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# UPDATE

July 1, 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*

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## **BOYS MORE LIKELY TO HAVE ANTIPSYCHOTICS PRESCRIBED, REGARDLESS OF AGE; NIH-FUNDED STUDY IS THE FIRST LOOK AT ANTIPSYCHOTIC PRESCRIPTIONS PATTERNS IN THE U.S.**

Boys are more likely than girls to receive a prescription for antipsychotic medication regardless of age, researchers have found. Approximately 1.5 percent of boys ages 10 to 18 received an antipsychotic prescription in 2010, although the percentage falls by nearly half after age 19. Among antipsychotic users with mental disorder diagnoses, attention deficit hyperactivity disorder (ADHD) was the most common among youth ages 1 to 18, while depression was the most common diagnosis among young adults ages 19 to 24 receiving antipsychotics. Despite concerns over the rising use of antipsychotic drugs to treat young people, little has been known about trends and usage patterns in the United States before this latest research, which was funded by the National Institute of Mental Health (NIMH), part of the National Institutes of Health (NIH).

**Press Release:** <http://www.nimh.nih.gov/news/science-news/2015/boys-more-likely-to-have-antipsychotics-prescribed-regardless-of-age.shtml>

## **NIH BEGINS CLINICAL TRIAL OF NEW MEDICATION FOR ALCOHOL USE DISORDER**

A clinical trial investigating a potential treatment for alcohol use disorder (AUD) was announced by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), part of the NIH. The study will assess the safety and efficacy of gabapentin enacarbil (HORIZANT) in extended-release tablets for treating moderate to severe AUD.

**Press Release:** <http://www.niaaa.nih.gov/news-events/news-releases/nih-begins-clinical-trial-new-medication-alcohol-use-disorder>

## **SAMHSA'S NATIONAL CHILD TRAUMATIC STRESS INITIATIVE HELPS CHILDREN RECOVER AND THRIVE WITH NEW CAMPAIGN**

Raising awareness about the impact of child traumatic stress, and what parents and caregivers can do to help children recover and thrive is the focus of a new public education campaign launched by the Substance Abuse and Mental Health Services Administration (SAMHSA) and its National Child Traumatic Stress Initiative. The campaign titled, *Helping Kids Recover and Thrive* includes new public service announcements (PSAs) in English and Spanish as well as a website.

**Press Release:** <http://www.samhsa.gov/newsroom/press-announcements/201506150900>

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## VA CAMPAIGN ENCOURAGES PUBLIC TO HELP RAISE PTSD AWARENESS

As the country recognizes Posttraumatic Stress Disorder (PTSD) Awareness Month, the Department of Veterans Affairs (VA) National Center for PTSD (NCPTSD) is inviting the public to participate in its *PTSD Awareness: June 2015* campaign, which began on June 1. This year's goal is to help more Veterans, their families, caregivers, and community members understand what PTSD is and know that there are specific treatments that can help improve and save lives. This year's campaign focuses on online materials and encourages the general public to "learn, connect, and share" to raise PTSD awareness. Anyone can "learn" how PTSD treatment can help, "connect" by reaching out to someone, and "share" what they learn by spreading the word.

Press Release: <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2711>

### RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

#### NEW FROM NIMH

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##### TEEN DEPRESSION BROCHURE--UPDATED

This brochure helps teens understand depression and how it differs from regular sadness. It describes symptoms, causes, and treatments, with information on getting help and coping. This newly revised publication from the National Institute of Mental Health (NIMH) is available online and in print.

<http://www.nimh.nih.gov/health/publications/teen-depression/index.shtml>

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##### BLOG POST: EARLY BRAIN BREAKTHROUGHS

NIMH Director Thomas Insel blogs about recent breakthroughs from the BRAIN Initiative, which show the promise of what can be accomplished with investment focused on new tool development to better understand and treat brain disorders. <http://www.nimh.nih.gov/about/director/2015/early-brain-breakthroughs.shtml>

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##### ACCENTUATE THE POSITIVE: RHYTHM AND BLUES

Researchers were able to reverse some of the behavioral effects of stress in mice by stimulating brain cells activated by pleasure. NIMH Director Thomas Insel describes the work and its implications for understanding depression. <http://www.nimh.nih.gov/about/director/2015/accentuate-the-positive-rhythm-and-blues.shtml>

