



# UPDATE

January 15, 2018

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*Prepared by the U.S. Department of Health and Human Services,  
National Institutes of Health, National Institute of Mental Health*

## INTRAMURAL RESEARCHERS DEVELOP SUICIDE RISK SCREENING TOOLKIT FOR MEDICAL SETTINGS

Researchers in the National Institute of Mental Health (NIMH)'s Division of Intramural Research Programs (IRP) developed and recently shared a free resource—the *Ask Suicide-Screening Questions (ASQ)* toolkit. This toolkit includes a set of screening questions that can help nurses or physicians in medical settings successfully identify youth at risk for suicide.

**Science Update:** <https://www.nimh.nih.gov/news/science-news/2018/intramural-researchers-develop-suicide-risk-screening-toolkit-for-medical-settings.shtml>

## DIFFERENT APPROACHES TO UNDERSTANDING AND CLASSIFYING MENTAL DISORDERS; AN IN-DEPTH LOOK AT THE DSM, THE ICD, AND THE NIMH'S RDOC

Research in a wide range of disciplines supports the idea that mental disorders result from the complex interplay of biological, developmental, social, and environmental processes; however, the more we learn about mental disorders, the more we realize there are still gaps in our understanding of how best to classify, diagnose, and treat them. In a new report, authors representing a range of research centers and institutions discuss challenges in the conceptualization and classification of mental disorders and detail how each of three existing approaches—the International Classification of Diseases (ICD), the Diagnostic and Statistical Manual of Mental Disorders (DSM), and the NIMH's Research Domain Criteria (RDoC)—handles these issues.

**Science Update:** <https://www.nimh.nih.gov/news/science-news/2017/different-approaches-to-understanding-and-classifying-mental-disorders.shtml>

## ALL OF US RESEARCH PROGRAM ADVISORY PANEL LAUNCHES TRIBAL COLLABORATION WORKING GROUP

The *All of Us* Research Program Advisory Panel recently established a new working group to provide input on the inclusion of American Indian and Alaska Native populations in the program. The group will identify strategies for developing meaningful, culturally sensitive collaborations with these communities.

**Press Release:** <https://allofus.nih.gov/news-events-and-media/announcements/all-us-research-program-advisory-panel-launches-tribal>

## **WORKING GROUP OUTLINES POSSIBILITIES FOR ALL OF US RESEARCH PROGRAM'S GENOMICS PLAN**

The Genomics Working Group of the *All of Us* Research Program's Advisory Panel recently completed its final report, suggesting that the program consider a phased approach for genomic analyses, ramping up in a systematic way before attempting to analyze genomes at the scale of one million program participants.

**Press Release:** <https://allofus.nih.gov/news-events-and-media/announcements/working-group-outlines-possibilities-all-us-research-programs>

## **PRESCHOOL PROGRAM TO BOOST EXECUTIVE FUNCTION LEADS TO SUCCESS IN PRIMARY GRADES; NICHD-FUNDED STUDY SHOWS KIDS WITH LOW EXECUTIVE FUNCTION BENEFIT THE MOST**

A program to teach preschoolers pre-reading, social, and thinking skills appears to have benefits through third grade, particularly in executive functioning—the mental skills that include planning, paying attention, organizing, and remembering details, according to a study funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD). The researchers found that children who had poor executive functioning skills when they started the program benefited the most, ultimately testing higher in executive functioning in kindergarten, first, second, and third grade, compared to a group of children with poor executive functioning skills who didn't take part in the program. Similarly, children in the low executive function group also scored much higher in reading and math in third grade, compared to the control group.

**Science Update:** <https://www.nichd.nih.gov/news/releases/122017-REDI>

## **TO SLEEP OR NOT: RESEARCHERS EXPLORE COMPLEX GENETIC NETWORK BEHIND SLEEP DURATION**

Scientists have identified differences in a group of genes they say might help explain why some people need a lot more sleep — and others less — than most. The study, conducted using fruit fly populations bred to model natural variations in human sleep patterns, provides new clues to how genes for sleep duration are linked to a wide variety of biological processes. Researchers say a better understanding of these processes could lead to new ways to treat sleep disorders such as insomnia and narcolepsy. Led by scientists with the National Heart, Lung, and Blood Institute, the study was published on December 14, 2017 in *PLOS Genetics*.

