



UPDATE

January 15, 2011

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<http://www.nimh.nih.gov/outreach/partnership-program/subscribe-to-the-update.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*

SCIENCE AND SERVICE NEWS UPDATES

MAJORITY OF YOUTH WITH MENTAL DISORDERS MAY NOT BE RECEIVING SUFFICIENT SERVICES

A substantial proportion of youth with severe mental disorders do not receive mental health care, according to data from a National Institute of Mental Health (NIMH)-funded survey published in the January 2011 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*.

Science Update: <http://www.nimh.nih.gov/science-news/2011/majority-of-youth-with-mental-disorders-may-not-be-receiving-sufficient-services.shtml>

CASE-MANAGED CARE IMPROVES OUTCOMES FOR DEPRESSED PATIENTS WITH MULTIPLE MEDICAL CONDITIONS

People with diabetes or heart disease plus depression fare better if their medical care is coordinated by a care manager who also educates patients about their condition and provides motivational support, compared to those who receive care from their primary care physician only, according to an NIMH-funded study published December 30, 2010, in the *New England Journal of Medicine*.

Science Update: <http://www.nimh.nih.gov/science-news/2010/case-managed-care-improves-outcomes-for-depressed-patients-with-multiple-medical-conditions.shtml>

ATTENTION WOES IN KIDS WITH TOURETTE SYNDROME LIKELY CAUSED BY CO-OCCURRING ADHD

Co-occurring attention deficit hyperactivity disorder (ADHD) may be at the root of attention problems in children with Tourette syndrome (TS), according to NIMH-funded researchers. Their findings also support the theory that children with TS develop different patterns of brain activity in order to function at the same level as children without TS. The study was published in the November 2010 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*.

Science Update: <http://www.nimh.nih.gov/science-news/2010/attention-woes-in-kids-with-tourette-syndrome-likely-caused-by-co-occurring-adhd.shtml>

NIMH ANNOUNCES NEW PARTNERS

NIMH has selected 20 new Outreach Partners for its Outreach Partnership Program. This national outreach and education initiative recruits nonprofit organizations to disseminate the latest scientific findings, inform the public about mental disorders, and reduce the associated stigma and discrimination. Partners are selected through a competitive process in which proposals are reviewed by experts in the field. The Outreach Partners represent each state, the District of Columbia, and Puerto Rico.

Announcement: <http://www.nimh.nih.gov/outreach/nimh-announces-new-partners.shtml>

NIH-LED STUDY IDENTIFIES GENETIC VARIANT THAT CAN LEAD TO SEVERE IMPULSIVITY

A multinational research team led by scientists at the National Institutes of Health (NIH) has found that a genetic variant of a brain receptor molecule may contribute to violently impulsive behavior when people who carry it are under the influence of alcohol. A report of the findings, which include human genetic analyses and gene knockout studies in animals, appears in the December 23, 2010 issue of *Nature*.

Press Release: <http://www.niaaa.nih.gov/NewsEvents/NewsReleases/Pages/NIH-ledstudyidentifiesgeneticvariantthatcanleadtosevereimpulsivity.aspx>

STUDY TIES BLOOD PROTEIN TO ALZHEIMER'S BRAIN ABNORMALITIES: IN NIH-SUPPORTED STUDY, BLOOD TEST IN SYMPTOM-FREE VOLUNTEERS LINKS LEVELS OF SPECIFIC PROTEIN WITH BETA AMYLOID DEPOSITS

Scientists are seeking ways to detect the earliest stages of Alzheimer's disease, since harmful changes may be taking place in the brain years before symptoms appear. Now, researchers report that a blood test detecting a specific protein in blood samples from cognitively normal older people may reflect the levels of beta-amyloid protein in the brain—a hallmark of the disease. Supported in part by the NIH, the findings may eventually lead to a blood test that helps predict risk for Alzheimer's disease and who may be a good candidate for participating in clinical trials.

Press Release: <http://www.nia.nih.gov/NewsAndEvents/PressReleases/PR20101220amyloidtest.htm>

SAMHSA ADS CENTER: 2010 CAMPAIGN FOR BEHAVIORAL HEALTH RECOVERY AWARD WINNERS ANNOUNCED

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced the winners of the 2010 Campaign for Behavioral Health Recovery (CBHR) Awards for Statewide Consumer/Survivor-Operated Projects, formerly the Campaign for Mental Health Recovery. The purpose of the CBHR Awards is to support and enhance the overall campaign by developing state outreach and community-based efforts, behavioral health education, and social inclusion activities. SAMHSA has awarded six organizations with \$20,000 grants for statewide and community-based efforts. Each of these efforts will promote and expand the *What a Difference a Friend Makes* campaign, which has worked to boost social inclusion of 18-25 year olds experiencing behavioral health problems.