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## NEW FROM NIH

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### NIDA: ADDICTION IS A DISEASE OF FREE WILL

National Institute on Drug Abuse (NIDA) Director Nora Volkow describes how addiction is not just “a disease of the brain,” but one in which the circuits that enable individuals to exert free will no longer function as they should. Drugs disrupt these circuits. The person who is addicted does not choose to be addicted; it’s no longer a choice to take the drug. <http://www.drugabuse.gov/about-nida/noras-blog/2015/06/addiction-disease-free-will>

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### NIAAA: SPECTRUM NEWSLETTER: EFFECTS OF TEEN DRINKING

The *NIAAA Spectrum* is an online Webzine featuring the latest news from the alcohol research field, infographics, and interviews with NIAAA staff and researchers from the field. The latest issue includes research highlights on brain and behavioral effects of teen drinking. <http://www.spectrum.niaaa.nih.gov/>

## SAMHSA RESOURCES

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### LEAVING A LEGACY: TRANSLATING SPRC’S SUSTAINABILITY RECOMMENDATIONS INTO ACTION

This SAMHSA Suicide Prevention Resource Center (SPRC) report summarizes the feedback received from Garrett Lee Smith (GLS) state, tribal, and campus suicide prevention grantees surveyed in 2012 to determine what suicide prevention efforts they had been able to continue after funding ended and how they were able to continue their program and/or activities. It provides guidelines and worksheets to help current grantees and other agencies and organizations plan how to best continue suicide prevention efforts.

[http://www.sprc.org/library\\_resources/items/leaving-legacy-translating-sprc%E2%80%99s-sustainability-recommendations-action](http://www.sprc.org/library_resources/items/leaving-legacy-translating-sprc%E2%80%99s-sustainability-recommendations-action)

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### CARING FOR ADULT PATIENTS WITH SUICIDE RISK: A CONSENSUS GUIDE FOR EMERGENCY DEPARTMENTS

SAMHSA’s SPRC released a new resource which provides research- and consensus-based practices in decision support, initial interventions, and discharge planning for emergency departments (ED). The *ED Guide* addresses specific objectives articulated by the *2012 National Strategy for Suicide Prevention*, namely, to promote a continuum of care, safety, and well-being for ED patients treated for suicide risk; to collaborate with other health care providers to provide rapid and appropriate follow-up treatment; and to develop standardized protocols that direct clinical responses based on individual patient risk profiles.

<http://www.sprc.org/edguide?sid=47276>

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## THE DIALOGUE: ENVIRONMENTAL DISASTERS AND RESILIENCY

This issue of *The Dialogue* looks at environmental disasters and resiliency. The first article revisits the Gulf Coast and examines the effects from the Deepwater Horizon Oil Spill, five years later. It relates how integrating community organizations into resilience trainings can aid in long-term recovery. The second article reflects on how the looming threat of climate change can affect everyone—those living in directly affected areas as well as those who feel anxiety at the prospect of the planet changing in a long-term way. The final article examines another group of responders—the "first" first responders—in need of culturally competent support and resilience training: 911 telecommunicators.

<http://www.samhsa.gov/sites/default/files/dtac/dialogue-vol-11-issue-2.pdf>

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## CHILDREN'S MENTAL HEALTH AWARENESS DAY WEBCAST

The recorded webcast of the Children's Mental Health Awareness Day national event is now available. The event highlighted the needs of youth and young adults with mental or substance use disorders and their families, while demonstrating how these needs can be best met through integrated care. The event also introduced cutting-edge community strategies for integrating behavioral health care with primary health care, education, and child welfare. [https://www.youtube.com/watch?v=UucoD\\_OkBcA&feature=youtu.be](https://www.youtube.com/watch?v=UucoD_OkBcA&feature=youtu.be)

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## E-SOLUTIONS: HOW ARE STATES PAVING THE WAY FOR (THRIVING) INTEGRATED CARE?

This issue of the SAMHSA-Health Resources and Services Administration Center for Integrated Health Services (CIHS) e-newsletter explores states' activities to change the way care is delivered. The Affordable Care Act (ACA) has prompted many states to take a new look at payment design and system delivery. As states take a dive into redesigning policies and payments, there are many opportunities to ensure new policies support successful integrated primary and behavioral health care delivery.