**Press Release:** <https://www.nih.gov/news-events/news-releases/sleep-or-not-researchers-explore-complex-genetic-network-behind-sleep-duration>

## **KAPPA OPIOID RECEPTOR STRUCTURE REVEALED, A POTENTIAL MILESTONE IN MEDICATION DEVELOPMENT**

New research funded by the National Institute on Drug Abuse (NIDA) illuminates the crystal structure of the activated kappa opioid receptor. The breakthrough could facilitate the development of new medications to treat pain and addiction.

**Science Spotlight:** <https://www.drugabuse.gov/news-events/news-releases/2018/01/kappa-opioid-receptor-structure-revealed-potential-milestone-in-medication-development>

## **SAMHSA TAKES STEPS TO FIX A FRACTURED MENTAL HEALTH CARE SYSTEM FOLLOWING REPORT OF CONGRESSIONALLY MANDATED COMMITTEE**

As part of a blue-ribbon panel that recently issued a report to Congress detailing problems within the American mental health care system, the Substance Abuse and Mental Health Services Administration (SAMHSA) is working to help transform that system and better serve people in need. The Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC) was established to address the needs of adults with serious mental illnesses (SMI) and children and youth with serious emotional disturbances and their families. Last month, ISMICC formally delivered to Congress a report that detailed deficiencies in the country's treatment services for Americans living with SMI. SAMHSA's efforts to build upon the Report's insights can be seen in policy implementations under way. Among the efforts, SAMHSA is working on instituting a budgetary set-aside for mobilizing resources to help patients being treated for first episode psychosis, as early treatment of SMI is important for patients' recovery, and implementing the Zero Suicide initiative as part of SAMHSA's priority of advancing effective prevention strategies throughout the nation.

**Press Release:** <https://www.samhsa.gov/newsroom/press-announcements/201801040200-0>

## **SAMHSA FINALIZES CHANGES TO CLARIFY HEALTH PRIVACY RULES FOR PEOPLE WHO SEEK SUBSTANCE USE DISORDER TREATMENT; FINAL CHANGES TO RULE WILL SUPPORT PAYMENT AND HEALTH CARE OPERATIONS ACTIVITIES WHILE PROTECTING THE CONFIDENTIALITY OF PATIENTS**

SAMHSA announced the finalization of proposed changes to the *Confidentiality of Substance Use Disorder Patient Records regulation, 42 CFR Part 2*. Part 2 protects the confidentiality of records relating to the identity, diagnosis, prognosis, or treatment of any patient records that are maintained in connection with the performance of any federally assisted program or activity relating to substance use disorder education, prevention, training, treatment, rehabilitation, or research. Under Part 2, a federally assisted substance use disorder program may only release patient identifying information with the individual's written consent, pursuant to a court order, or under a few limited exceptions.

**Press Release:** <https://www.samhsa.gov/newsroom/press-announcements/201801021100>

## **NATIONAL CENSUS OF FATAL OCCUPATIONAL INJURIES IN 2016**

There were a total of 5,190 fatal work injuries recorded in the United States (U.S.) in 2016, a 7 percent increase from the 4,836 fatal injuries reported in 2015, the U.S. Bureau of Labor Statistics reported. This is the third consecutive increase in annual workplace fatalities and the first time more than 5,000 fatalities have been recorded by the Census of Fatal Occupational Injuries since 2008. Findings include that workplace homicides increased by 83 cases to 500 in 2016, workplace suicides increased by 62 to 291, and overdoses from the non-medical use of drugs or alcohol while on the job increased from 165 in 2015 to 217 in 2016, a 32 percent increase. Overdose fatalities have increased by at least 25 percent annually since 2012.