Release: <http://www.promoteacceptance.samhsa.gov/CBHR/awards/2010awardees.aspx>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NIMH DIRECTOR: NEW BLOG POSTINGS

UNDERSTANDING SEVERE MENTAL ILLNESS

The topic of violence and mental illness is never an easy discussion: with issues such as stigma, incarceration, public safety, and involuntary treatment in the mix. There is a legitimate concern that talking about violence and mental illness in the same sentence increases the likelihood that people with serious mental illness will be further marginalized and less likely to receive appropriate care. But tragic events require one to address this uncomfortable subject with the science available.

<http://www.nimh.nih.gov/about/director/2011/understanding-severe-mental-illness.shtml>

LOOKING FORWARD TO 2011

The NIMH Director reflects on opportunities for innovative science in the year ahead.

<http://www.nimh.nih.gov/about/director/2011/looking-forward-to-2011.shtml>

NIMH'S TOP 10 RESEARCH EVENTS AND ADVANCES OF 2010

The journal *Nature* began 2010 by declaring that this decade would be “the decade for psychiatric disorders,” in that the field is “ripe for a revolution.” In this opening year of the decade, the revolution seems well underway. Here are 10 breakthroughs and events of 2010 that are changing the way we approach mental disorders.

<http://www.nimh.nih.gov/about/director/2010/nimhs-top-10-research-events-and-advances-of-2010.shtml>

NEW NIMH VIDEO: POSTPARTUM DEPRESSION

Postpartum depression (PPD) may be one of the most under-recognized and under-treated disorders. Yet it impacts the lives of hundreds of thousands of new mothers. This video looks at those who are at greatest risk of postpartum depression as well as ground-breaking research into treatment for PPD.

<http://www.nimh.nih.gov/media/video/postpartum-depression.shtml>

NIH RESEARCH MATTERS: TREATMENT FOR ADDICTED MOMS HAS BETTER OUTCOMES FOR BABIES

Buprenorphine, a promising treatment for opioid-addicted pregnant women, reduces withdrawal-related symptoms to their newborns better than standard methadone therapy, a new clinical trial shows.

<http://www.nih.gov/researchmatters/december2010/12202010addicted.htm>

NEW SAMHSA RESOURCES

LATEST SAMHSA NEWS

The latest issue of *SAMHSA News* examines Circles of Care, a project for creating models of care for American Indian and Alaska Native youth. The project seeks to build resilience and reduce the impact of substance abuse and mental illness in young people from American Indian and Alaska Native tribal communities. http://www.samhsa.gov/samhsaNewsLetter/Volume_18_Number_6/default.aspx

SAMHSA DISASTER KIT

This resource provides disaster recovery workers with a toolkit on mental health awareness. The kit includes materials for responding effectively to the general public during and after a disaster and in dealing with workplace stress. It also includes materials for the general public.

<http://store.samhsa.gov/product/SMA11-DISASTER>

COPING IN HARD TIMES: FACTS SHEET FOR YOUTH HIGH SCHOOL AND COLLEGE AGE

This fact sheet provides information to help teens understand how economic difficulties may affect them and how to cope during these uncertain times. <http://www.nctsnet.org/nccts/asset.do?id=1559>

ARCHIVED WEBINAR: PEER SUPPORT, RETURNING SERVICE MEMBERS, AND VETERANS: VETERAN CENTERS AND BEYOND

On November 16th, the SAMHSA National GAINS Center presented a webinar on peer support for returning service members and veterans. Now archived for viewing, this webinar: 1) explored the evolution of peer support in the veterans community; 2) highlighted the innovative work being done by veterans advocates and the Veterans Administration (VA) in making peer support services available to veterans; and 3) provided examples of innovative collaborations that are emerging between veterans, consumer-operated services and networks, and local VA Centers.