[http://www.integration.samhsa.gov/about-us/esolutions-newsletter/e-solutions-june-2015#feature\\_article](http://www.integration.samhsa.gov/about-us/esolutions-newsletter/e-solutions-june-2015#feature_article)

## NEW FROM ACF

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### IMMIGRATION AND CHILD WELFARE

Immigrant families involved with child welfare may face a number of particular issues such as legal barriers to accessing services, child trauma resulting from difficult immigration or refugee experiences, a parent's detention/deportation by immigration authorities, and acculturation and language issues. This Administration on Children and Families brief addresses how the child welfare field works with immigrant children and families; examines current issues related to immigration and child welfare; provides examples of programs and practices; and points to resources for professionals, families, and youth.

<https://www.childwelfare.gov/pubs/issue-briefs/immigration/>

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## UNDERSTANDING THE EFFECTS OF MALTREATMENT ON BRAIN DEVELOPMENT

This issue brief provides basic information on brain development and the effects of abuse and neglect on that development. The information is designed to help professionals understand the emotional, mental, and behavioral impact of early abuse and neglect in children who come to the attention of the child welfare system. <https://www.childwelfare.gov/pubs/issue-briefs/brain-development/>

## NEW FROM AHRQ

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### STATS BRIEF: BEHAVIORAL MEDICATION USE

This Agency for Healthcare Research and Quality (AHRQ) statistical brief presents 2012 estimates of the percentage of children and teenagers ages five to 18 in the U.S. civilian noninstitutionalized population taking one or more behavioral medications by select person characteristics. The percentage of boys ages five to 18 taking one or more behavioral medications in 2012 was more than double that of girls: 6.0 percent versus 2.3 percent. [http://meps.ahrq.gov/mepsweb/data\\_files/publications/st473/stat473.shtml](http://meps.ahrq.gov/mepsweb/data_files/publications/st473/stat473.shtml)

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### STATS BRIEF: MEDICAID "SUPER-UTILIZER" PATIENTS

A large proportion of health care resources in the United States (U.S.) are consumed by a relatively small number of individuals. Approximately one-fourth of U.S. health care expenses are incurred by one percent of the U.S. population, and half of expenses are incurred by five percent of the population. In contrast, half of the U.S. population incurs only three percent of total health care expenses. Those few individuals who consume a large share of health care resources have been dubbed super-utilizers. Super-utilizers have become the focus of strategies aimed at reducing their disproportionate use of the health care system by improving the delivery and management of their care. This statistical brief explores characteristics of super-utilizers from Medicare and private insurance with a comparison to Medicaid super-utilizers. Among Medicaid patients younger than 65 in 2012, mood disorder was the most common diagnosis for “super-utilizers” — those with four or more hospital stays. Mental health and substance use disorders were among the top 10 principal diagnoses for super-utilizers aged 1 to 64 years regardless of payer. <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb190-Hospital-Stays-Super-Utilizers-Payer-2012.jsp>

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### HOSPITALIZATIONS INVOLVING MENTAL AND SUBSTANCE USE

Mental and substance use disorders (M/SUDs) are major contributors to the global burden of disease, involving substantial social and economic costs. This statistical brief summarizes data on adult hospitalizations involving M/SUDs in 2012. Patient characteristics of inpatient stays involving M/SUD diagnoses are discussed and compared with all other types of stays. Separate estimates are provided for stays involving mental disorder diagnoses without SUDs. <http://www.ahrq.gov/news/hcup.html>

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## NEW FROM REAL WARRIORS

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### RESEARCH UPDATE: ADVANCEMENT IN TREATMENT STUDIES FOR PTSD

While evidence-based treatments for PTSD exist such as cognitive processing therapy and prolonged exposure, researchers with the Military Health System and VA continue to develop and improve treatment options. Continued research in this field ensures that service members receive the best care possible. Research goals include improving efficiency, reducing symptoms at a faster pace, and addressing treatment-resistant PTSD. This article highlights current research on: transcranial magnetic stimulation, stellate ganglion block, and genome-wide association studies.

<http://www.realwarriors.net/healthprofessionals/guidelines/treatmentstudies.php>

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### RECOGNIZING AND SEEKING HELP FOR SUBSTANCE MISUSE

Substance misuse is the use of a substance in a way that negatively affects physical, mental, emotional, or social well-being. Examples of substances that can be misused include alcohol, prescription and over-the-counter medication, illegal drugs, nicotine, and even caffeine. Some service members turn to substance use as a way to cope with difficult events or feelings. This article identifies effects of substance misuse, lists ways to overcome concerns about getting help, and provides options for care.