**Press Release:** <https://www.bls.gov/news.release/pdf/cfoi.pdf>

## **THE SECRETARIES OF DEFENSE, VETERANS AFFAIRS, AND HOMELAND SECURITY WILL DEVELOP A PLAN TO ENSURE VETERANS' MENTAL HEALTH CARE FOR THE YEAR AFTER SEPARATING FROM SERVICE**

President Donald J. Trump signed an Executive Order titled, "Supporting Our Veterans During Their Transition from Uniformed Service to Civilian Life." This Executive Order directs the Departments of Defense, Veterans Affairs, and Homeland Security to develop a plan to ensure that all new Veterans receive mental health care for at least one year following their separation from service. The three departments will work together and develop a Joint Action Plan to ensure that the 60 percent of new Veterans who currently do not qualify for enrollment in health care — primarily due to lack of verified service connection related to the medical issue at hand — will receive treatment and access to services for mental health care for one year following their separation from service.

**Press Release:** <https://www.va.gov/opa/pressrel/pressrelease.cfm?id=3995>

## NEW FROM NIH

### CLINICAL DIGEST: COMPLEMENTARY HEALTH APPROACHES FOR SEASONAL AFFECTIVE DISORDER

Some people turn to complementary health approaches to prevent seasonal affective disorder, including St. John's wort, melatonin, and vitamin D. This National Center for Complementary and Integrative Health digest summarizes current research for these modalities.

<https://nccih.nih.gov/health/providers/digest/Seasonal-Affective-Disorder?nav=govd>

### SCIENCE HIGHLIGHT: OXYTOCIN PROTOCOL APPEARS WORKABLE AND SAFE FOR METHADONE PATIENTS WHO USE COCAINE

Some 30 to 60 percent of patients in methadone maintenance therapy (MMT) for opioid use disorders use cocaine. Compared to other MMT patients, those who use cocaine have higher rates of relapse and mortality. Studies with animals have suggested that the hormone oxytocin could be doubly helpful to these patients, by reducing the addictive effects of both opioids and cocaine. Now, researchers supported by NIDA have developed a protocol for adjunctive oxytocin treatment, and a pilot study has indicated that it is workable and safe for MMT patients. <https://www.drugabuse.gov/news-events/latest-science/oxytocin-protocol-appears-workable-safe-methadone-patients-who-use-cocaine>

### DRUGS AND HEALTH BLOG: "PERSONALIZED MEDICINE" FOR DRUG PROBLEMS?

Thanks to recent breakthroughs in genetics research, doctors can treat some diseases in amazing new ways. For example, for years, the best way to treat cancer has been to attack the cancer cells in every patient with the same medicines, but this approach only works on some people. Now, for some forms of cancer, doctors can test a patient's individual genetic makeup to determine which medicine will work better. This personalized approach can make treatment much more effective. Could personalized medicine (which researchers call "precision medicine") be used to treat drug problems—or to prevent them from happening in the first place? <https://teens.drugabuse.gov/blog/post/personalized-medicine-drug-problems>

## NEW FROM SAMHSA

### UNDERSTANDING AND ADDRESSING TRAUMA AND CHILD SEX TRAFFICKING

This policy brief from SAMHSA's National Child Traumatic Stress Network (NCTSN) addresses key questions about child sex trafficking, including who is at risk, what are its consequences, and what can be done to address the issue.

[http://www.nctsn.org/sites/default/files/assets/pdfs/understanding\\_and\\_addressing\\_trauma\\_and\\_chi  
ld\\_trafficking.pdf](http://www.nctsn.org/sites/default/files/assets/pdfs/understanding_and_addressing_trauma_and_child_trafficking.pdf)

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## SOUTH CAROLINA PARTNERS WITH LAW ENFORCEMENT ON NALOXONE PROGRAM

State prevention leaders in South Carolina joined forces with local police departments to create an effective naloxone training, distribution, and monitoring program.

