1717, Access Code: 800-319-266

For those joining by phone only, the PIN Number is the # key

This HHS Partnership Center and the Centers for Medicare and Medicaid Services webinar on the healthcare law for faith and community organizations will discuss what is the ACA and the Health Insurance Marketplace, how to enroll in the Marketplace, key websites, and resources on the law. Open enrollment in the Marketplace ends on February 15. Questions will be answered at the end of the webinar. Please send any questions to ACA101@hhs.gov prior to January 29 at 9 AM ET.

<https://attendee.gotowebinar.com/register/7095174186645607682>

WEBINAR: OUTREACH AND ENROLLMENT STRATEGIES IN LATINO COMMUNITIES

JANUARY 29, 2015, 2:00-3:30 PM ET

A vast majority of uninsured Latino children, an estimated 1.7 million, are eligible for Medicaid or the Children's Health Insurance Program, but not enrolled. Closing the coverage gap for these children requires unique, culturally-competent outreach strategies to connect eligible families with health coverage. This Connecting Kids to Coverage National Campaign webinar will feature experts discussing the challenges and opportunities to conduct outreach and enrollment in the Latino community.

<https://attendee.gotowebinar.com/register/3000000001190818>

ONLINE CHAT: CHAT WITH A SCIENTIST—DRUG FACTS CHAT DAY

JANUARY 30, 2015

Drug Facts Chat Day is an annual live online chat held between high school students and NIDA scientists during NDFW. Students from around the country ask questions about drugs, drug abuse, including drug effects, how to help friends or family that are abusing drugs, and what causes addiction.

<http://teens.drugabuse.gov/national-drug-facts-week/chat-with-scientists>

SAMHSA'S 11TH PREVENTION DAY

FEBRUARY 2, 2015, NATIONAL HARBOR, MARYLAND

SAMHSA will convene its 11th annual Prevention Day in conjunction with Community Anti-Drug Coalitions of America's National Leadership Forum. This year, SAMHSA's Prevention Day will focus on "The Power of Prevention: Making Impact in a Time of Change." This one-day event provides an exciting forum for prevention practitioners, community leaders, researchers, scientists, consumers, and advocates in the behavioral health field to learn about effective programs and the latest prevention-related developments in the areas of substance abuse and mental health. Participants are able to network with other SAMHSA grantees and partners, and will have the opportunity to take part in workshops to enhance their strategic planning and to share experiences and information. <http://forum.cadca.org/?q=node/59>

WEBINAR: HEALTHY PEOPLE 2020 PROGRESS REVIEW: SOCIAL DETERMINANTS OF HEALTH AND LESBIAN, GAY, BISEXUAL, AND TRANSGENDER HEALTH

FEBRUARY 5, 2015, 12:30-2:00 PM ET

This Healthy People 2020 Progress Review webinar will highlight the importance of social determinants of health and cultural competence in working with lesbian, gay, bisexual, transgender, and diverse populations to eliminate health disparities and achieve health equity. This webinar will feature senior HHS officials. Additionally, presenters from a community-based organization will share their experience in offering culturally competent care. <https://hhs-hp.webex.com/mw0401isp11/mywebex/default.do?siteurl=hhs-hp>

2015 HEALTHY AGING SUMMIT

JULY 27-28, 2015, WASHINGTON, DC

The HHS Office of Disease Prevention and Health Promotion is requesting abstracts addressing the science of healthy aging for presentation at the 2015 Healthy Aging Summit. The deadline for submission of abstracts is February 2, 2015. <http://www.2015healthyagingsummit.org>

CALLS FOR PUBLIC INPUT

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The Agency for Healthcare Research and Quality Effective Health Care Program encourages the public to participate in the development of its research projects. The Program uses these comments to help focus its research and ensure that the final comparative effectiveness reviews answer the most important questions that clinicians, patients, consumers, and policymakers have about a given treatment, test, or procedure. The Program is currently seeking comments for:

DISRUPTIVE BEHAVIOR DISORDER (COMMENTS DUE JANUARY 27, 2015)

<http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayProduct&productID=2031>

COMMENTS SOUGHT ON DRAFT POLICY: NIH TAKES STEP TO SPEED THE INITIATION OF CLINICAL RESEARCH BY ENSURING USE OF SINGLE IRB

NIH issued a draft policy to promote the use of single institutional review boards or IRBs, in multi-site clinical research studies. IRBs play a critical role in assuring the ethical conduct of clinical research, and studies must be reviewed and approved by an IRB before they can begin. When the regulations for protection of human subjects were first published, most clinical research was conducted at a single institution. Since then, the research landscape has evolved, and many studies are carried out at multiple sites and within large networks. Studies that go beyond a single site are often able to recruit more individuals from diverse populations. These multi-site studies can often generate important results in less time. However, working through IRB review at each site can add delay without increasing the protections for the research participants in the study.