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

### PTSD RESEARCH QUARTERLY: TECHNOLOGY AND PTSD CARE: AN UPDATE

Rapid innovations in technology have opened the door to creative therapeutic approaches and have also facilitated the dissemination of evidence-based care. The Internet has served as a vehicle for providing treatment to patients with PTSD. Telemental health technology has overcome many barriers to care and made evidence-based treatment available to patients who live in remote areas. Furthermore, efforts to disseminate best practices have utilized web-based and mobile phone applications to promote the adoption of evidence-based treatments by clinicians. This issue of the *NCPTSD Research Quarterly* provides a guide to the rapidly expanding literature on the effectiveness of technology-based approaches.

<http://www.ptsd.va.gov/professional/publications/ptsd-rq.asp>

### DCOE BLOG POST: IRAQ WAR VETERAN TALKS ABOUT PTSD, RECOVERY

Master Sergeant Chris Eder didn't know what PTSD was when he was diagnosed with it after two deployments to Iraq. Eder, who racked up more than two decades of service as a public affairs officer in the Air Force, was sent to Baghdad in 2003 and 2007 to serve with the American Forces Network attached to the Multi-National Forces Iraq-Combined Press Information Center. He shares his story of treatment and recovery in this Defense Centers for Excellence in Psychological Health and Traumatic Brain Injury (DCoE) blog post. [http://www.dcoe.mil/blog/15-06-16/Iraq\\_War\\_Veteran\\_Talks\\_About\\_PTSD\\_Recovery.aspx](http://www.dcoe.mil/blog/15-06-16/Iraq_War_Veteran_Talks_About_PTSD_Recovery.aspx)

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**WEBINAR: BEHAVIORAL HEALTH WORKFORCE DEVELOPMENT PRIORITY: WOMEN SERVICE MEMBERS AND VETERANS**

JULY 7, 2:00 PM ET

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SAMHSA's Service Members, Veterans, (SMV) and their Families Technical Assistance Center is hosting a webinar that will explore the unique treatment needs of female SMVs and how the behavioral health field can build the capacity to treat this population. <https://goto.webcasts.com/starthere.jsp?ei=1068858>

**WEBINAR: WHY INTEGRATED CARE PROVIDERS MUST ADDRESS VIRAL HEPATITIS**

JULY 8, 2:00-3:30 PM ET

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Five to seven million people in the U.S. are infected with the Hepatitis C virus (HCV) and at least half are unaware of their infection. Individuals with mental health and substance use conditions are at increased risk for infection, which means integrated primary and behavioral health care providers have the potential to significantly decrease the rate of infection. Medical advances in HCV treatment in the last year emphasize the role of integrated care settings to address this public health concern. In partnership with the SAMHSA-funded Addiction Technology Transfer Centers, CIHS is hosting this webinar to learn more about providing services to people with HCV and to those at risk for the infection in safety-net settings. Participants will learn how to address both the HCV-related medical issues and the underlying behavioral health issues that increase risk of infection. <https://goto.webcasts.com/starthere.jsp?ei=1068566>

**WEBINAR: EVIDENCE-BASED HOUSING APPROACHES FOR PERSONS WITH BEHAVIORAL HEALTH NEEDS IN THE JUSTICE SYSTEM**

JULY 8, 2015, 2:00-3:15 PM ET

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Programs that work with adults in the justice system often identify access to safe and affordable housing as their most significant challenge. This SAMHSA GAINS Center webinar examines the evidence on the role of a variety of housing approaches in reducing criminal behavior and improving behavioral health outcomes. In addition, the webinar offers strategies that government agencies and providers can take to establish and implement effective housing options. <http://gainscenter.samhsa.gov/eNews/may15.html>



## WEBINAR: THE ROLE OF PEER SUPPORT IN SUICIDE PREVENTION

JULY 13, 2015, 3:00-4:00 PM ET

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This VA seminar will cover the various roles peers have in supporting individuals at high risk for suicide. The talk will include a brief review of the literature and a presentation of the framework for an ongoing pilot randomized controlled trial of peer mentorship by certified peer support specialists for reducing suicide risk following psychiatric hospitalization. <https://attendeegotowebinar.com/register/2245480186524609794>