<https://www.samhsa.gov/capt/tools-learning-resources/south-carolina-partners-law-enforcement-naloxone-program>

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## ILLICIT SYNTHETIC OPIOID: UNDERSTANDING POTENTIAL RISKS FOR FIRST RESPONDERS

This tool provides an overview of guidelines to protect first responders from being harmed by illicit synthetic opioids. <https://www.samhsa.gov/capt/tools-learning-resources/first-responders-synthetic-opioids-tool>

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## PREVENTION CONVERSATION VIDEOS: THE VALUE OF NALOXONE

Watch Massachusetts Department of Public Health Medical Director Alexander Walley and South Carolina's Manager of Prevention Services Michelle Nienhius explore strategies for getting naloxone, a medication that reverses the effects of an opioid overdose, into the hands of those who need it most. Videos include:

- Preventing Opioid Overdose: The Value of Naloxone: <https://youtu.be/g-V2UTUHzgl>
- Getting Naloxone to Those in Greatest Need: Lessons from Massachusetts: <https://youtu.be/WRkrMJXGj4I>
- Lessons from South Carolina: Engaging Law Enforcement in Naloxone Distribution: <https://youtu.be/WRkrMJXGj4I>
- Lessons from South Carolina: Tracking Naloxone Distribution: <https://youtu.be/kfVukhYF8JO>

## NEW FROM CDC

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### DRUG OVERDOSE DEATHS IN THE U.S., 1999-2016

Deaths from drug overdose are an increasing public health burden in the U.S. This Centers for Disease Control and Prevention (CDC) report uses the most recent data from the National Vital Statistics System to update trends in drug overdose deaths, describe demographic and geographic patterns, and identify shifts in the types of drugs involved. <https://www.cdc.gov/nchs/products/databriefs/db294.htm>

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### MORTALITY IN THE U.S., 2016

This report presents final 2016 U.S. mortality data on deaths and death rates by demographic and medical characteristics. These data provide information on mortality patterns among U.S. residents by variables such as sex, race and ethnicity, and cause of death. Life expectancy estimates, age-specific death rates, age-adjusted death rates by race and ethnicity and sex, 10 leading causes of death, and 10 leading causes of infant death were analyzed by comparing 2016 and 2015 final data.

<https://www.cdc.gov/nchs/products/databriefs/db293.htm>

## STOPBULLYING.GOV BLOG POSTS: CYBERBULLYING—RESOURCES FOR PARENTS

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### TALKING TO YOUR KIDS ABOUT CYBERBULLYING

This blog post provides suggestions for parents about talking with their kids about social media and cyberbullying. It can be hard for parents to detect when kids are cyberbullied, before it becomes an overwhelming issue. No matter the online platform or how much or little kids or teens engage in social media, establishing an openness to talk about what they are doing online, who they are interacting with, and what sites and apps they are using is key to setting the tone for potentially more difficult conversations.

<https://www.stopbullying.gov/blog/2017/12/12/talking-to-your-kids-about-cyberbullying-part-1.html>

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### CYBERBULLYING: WHAT PARENTS CAN DO

Building open communication with kids will go a long way when it comes to dealing with something as potentially hurtful as cyberbullying. This blog post provides suggestions to parents for how to anticipate potential problems or risks with their kids, and how to stay in the loop about their technology use and online interactions. <https://www.stopbullying.gov/blog/2018/01/09/cyberbullying-part-2-what-parents-can-do.html>

## NEW FROM THE DEPARTMENT OF JUSTICE

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### OJJDP BLOG POST: MODEL PROGRAMS GUIDE MILESTONE

This blog post discusses the Office of Juvenile Justice and Delinquency Prevention's (OJJDP) *Model Programs Guide*, which recently profiled its 300th program. The Guide is an online database of evidence-based juvenile justice programs for practitioners and communities. The 300th program profiled provides a gender-responsive intervention in two group homes for adjudicated females. <https://ojp.gov/ojpblog/blog-model-index.htm>

### PODCASTS ADDRESS FAMILY AND YOUTH ENGAGEMENT IN SCHOOL-JUSTICE PARTNERSHIPS

The National Center for Mental Health and Juvenile Justice, with support from OJJDP's School-Justice Partnership Project, is hosting this podcast series to highlight family and youth engagement in school-justice partnerships. Episodes will share strategies to help youth with behavioral health needs and their families make connections with schools and stakeholders to improve youth outcomes.