<http://www.gainscenter.samhsa.gov/html/resources/presentations.asp>

SAMHSA REPORTS

MENTAL HEALTH, UNITED STATES, 2008

This publication provides information on the mental health status of the U.S. population; the providers and settings for mental health services; the types of mental health services and rates of utilization; and costs and sources of funding for mental health services. <http://www.store.samhsa.gov/product/SMA10-4590>

SUICIDAL THOUGHTS AND BEHAVIORS AMONG ADULTS

Annual averages of combined 2008 and 2009 data indicate that an estimated 8.4 million adults aged 18 or older had thought seriously about committing suicide in the past year; 2.3 million had made a suicide plan in the past year; and, 1.1 million had attempted suicide in the past year. The rates of thinking seriously about committing suicide, making plans for suicide, and attempting suicide were higher among young adults aged 18 to 25 than the rates among other age groups, and among the unemployed than among those in other employment categories. Of the 1.1 million adults who attempted suicide in the past year, 61.2 percent received medical attention for their suicide attempt, and 43.9 percent stayed overnight or longer in a hospital for their suicide attempt. <http://oas.samhsa.gov/2k10/212/SuicidalThoughts.cfm>

EMERGENCY DEPARTMENT VISITS INVOLVING UNDERAGE ALCOHOL USE IN COMBINATION WITH OTHER DRUGS

Of the estimated 188,981 alcohol-related emergency department (ED) visits made by patients aged 12 to 20 in 2008, 70 percent involved alcohol only, and 30 percent involved alcohol in combination with other drugs. Illicit drug use was indicated in more than two-thirds, and pharmaceutical drugs were involved in more than one-half of ED visits involving alcohol in combination with other drugs among patients aged 12 to 20. <http://oas.samhsa.gov/2k11/DAWN025/AlcDrugsCombo.cfm>

HIGHLIGHTS OF THE 2009 DRUG ABUSE WARNING NETWORK (DAWN) FINDINGS ON DRUG-RELATED EMERGENCY DEPARTMENT VISITS

In 2009, there were nearly 4.6 million drug-related ED visits of which about one-half were attributed to adverse reactions to pharmaceuticals, and almost one-half were attributed to drug misuse or abuse. ED visits involving misuse or abuse of pharmaceuticals increased 98.4 percent between 2004 and 2009, from 627,291 visits in 2004 to 1,244,679 visits in 2009. ED visits involving adverse reactions to pharmaceuticals taken as prescribed increased 82.9 percent between 2005 and 2009, from 1,250,377 visits in 2005 to 2,287,273 visits in 2009. <http://oas.samhsa.gov/2k10/DAWN034/EDHighlights.cfm>

STUDY SHOWS DRAMATIC SHIFTS IN SUBSTANCE ABUSE TREATMENT ADMISSIONS AMONG THE STATES BETWEEN 1998 AND 2008

Although the overall rate of admissions to substance abuse treatment in the U.S. remained stable between 1998 and 2008, at about 770 admissions for every 100,000 persons in the population, a new study shows striking changes and variations in admission rates by region.

<http://www.dasis.samhsa.gov/teds08/teds2k8sweb.pdf>

AHRQ RESEARCH ACTIVITIES: COMMUNITY HOSPITALS CARE FOR PSYCHIATRIC PATIENTS IN MEDICAL-SURGICAL BEDS WHEN PSYCHIATRIC UNITS ARE FULL

Many patients with psychiatric disorders requiring inpatient care are treated in community hospitals. Such patients may be admitted to psychiatric units or placed in general medical beds called "scatter beds." A new study funded by the Agency for Healthcare Research and Quality (AHRQ) found that nearly seven percent of psychiatric discharges were from scatter beds, which community hospitals typically used as a short-term substitute for specialty psychiatric beds when units were full.

<http://www.ahrq.gov/research/jan11/0111RA11.htm>

CDC REPORTS

ADVERSE CHILDHOOD EXPERIENCES REPORTED BY ADULTS: FIVE STATES, 2009

Adverse childhood experiences (ACEs) include verbal, physical, or sexual abuse, as well as family dysfunction. To examine whether a history of ACEs was common in a randomly selected population, the Centers for Disease Control and Prevention (CDC) analyzed information from 26,229 adults in five states using the 2009 ACE module of the Behavioral Risk Factor Surveillance System. This report describes the results of that analysis, which indicated that, overall, 59.4 percent of respondents had at least one ACE, and 8.7 percent reported five or more ACEs. The high prevalence of ACEs underscores the need for additional efforts at the state and local level to reduce and prevent child maltreatment and associated family dysfunction, and further development and dissemination of trauma-focused services to treat stress-related health outcomes associated with ACEs.