## WEBINAR: MOTIVATIONAL INTERVIEWING FOR PERSONS WITH BEHAVIORAL HEALTH NEEDS IN THE JUSTICE SYSTEM

JULY 14, 2015, 2:00-3:15 PM ET

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Motivational interviewing is a widely implemented approach for promoting engagement and adherence to treatment for people with M/SUDs. This SAMHSA GAINS Center webinar discusses the evidence for motivational interviewing with justice-involved persons. Practical considerations for the use of motivational interviewing in mental health courts and other program models will be discussed as well. A fact sheet will accompany the webinar as a supporting document. <http://gainscenter.samhsa.gov/eNews/may15.html>

## WEBINAR: ADVANCING THE SUSTAINABILITY OF PROS AND RCOS

JULY 22, 2015, 1:00–2:30 PM ET

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SAMHSA's Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) project is hosting this webinar on the sustainability of peer-run organizations (PROs) and recovery community organizations (RCOs). The webinar will provide strategies and tools to help them develop their capacity, strengthen their processes, support their staff teams, maximize the effectiveness of their leadership, and implement policies and procedures that support recovery and promote organizational stability. <https://www.eventbrite.com/e/advancing-the-sustainability-of-peer-runrecovery-community-organizations-tickets-17352801697>

## WEBINAR: SOCIAL DETERMINANTS—HOUSING SECURITY

JULY 23, 2015, 12:00-1:00 PM ET

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This Health and Human Services (HHS) *Who's Leading the Leading Health Indicators?* webinar will highlight housing security, a key social determinant of health. Learn more about this important social determinant, including how housing quality, stability, and affordability impact health and educational outcomes. Participants will also hear about interventions and resources that can help address housing insecurity in their communities. <http://www.healthypeople.gov/2020/webinars-events>

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## **WEBINAR: BEST PRACTICES IN ACA OUTREACH AND ENROLLMENT**

JULY 23, 2015, 2:00 PM ET

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In this HHS webinar, learn from faith leaders who have conducted successful outreach and enrollment campaigns before and during open enrollment. Hear from Abrar Quader from the Compassionate Care Network (CCN), which helped enroll people who are Muslim, Hindu, and Sikh. CCN received a navigator grant from the Illinois state marketplace.

<https://attendee.gotowebinar.com/register/7696657627835202818>

## **WEBINAR: WOMEN UNBARRED: RECOVERY AND SUPPORTS FOR WOMEN INVOLVED WITH CRIMINAL JUSTICE**

JULY 23, 2015, 3:00-4:30 PM ET

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This session in SAMHSA's Women Matter webinar series discusses the unique experiences of women who are incarcerated, and the barriers to recovery and re-entry that women leaving incarceration often experience. Presenters will discuss effective interventions and supports for helping women to rebuild their lives as well as community programs and policies. <http://www.samhsa.gov/women-children-families/trainings/women-matter>

## **DCOE SUMMIT: CONTINUUM OF CARE AND CARE TRANSITIONS IN THE MILITARY HEALTH SYSTEM AT DEFENSE HEALTH HEADQUARTERS**

SEPTEMBER 9-11, 2015, FALLS CHURCH, VIRGINIA

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This DCoE virtual and in-person training event is geared towards professionals involved in all aspects of psychological health and traumatic brain injury (TBI) care, education, and research for the military population. The summit's psychological health and TBI tracks will address factors that challenge and facilitate the provision of quality, sustained health services across care transitions, and the continuum of care. <http://www.dcoe.mil/Training/Events/2015-Psychological-Health-and-Resilience-Summit.aspx>

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## **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]

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

For more information on research conducted by the National Institute of Mental Health in Bethesda, MD click here [www.nimh.nih.gov/JoinAStudy](http://www.nimh.nih.gov/JoinAStudy).