<https://www.ojjdp.gov/enews/17juvjust/171220.html>

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## NATIONAL SLAVERY AND HUMAN TRAFFICKING PREVENTION MONTH

JANUARY 2018

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In support of this observance activity, SAMHSA's NCTSN offers a variety of resources to help educate child welfare professionals, families and caregivers, health care providers, justice system professionals, policy makers, school personnel, and survivors on the signs of trafficking and services for human trafficking survivors. <http://www.nctsn.org/resources/public-awareness/human-trafficking>

## NATIONAL STALKING AWARENESS MONTH

JANUARY 2018

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CDC has compiled resources to help communities prevent stalking and participate in National Stalking Awareness Month. Teaching adolescents about healthy relationship skills is one strategy CDC promotes to help prevent stalking. <https://www.cdc.gov/features/prevent-stalking/index.html>

## WEBINAR: WHO'S LEADING THE LEADING HEALTH INDICATORS? INJURY AND VIOLENCE

JANUARY 18, 2018, 12:00-1:00 PM ET

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This Healthy People 2020 webinar will focus on the injury deaths leading health indicator, with an emphasis on preventing poisoning deaths and opioid overdoses. Participants will learn how Project Lazarus is reducing overdose mortality rates through a public health model based on the twin premises that overdose deaths are preventable and that all communities are responsible for their own health.

<https://health.gov/news/events/2018/01/webinar-whos-leading-leading-health-indicators-injury-violence/>

## #NIHHEALTHY 2018 TWITTER TOWN HALL

JANUARY 16, 2018, 12:00-4:00 PM ET

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During the #NIHhealthy Twitter Town Hall, National Institutes of Health (NIH) Institutes and Centers will share information on a variety of health issues, including mental health. The event will include a Periscope Live video panel at noon, and a question and answer session with NIH Director Dr. Francis Collins at 2:30 PM. Dr. David Sommers, Clinical Psychologist and Scientific Review Officer at NIMH, will discuss managing stress and anxiety for the Periscope panel from 12:00-12:20 PM ET. Follow #NIHhealthy2018 to join the conversation.

## WEBINAR: STATE SOLUTIONS IN WORKFORCE: WORKFORCE RETENTION WITH NEW YORK AND COLUMBIA UNIVERSITY

JANUARY 17, 2018, 2:00-3:00 PM ET

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This SAMHSA webinar will highlight the work of The Center for Practice Innovations (CPI). Funded by the New York State Office of Mental Health, CPI aims to promote the widespread availability of evidence-based practices and core competencies to the behavioral health workforce through training and implementation support. Building practitioner competency—efficiently, conveniently, and at no cost—is one key strategy addressing workforce retention. Presenters will discuss other facets of CPI’s work in offering online training resources, leading learning collaboratives, developing digital service tools, and offering continuing education credits. <https://content.govdelivery.com/accounts/USSAMHSA/bulletins/1d0eebb>

## #NIHHEALTHY 2018 FACEBOOK LIVE

JANUARY 18, 2018, 1:00 PM ET

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Hear from NIH experts on quitting smoking, managing stress and anxiety, exercise and cardiovascular health, and healthy aging during the #NIHhealthy 2018 Facebook Live event. NIMH Clinical Psychologist Dr. Rezvan Ameli will be on hand to answer questions about managing stress and anxiety. Tune in to [www.facebook.com/nih.gov/](http://www.facebook.com/nih.gov/).

## NATIONAL DRUG AND ALCOHOL FACTS WEEK

JANUARY 22-28, 2018

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Prevention partners are invited to participate in National Drug and Alcohol Facts Week sponsored by NIDA and the National Institute on Alcohol Abuse and Alcoholism. This week-long health observance is an opportunity for teens to learn the facts about drug and alcohol abuse and addiction from scientists and other experts. Organize and promote an educational event or activity for teens during this week, and help shatter the myths about drugs and alcohol. <https://teens.drugabuse.gov/national-drug-alcohol-facts-week>