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5949a1.htm?s_cid=mm5949a1_e

QUICKSTATS: PERCENTAGE OF ADULTS AGED 18 YEARS WHO EXPERIENCED SERIOUS PSYCHOLOGICAL DISTRESS DURING THE PRECEDING 30 DAYS, BY SEX AND AGE GROUP

This CDC QuickStats reports analysis of the six psychological distress questions that are included in the National Health Interview Survey. Respondents are asked separate questions about how often during the preceding 30 days they felt: 1) so sad that nothing could cheer them up; 2) hopeless; 3) worthless; 4) that everything was an effort; 5) nervous; or 6) restless or fidgety.

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5949a5.htm?s_cid=mm5949a5_e

DCOE CENTERS FOR PSYCHOLOGICAL HEALTH AND TRAUMATIC BRAIN INJURY: 2011 MONTHLY WEBINAR SCHEDULE SET

The Defense Centers of Excellence (DCOE) for Psychological Health and Traumatic Brain Injury (TBI) has released its monthly webinar series schedule for 2011. The webinar series presents resources and best practices regarding TBI and psychological health care and offers participants an interactive environment to ask questions or comment. In 2011, topics will range from the impact of war on children to post-traumatic stress disorder in the wake of a natural disaster.

<http://www.dcoe.health.mil/blog/article.aspx?id=1&postid=179>

RESOURCES FROM DEPARTMENT OF JUSTICE

SUBSTANCE USE AND DELINQUENT BEHAVIOR AMONG SERIOUS ADOLESCENT OFFENDERS

This report presents results from the *Pathways to Desistance Study*. This bulletin focuses on understanding the connection between substance use and serious offending, including how these behaviors affect one another in adolescence and how they change in early adulthood, particularly when one behavior ceases.

<http://www.ojjdp.gov/publications/PubAbstract.asp?pubi=254883>

A TALE OF THREE CITIES: DRUGS, COURTS AND COMMUNITY JUSTICE

This report discusses how three new and innovative community courts are building on the drug court model, expanding the reach of problem-solving principles beyond specialized courtrooms, and making a significant contribution to the fight against substance abuse.

http://www.ojp.usdoj.gov/BJA/pdf/CCI_Tale_3_Cities.pdf

CALENDAR OF EVENTS

WEBINAR: COLLATERAL CONSEQUENCES: INVOLVEMENT IN THE CRIMINAL JUSTICE SYSTEM

JANUARY 18, 2011 3:00-5:00PM ET

The SAMHSA National GAINS Center announces this webinar as part of its technical assistance to justice-involved consumer/veteran focused initiatives across the nation. This webinar will: 1) identify many of the “collateral consequences” faced by people with histories of involvement in the criminal justice system; 2) identify strategies for eliminating or mitigating these consequences; and 3) provide concrete strategies for planners, service recipients, providers, and advocates to use when addressing these barriers. To participate, call: 1-888-456-0336. The conference number is PW2346131 and the audience passcode is JDTR. Viewers should point their Internet browser to:

<https://www.mymeetings.com/nc/join.php?i=PW2346131&p=JDTR&t=c>

WEBINAR: THE ART OF WRAPAROUND IN THE CHILD WELFARE ENVIRONMENT

JANUARY 25, 2011, 3:00-4:30PM ET

This SAMHSA National Wraparound Initiative (NWI) webinar will include an overview of how to balance wraparound systems of care and traditional child welfare practice. Topics covered will include: 1) understanding cultures that affect the system; 2) some key factors/strategies for communicating and collaborating with stakeholders; and 3) ways to develop clear roles, definitions and expectations for wraparound team members and community partners.

Register at <https://www1.gotomeeting.com/register/948840776>

DCOE WEBINAR: PEER-TO-PEER SUPPORT MODEL PROGRAM

JANUARY 27, 2011 1:00-4:00PM ET

This DCOE webinar will highlight peer-to-peer programs and discuss significant program elements and actionable options for Defense Department leaders, program managers, and practitioners.

<http://www.dcoe.health.mil/Training/MonthlyWebinars.aspx>

WEBINAR: ENGAGING AND INVOLVING YOUTH IN WRAPAROUND

FEBRUARY 22, 2011, 2:00-3:30PM ET

This SAMHSA National Wraparound Initiative (NWI) webinar will focus on concrete strategies that can be used to increase the extent to which young people participate meaningfully on their own wraparound teams. The webinar will also focus on providing coaching/training to people who carry out these strategies, and evaluating the quality and impact of these efforts to increase youth participation.