## **CALLS FOR PUBLIC INPUT**

### **REQUEST FOR INFORMATION (RFI): BUILDING AN EVIDENCE BASE FOR EFFECTIVE PSYCHIATRIC INPATIENT CARE AND ALTERNATIVE SERVICES FOR SUICIDE PREVENTION**

NIMH, NIDA, SAMHSA, and the American Foundation for Suicide Prevention are seeking information on approaches to better understand: 1) what components of inpatient care are safe and effective in reducing suicide risk for various populations; 2) what are effective alternatives to inpatient care (e.g., telephone counseling, home visits, intensive day/residential treatment, types of respite care) and how they can be broadly implemented; and 3) what type of research designs could compare inpatient interventions with alternative approaches in a safe, acceptable, and fair manner. While a number of interventions for suicide attempters have been effective and even replicated, the effectiveness of inpatient care interventions or alternative approaches in reducing later morbidity (e.g., suicide attempts) and mortality (e.g., suicide deaths) remains a question for many U.S. health care systems. Testing the effectiveness of inpatient or alternative approaches is critical for suicidal patients as few empirically-based practices exist for acute care interventions and their follow-up care.

This RFI is intended to seek information about current practices and solicit perspectives on the need for empirical research from stakeholders who are associated with relevant systems of care (e.g., state commissioners, health care administrators, insurers, providers, patients, suicide attempt survivors, and family members), and who play a role in the provision of interventions for individuals at acute risk for suicide, as well as researchers focused on such interventions and services research. Responses will be accepted through August 1, 2015. <http://grants.nih.gov/grants/guide/notice-files/NOT-MH-15-019.html>

## COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The AHRQ 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:

ATTENTION DEFICIT HYPERACTIVITY DISORDER (COMMENTS ACCEPTED THROUGH JULY 8, 2015)

<http://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-key-questions/?pageAction=displayQuestions&topicID=616&questionSet=271>

IMPROVING CULTURAL COMPETENCE TO REDUCE HEALTH DISPARITIES FOR PRIORITY POPULATIONS (COMMENTS ACCEPTED THROUGH JULY 20, 2015)

<http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayProduct&productID=2092>

## SUBMIT AN INNOVATIVE TOOL OR APP TO HELP INDIVIDUALS RE-ENTERING THEIR COMMUNITY AFTER INCARCERATION

Studies show that people leaving the criminal justice system have a higher proportion of substance use and mental disorders than the general population. SAMHSA invites developers to create an innovative software-based solution, with housing, employment, prevention, treatment, and recovery information, to assist offenders and their friends, family, probation officers, jail and prison case workers, and others who help them reintegrate into their communities. No need to create new content—this is a chance to get creative with how to present existing SAMHSA content and other information. Submissions accepted through July 31, 2015. <http://offenderreintegrationtoolkit.challengepost.com/>

## SUBMIT AN INNOVATIVE TOOL OR APP TO PREVENT OPIOID-RELATED OVERDOSES

Overdose is common among people who use illicit opioids such as heroin and among those who misuse medications prescribed for pain. SAMHSA invites developers to create an innovative, software-based solution that helps people understand what to do if a family member or friend overdoses on heroin or opioid pain medications. No need to create new content—this is a chance to get creative with how to present existing opioid overdose prevention information. Submissions accepted through July 31, 2015. <http://opioidoverdoseprevention.challengepost.com/>

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## NIH HOLDS COMPETITION TO CREATE BETTER WEARABLE ALCOHOL BIOSENSOR

To promote the development of a wearable, discreet device capable of measuring blood alcohol levels in real time, NIAAA has issued the *Wearable Alcohol Biosensor Challenge*. A wearable biosensor will aid researchers, clinicians, therapists, and individuals by providing more accurate data on how much an individual is drinking. Competition submissions should include a working prototype, data proving its functionality and reliability, as well as photos and videos. Submissions will be accepted until December 1, 2015. <https://www.federalregister.gov/articles/2015/03/02/2015-04254/announcement-of-requirements-and-registration-for-a-wearable-alcohol-biosensor-challenge#h-3>

### FUNDING INFORMATION

LONGITUDINAL ASSESSMENT OF POST-TRAUMATIC SYNDROMES (U01)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-16-500.html>

ETHICAL ISSUES IN RESEARCH ON HIV/AIDS AND ITS CO-MORBIDITIES

<http://grants.nih.gov/grants/guide/pa-files/PAR-15-274.html> (R01)

<http://grants.nih.gov/grants/guide/pa-files/PAR-15-275.html> (R21)

ADVANCING HEALTH DISPARITIES INTERVENTIONS THROUGH COMMUNITY-BASED PARTICIPATORY RESEARCH

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=276656>



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.