## VIDEOCAST: ADOLESCENT SUICIDE PREVENTION: RECOGNIZING TEENS AT RISK AND RESPONDING EFFECTIVELY

JANUARY 24, 2018, 8:30 AM-12:30 PM ET

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Over 44,000 people die by suicide each year in the U.S., and suicide is the second leading cause of death for young people aged 10-24 both in the U.S. and worldwide. Suicide is complicated and tragic, but it is often preventable. Knowing the warning signs for suicide and how to get help can save lives. Join experts for this NIMH workshop about adolescent suicide prevention, which will include techniques for early detection and management of young people at risk. Talks will include the keynote by David A. Brent, M.D. from the University of Pittsburgh titled, *What Do I Do Now? A Clinician's Guide to the Assessment and Management of Youth at Imminent Risk for Suicidal Behavior*, and a presentation by NIMH IRP scientist Elizabeth Ballard, Ph.D. titled, *The Neurobiology of Suicide Protocol*. Other speakers include NIMH IRP scientists Lisa Horowitz, Ph.D., M.P.H. and Argyris Stringaris, M.D., Ph.D., and Anne Moss Rogers from the Beacon Tree Foundation. The event will be live-streamed and archived on the NIH videocast website.

<https://videocast.nih.gov/live.asp?live=26845&bhcp=1>

## WEBINAR: TACKLING THE OPIOID EPIDEMIC IN THE CHICKASAW NATION

JANUARY 25, 2018, 3:00-4:00 PM ET

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*Define Your Direction* is a comprehensive prescription opioid abuse prevention movement created by the Chickasaw Nation using SAMHSA and Southern Plains Tribal Health Board funding. *Define Your Direction* utilizes multiple strategies aimed at increasing awareness, reducing access to drugs and alcohol, and preventing overdose deaths. The webinar, presented by the U.S. Department of Health and Human Services' (HHS) Office of Minority Health National Partnership for Action, will highlight the movement's various components, challenges experienced during its development and implementation phases, and successes.

<https://tinyurl.com/aianwebinarregistration>

## SAMHSA LISTENING SESSION FOR 42 CFR PART 2

JANUARY 31, 2018, 8:30 AM-1:00 PM ET

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SAMHSA will hold a public listening session to solicit information concerning the *Confidentiality of Substance Use Disorder Patient Records regulations* (42 CFR Part 2) as required by Section 11002 of the 21st Century Cures Act (P.L. 114-255). This listening session is an opportunity to provide input concerning the effect of 42 CFR Part 2 on patient care, health outcomes, and patient privacy as well as potential regulatory changes and future sub-regulatory guidance. Registration is required for participation in the listening session. Register early, since space is limited.

<https://www.eventbrite.com/e/samhsa-listening-session-42-cfr-part-2-tickets-41087357392>

## WEBINAR: HUMAN TRAFFICKING AND THE OPIOID CRISIS

JANUARY 31, 2018, 1:00-2:30 PM ET

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The Administration on Children and Families' National Human Trafficking Training and Technical Assistance Center is hosting this webinar to highlight emerging trends, case studies, and research on human trafficking and substance use with a specific focus on the opioid crisis. Discussion will center on trauma-informed approaches to human trafficking and substance use screening, the role of substance use for individuals at risk of trafficking and survivors of trafficking, treatment options for dependency, and the underlying issues that put victims and survivors at risk. Presentations will be delivered by grantees from the HHS Office on Trafficking in Persons and SAMHSA. [https://events-na1.adobeconnect.com/content/connect/c1/2253362659/en/events/event/shared/default\\_template\\_si\\_mple/event\\_landing.html?sco-id=2408632681](https://events-na1.adobeconnect.com/content/connect/c1/2253362659/en/events/event/shared/default_template_si_mple/event_landing.html?sco-id=2408632681)

## SAMHSA'S 14TH ANNUAL PREVENTION DAY

FEBRUARY 5, 2018, NATIONAL HARBOR, MD

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This event will feature presentations, training sessions, technical assistance, and resources to support prevention practitioners, community leaders, researchers, and consumers in successfully addressing emerging substance misuse prevention issues. <https://www.samhsa.gov/capt/news-announcements/conferences-trainings/samhsa%E2%80%99s-14th-annual-prevention-day>

## REQUEST FOR INFORMATION: FY 2019–2023 STRATEGIC PLAN FOR THE NIH OFFICE OF DISEASE PREVENTION

The NIH Office of Disease Prevention (ODP) is gathering broad public input on the ODP Strategic Plan for Fiscal Years 2019–2023. The mission of the ODP is to improve public health by increasing the scope, quality, dissemination, and impact of prevention research supported by the NIH. The ODP fulfills this mission by providing leadership for the development, coordination, and implementation of prevention research in collaboration with NIH Institutes, Centers, and Offices as well as other partners.