The draft NIH policy proposes that all NIH-funded, multi-site studies carried out in the U.S., whether supported through grants, contracts, or the NIH intramural program, should use a single IRB. Exceptions to the policy would be allowed if local IRB review is necessary to meet the needs of specific populations or where it is required by federal, state, or tribal laws or regulations. Wider use of single IRB review in multi-site studies will help achieve greater efficiencies in the initiation of studies across NIH's entire clinical research portfolio. NIH is seeking public comments on the draft policy through January 29, 2014.

<http://www.nih.gov/news/health/dec2014/od-03.htm>

REQUEST FOR INFORMATION: NIDA'S DRAFT STRATEGIC PLAN

NIDA is revitalizing its Strategic Plan to provide a framework for the research it will support over the next five years. This Request for Information is intended to gather broad public input on the draft strategic priorities and general recommendations that will sustain recent advances and accelerate discovery in addiction research over the next five years. NIDA invites input from researchers in academia and industry, healthcare professionals, patient advocates and advocacy organizations, scientific or professional organizations, federal agencies, and other interested members of the public. Organizations are encouraged to submit a single response that reflects the views of their organization and membership as a whole.

Responses accepted through January 30, 2015. <http://grants.nih.gov/grants/guide/notice-files/NOT-DA-15-005.html>

SAMHSA IS ACCEPTING PUBLIC COMMENT ON FISCAL YEAR 2016-2017 DRAFT BLOCK GRANT APPLICATION AND PLAN

SAMHSA is accepting public comment on Fiscal Year 2016-2017 draft Block Grant documents. SAMHSA is requesting approval from the Office of Management and Budget for a revision of the 2016 and 2017 Community Mental Health Services Block Grant and Substance Abuse Prevention and Treatment Block Grant Plan and Report Guidance and Instructions. Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received by March 9, 2015. <http://www.samhsa.gov/grants/block-grants>

CLINICAL TRIAL PARTICIPATION NEWS

NATIONWIDE RECRUITMENT: BIPOLAR DISORDER (PEDIATRIC) RESEARCH STUDY

TREATMENT OF SEVERE MOOD DYSREGULATION

(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]

For more information on research conducted by NIMH in Bethesda, MD click here

<http://www.nimh.nih.gov/labs-at-nimh/join-a-study/trials/childrens-studies/citalopram-methylphenidate-irritability.shtml>

FUNDING INFORMATION

SAMHSA: PRIMARY AND BEHAVIORAL HEALTH CARE INTEGRATION

<http://www.samhsa.gov/grants/grant-announcements/sm-15-005>

SAMHSA: STRATEGIC PREVENTION FRAMEWORK PARTNERSHIPS FOR SUCCESS STATE AND TRIBAL INITIATIVE

<http://www.samhsa.gov/grants/grant-announcements/sp-15-003>

SAMHSA: SUICIDE PREVENTION RESOURCE CENTER

<http://www.samhsa.gov/grants/grant-announcements/sm-15-003>

CDC: EVALUATING INNOVATIVE AND PROMISING STRATEGIES TO PREVENT SUICIDE AMONG MIDDLE-AGED MEN

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=270532>

CDC: RESEARCH GRANTS FOR PREVENTING VIOLENCE AND VIOLENCE RELATED INJURY

http://www.acf.hhs.gov/hhsgrantsforecast/index.cfm?switch=grant.view&gff_grants_forecastInfoID=100000257

SECOND CHANCE ACT STRENGTHENING RELATIONSHIPS BETWEEN YOUNG FATHERS AND THEIR CHILDREN: A REENTRY MENTORING PROJECT

<http://www.ojjdp.gov/funding/FundingDetail.asp?fi=348>

OJJDP FY 2015 YOUTH VIOLENCE PREVENTION COORDINATED TECHNICAL ASSISTANCE PROGRAM

<http://www.ojjdp.gov/funding/FundingDetail.asp?fi=347>

VIOLENT GANG AND GUN CRIME REDUCTION PROGRAM (PROJECT SAFE NEIGHBORHOODS)

<https://www.bja.gov/Funding/15PSNsol.pdf>

DRUG ABUSE PREVENTION INTERVENTION RESEARCH

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=271250> (R01)

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=271249> (R03)

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=271248> (R21)

NIH SCIENCE OF BEHAVIOR CHANGE RESOURCE AND COORDINATING CENTER

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=271189>

EVALUATION OF A STEPPED CARE APPROACH FOR PERINATAL DEPRESSION TREATMENT IN OBSTETRICS AND GYNECOLOGY CLINICS

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=270795>



National Institute
of Mental Health

The **Outreach Partnership Program** is a nationwide outreach initiative of the National Institute of Mental Health (NIMH) that enlists state and national organizations in a partnership to increase the public's access to science-based mental health information through partnerships with national and state organizations. For more information about the program please visit: <http://www.nimh.nih.gov/outreach/partnership-program/index.shtml>. To subscribe to receive the **Update** every two weeks, go to: <http://www.nimh.nih.gov/outreach/partnership-program/news-and-updates-from-the-program.shtml>.

The information provided in the **Update** is intended for use by NIMH Outreach Partners, National Partners and their associates for the express purpose of exchanging information that may be useful in the development of state and local mental health outreach, information, education and partnership programs.