Register at <https://www1.gotomeeting.com/register/812294817>

2011 DOD/VA ANNUAL SUICIDE PREVENTION CONFERENCE: ALL THE WAY HOME: PREVENTING SUICIDE AMONG SERVICE MEMBERS AND VETERANS

SAVE THE DATE: MARCH 14-17, 2011, BOSTON, MA

The 2011 Department of Defense (DOD) and VA Annual Suicide Prevention Conference is planned for March 2011 in Boston, Massachusetts. <http://www.dcoe.health.mil/Events/UpcomingConferences.aspx>

CALLS FOR PUBLIC INPUT

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORTS

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 the 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:

KEY QUESTIONS: COMPARATIVE EFFECTIVENESS OF THERAPIES FOR ADOLESCENTS AND YOUNG ADULTS WITH AUTISM SPECTRUM DISORDERS (DEADLINE FOR COMMENTS IS JANUARY 18, 2011)
<http://effectivehealthcare.ahrq.gov/index.cfm/research-available-for-comment/comment-key-questions/?pageaction=displayquestions&topicid=271&questionset=151>

DRAFT REPORT: COMPARATIVE EFFECTIVENESS OF SECOND-GENERATION ANTIDEPRESSANTS IN THE PHARMACOLOGIC TREATMENT OF ADULT DEPRESSION – AN UPDATE TO A 2007 REPORT (DEADLINE FOR COMMENTS IS JANUARY 20, 2011)
<http://effectivehealthcare.ahrq.gov/index.cfm/research-available-for-comment/comment-draft-reports/?pageaction=displaydraftcommentform&topicid=210&productid=601&documenttype=draftReport>

CLINICAL TRIAL PARTICIPATION NEWS

AUTISM PEDIATRIC RESEARCH STUDY: IDENTIFICATION OF CHARACTERISTICS ASSOCIATED WITH SYMPTOM REMISSION IN AUTISM

NIMH is recruiting children and adolescents (ages 7-17) who, since being diagnosed with autism, have made significant improvements such that they no longer meet criteria for a diagnosis of autism. NIMH is also recruiting children who continue to meet criteria for autism, as well as typically developing children. The study's goal is to better understand how children who make remarkable improvement may differ from children who continue to meet criteria for autism. The study involves several inpatient and outpatient visits to Bethesda, MD, that may occur over a few days or several weeks, depending on what works best for the child and his or her parents. The study involves an autism diagnostic evaluation as well as a thorough neuropsychological and medical evaluation. A summary of all clinically relevant study findings, including results of the neuropsychological exam, will be provided. There is no cost to participate and children are compensated for their time. Travel assistance and lodging may be provided. For further information please call the study coordinator at 301-435-7962 (TTY 866-411-1010) or email autismoutcomestudy@mail.nih.gov.

For more information on research conducted by NIMH in Bethesda, MD: <http://patientinfo.nimh.nih.gov>

FUNDING INFORMATION

NIMH: RAPIDLY-ACTING TREATMENTS FOR TREATMENT-RESISTANT DEPRESSION (RAPID)

https://www.fbo.gov/index?s=opportunity&mode=form&id=a748afe505349c4821425bb5311f05bc&tab=core&_cview=1

BJA SOLICITS APPLICATIONS FOR THE RESIDENTIAL SUBSTANCE ABUSE TREATMENT FOR STATE PRISONERS PROGRAM FY 2011 FORMULA GRANT

<http://www.ojp.usdoj.gov/BJA/grant/11RSATsol.pdf>

NIH BLUEPRINT FOR NEUROSCIENCE RESEARCH SHORT COURSES IN NEUROTHERAPEUTICS DEVELOPMENT

<http://grants.nih.gov/grants/guide/rfa-files/RFA-NS-12-001.html>

VA: SUPPORTIVE SERVICES FOR VETERAN FAMILIES PROGRAM

<http://www.federalregister.gov/articles/2010/12/17/2010-31742/fund-availability-under-the-supportive-services-for-veteran-families-program#p-3>

SAMHSA: STATE AND TRIBAL YOUTH SUICIDE PREVENTION GRANTS

http://www.samhsa.gov/grants/2011/sm_11_001.aspx

SAMHSA: CAMPUS SUICIDE PREVENTION GRANTS

http://www.samhsa.gov/grants/2011/sm_11_002.aspx



The **Outreach Partnership Program** a nationwide outreach initiative of the National Institute of Mental Health (NIMH) that enlists state and national organizations in a partnership to help close the gap between mental health research and clinical practice, inform the public about mental illnesses, and reduce the stigma and discrimination associated with mental illness. For more information about the program please visit:

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

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