Respondents are encouraged to review and provide comments on a set of draft strategic priorities, which will outline activities coordinated by the ODP to assess, facilitate, and stimulate research in disease prevention, and disseminate the results of this research to improve public health. It also will include other strategic priorities and scientific opportunities not already proposed by the ODP, suggested new partnerships, and areas that transcend disease prevention research that the Office should consider as it develops its new plan. Responses are accepted through January 22, 2018.

<https://prevention.nih.gov/strategic-plan/request-for-information>

## REQUEST FOR NOMINATIONS OF MEMBERS FOR THE CLINICAL TRIALS TRANSFORMATION INITIATIVE/FDA PATIENT ENGAGEMENT COLLABORATIVE

The Food and Drug Administration (FDA), in collaboration with the Clinical Trials Transformation Initiative (CTTI), is requesting nominations of patient advocates interested in participating on the Patient Engagement Collaborative (PEC). The PEC will be an ongoing, collaborative forum coordinated through the Patient Affairs Staff, Office of Medical Products and Tobacco, Office of the Commissioner, and will be hosted by CTTI. Through the PEC, the patient community and regulators will be able to discuss an array of topics regarding increasing meaningful patient engagement in medical product development and regulatory discussions at FDA. The activities of the PEC may include, but are not limited to, providing diverse perspectives on topics such as systematic patient engagement, transparency, and communication; providing considerations for implementing new strategies to enhance patient engagement at FDA; and proposing new models of collaboration in which patients and patient advocates are partners in certain aspects of the medical product development and FDA review process. Nominations received by January 29, 2018, will be given first consideration for membership on the PEC. Nominations received after the submission deadline will be retained for future consideration.

**Federal Register Notice:** <https://www.federalregister.gov/documents/2017/12/22/2017-27538/request-for-nominations-of-members-for-the-clinical-trials-transformation-initiativefood-and-drug>  
**FDA BLOG POST ABOUT THE PATIENT ENGAGEMENT COLLABORATIVE, CALL FOR NOMINATIONS:**  
<https://blogs.fda.gov/fdavoices/index.php/2017/12/you-spoke-fda-listened-new-patient-engagement-collaborative-call-for-nominations/>

## HAVE A RESEARCH QUESTION THAT THE NIH ALL OF US PROGRAM COULD ADDRESS?

The NIH *All of Us* Research Program invites you to submit your ideas of important research questions the program could answer. Are there important questions that this cohort could address in the areas of the prevention, diagnosis, and treatment of mental illnesses? The input will help the program identify new features to add to the *All of Us* platform to support research across a range of health topics and advance precision medicine. The deadline for input is February 9, 2018. <https://allofus.nih.gov/news-events-and-media/announcements/all-us-research-program-seeks-input-research-priorities>

## SUBMIT YOUR ABSTRACT FOR THE 2018 HEALTHY AGING SUMMIT

The Office of Disease Prevention and Health Promotion and the Office on Women's Health within HHS, along with the American College of Preventive Medicine are now accepting abstracts for oral and poster presentations for the 2018 Healthy Aging Summit. The Summit will be held July 16-17, 2018 in Washington, DC. Abstracts must be submitted by February 5, 2018.

<https://health.gov/news/announcements/2017/12/submit-abstract-2018-healthy-aging-summit/>

## THE 2018 OPERATION PREVENTION VIDEO CHALLENGE IS ACCEPTING ENTRIES

*Operation Prevention*, an initiative of the Drug Enforcement Administration and Discovery Education, aims to combat the growing epidemic of prescription opioid misuse and heroin use by educating students about the science behind addiction and its impacts on the brain and body. The Operation Prevention Video Challenge encourages students to send a message to their peers about prescription opioid misuse by creating a 30- to 60-second original public service announcement. Encourage teens in your communities to start brainstorming today. The Challenge closes on March 20, 2018.

<https://www.operationprevention.com/video-challenge>

## CLINICAL RESEARCH PARTICIPATION NEWS

### CLINICAL RESEARCH MUST INCLUDE UNDERREPRESENTED GROUPS, NIH EXPERTS SAY; LACK OF REPRESENTATION JEOPARDIZES PERSONALIZED MEDICINE APPROACH

To realize the promise of personalized medicine, new research studies must include segments of the population often overlooked in clinical research: children, older adults, pregnant women, and individuals with physical, intellectual, and developmental disabilities. This assessment, made by the Director and Deputy Director of NICHD, is summarized in a *Viewpoint* article in the *Journal of the American Medical Association*. <https://www.nichd.nih.gov/news/releases/122817-inclusion-clinical-research>

## JOIN A RESEARCH STUDY: ENROLLING NATIONALLY FROM AROUND THE COUNTRY

### DEPRESSION EVALUATIONS FOR MEDICATION AND BRAIN IMAGING STUDIES

This study screens for various inpatient and outpatient studies that investigate the brain and experimental medications (such as ketamine and AV101) to quickly lift severe and hard-to-treat depressive symptoms.

Participation may include outpatient visits or inpatient stays lasting 4 to 12 weeks at the NIH Clinical Center, Bethesda, MD. Procedures may include: tapering off current psychiatric medications, a medication-free period, oral or intravenous medication versus placebo, and brain scans. You may also qualify for other studies that have different requirements and lengths of stay.

Participants must be ages 18-70 and free of serious medical conditions. These studies may enroll eligible participants from across the USA. Travel arrangements and compensation are provided. There is no cost to participate.

First steps to participate include, calling NIMH, learning study details, asking about your eligibility, and consenting to participate.

To find out if you qualify, email NIMH at [moodresearch@mail.nih.gov](mailto:moodresearch@mail.nih.gov) or call 1-877-646-3644 (1-877-MIND-NIH) [TTY: 1-866-411-1010].

- PROTOCOL NUMBER: 01-M-0254: <https://clinicaltrials.gov/ct/show/NCT00024635>
- PRINCIPAL INVESTIGATOR: CARLOS ZARATE, JR., M.D.: <https://www.nimh.nih.gov/labs-at-nimh/principal-investigators/carlos-zarate.shtml>

<https://www.nimh.nih.gov/labs-at-nimh/join-a-study/trials/adult-studies/depression-evaluations-for-medication-and-brain-imaging-studies.shtml>

### FUNDING INFORMATION

RURAL HEALTH CLINIC POLICY AND CLINICAL ASSESSMENT PROGRAM

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=299953>

DEVELOPMENTAL-BEHAVIORAL PEDIATRICS TRAINING PROGRAM

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=299630>

GRANTS TO ESTABLISH AND EXPAND JAIL DIVERSION

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=298771>

COLLEGIATE BEHAVIORAL HEALTH PREVENTION, IDENTIFICATION, AND INTERVENTION GRANT PROGRAM

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=298747>

EVALUATION OF POLICIES FOR THE PRIMARY PREVENTION OF MULTIPLE FORMS OF VIOLENCE

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=297311>

RESEARCH GRANTS FOR PREVENTING VIOLENCE AND VIOLENCE RELATED INJURY

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=297345>

COMMUNITY-BASED COALITION ENHANCEMENT GRANTS TO ADDRESS LOCAL DRUG CRISES

<https://www.samhsa.gov/grants/grant-announcements/sp-18-001>

EVALUATION OF POLICIES FOR THE PRIMARY PREVENTION OF MULTIPLE FORMS OF VIOLENCE

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=297311>

COMMUNITY PARTNERSHIPS TO ADVANCE RESEARCH

<https://grants.nih.gov/grants/guide/pa-files/PA-18-381.html> (R21 Clinical Trial Optional)

<https://grants.nih.gov/grants/guide/pa-files/PA-18-475.html> (R15 Clinical Trial Not Allowed)

TRIBAL PRACTICES FOR WELLNESS IN INDIAN COUNTRY

<https://www.grants.gov/web/grants/view-opportunity.html?oppld=299475>



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.