



UPDATE

May 15, 2016

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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*

KETAMINE LIFTS DEPRESSION VIA A BYPRODUCT OF ITS METABOLISM

National Institutes of Health (NIH) researchers and grantees have discovered that ketamine rapidly lifts depression via a byproduct of its metabolism. This metabolite singularly reversed depression-like behaviors in mice without triggering any of the anesthetic, dissociative, or addictive side effects associated with ketamine.

Press Release: <http://www.nimh.nih.gov/news/science-news/2016/ketamine-lifts-depression-via-a-byproduct-of-its-metabolism.shtml>

SECRETS TO OUR SMARTS HIDDEN IN THE FOLDS OF OUR CORTEX

National Institute of Mental Health (NIMH) researchers find that the more folding in the thinking parts of our brain, the smarter we are – to a degree. Increasing gyrification in a network of regions in the human brain's outer mantle is significantly associated with general cognitive ability, a finding replicated in 440 healthy adults and in an independent sample of 662 healthy children who underwent structural MRI scans and extensive neuropsychological testing.

Science update: <http://www.nimh.nih.gov/news/science-news/2016/secrets-to-our-smarts-hidden-in-the-folds-of-our-cortex.shtml>

NIMH GRANTEES NAMED RECIPIENTS OF PRESTIGIOUS PRESIDENTIAL AWARD

NIMH congratulates three NIMH grantees who received the 2016 Presidential Early Career Award for Scientists and Engineers (PECASE). Kafui Dzirasa from Duke University, Tina Goldstein from the University of Pittsburgh, and Sachin Patel of Vanderbilt University joined scientists and engineers from across the country to meet with President Obama at the White House for the May 5th awards ceremony honoring the recipients. Established in 1996 by President Clinton, the PECASE Award is the highest honor bestowed by the government of the United States (U.S.) on science and engineering professionals in the early stages of their research careers.

Science Update: <http://www.nimh.nih.gov/news/science-news/2016/nimh-grantees-named-recipients-of-prestigious-presidential-award.shtml>

MORE YOUNG CHILDREN WITH ADHD COULD BENEFIT FROM BEHAVIOR THERAPY; BEHAVIOR THERAPY RECOMMENDED BEFORE MEDICINE FOR YOUNG CHILDREN WITH ADHD

More young children two to five years of age receiving care for attention-deficit/hyperactivity disorder (ADHD) could benefit from psychological services – including the recommended treatment of behavior therapy. The Centers for Disease Control and Prevention’s (CDC) latest *Vital Signs* report urges healthcare providers to refer parents of young children with ADHD for training in behavior therapy before prescribing medicine to treat the disorder.

Press Release: <http://www.cdc.gov/media/releases/2016/p0503-children-adhd.html>

Digital Press Kit: <http://www.cdc.gov/media/dpk/2016/dpk-vs-adhd-treatment.html>

OLANZAPINE: DRUG SAFETY COMMUNICATION - FDA WARNS ABOUT RARE BUT SERIOUS SKIN REACTIONS

The Food and Drug Administration (FDA) is warning that the antipsychotic medicine olanzapine can cause a rare but serious skin reaction that can progress to affect other parts of the body. The FDA is adding a new warning to the drug labels for all olanzapine-containing products that describes this severe condition known as Drug Reaction with Eosinophilia and Systemic Symptoms.

Safety Alert:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm500123.htm>

ARIPIPRAZOLE: DRUG SAFETY COMMUNICATION - FDA WARNS ABOUT NEW IMPULSE- CONTROL PROBLEMS

The FDA is warning that compulsive or uncontrollable urges to gamble, binge eat, shop, and have sex have been reported with the use of the antipsychotic drug aripiprazole (Abilify, Abilify Maintena, Aristada, and generics). These uncontrollable urges were reported to have stopped when the medicine was discontinued or the dose was reduced. These impulse-control problems are rare, but they may result in harm to the patient and others if not recognized.

Although pathological gambling is listed as a reported side effect in the current aripiprazole drug labels, this description does not entirely reflect the nature of the impulse-control risk FDA identified. In addition, FDA has become aware of other compulsive behaviors associated with aripiprazole, such as compulsive eating, shopping, and sexual actions. These compulsive behaviors can affect anyone who is taking the medicine. As a result, FDA is adding new warnings about all of these compulsive behaviors to the drug labels and the patient Medication Guides for all aripiprazole products.

Safety Alert:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm498823.htm>

FDA APPROVES FIRST DRUG TO TREAT HALLUCINATIONS AND DELUSIONS ASSOCIATED WITH PARKINSON'S DISEASE

The FDA approved Nuplazid (pimavanserin) tablets, the first drug approved to treat hallucinations and delusions associated with psychosis experienced by some people with Parkinson's disease. Hallucinations or delusions can occur in as many as 50 percent of patients with Parkinson's disease at some time during the course of their illness. People who experience them see or hear things that are not there (hallucinations) and/or have false beliefs (delusions). The hallucinations and delusions experienced with Parkinson's disease are serious symptoms, and can lead to thinking and emotions that are so impaired that the people experiencing them may not relate to loved ones well or take appropriate care of themselves.

Press Release: <http://www.fda.gov/newsevents/newsroom/pressannouncements/ucm498442.htm>

BRINTELLIX (VORTIOXETINE): DRUG SAFETY COMMUNICATION - BRAND NAME CHANGE TO TRINTELLIX, TO AVOID CONFUSION WITH ANTIPLATELET DRUG BRILINTA (TICAGRELOR)

The FDA has approved a brand name change for the antidepressant Brintellix (vortioxetine) to decrease the risk of prescribing and dispensing errors resulting from name confusion with the blood-thinning medicine Brilinta (ticagrelor). The new brand name of the drug will be Trintellix, and it is expected to be available starting in June 2016. No other changes will be made to the label or packaging, and the medicine is exactly the same. Because of the lag time associated with manufacturing bottles with the new brand name, healthcare professionals and patients may continue to see bottles labeled with the brand name Brintellix during the transition period.

Safety Alert:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm498607.htm>

AHRQ REPORT: ACCESS AND AFFORDABILITY OF HEALTH INSURANCE

According to a new Agency for Healthcare Research and Quality (AHRQ) report, more people have healthcare coverage, a usual place to go for medical care, and can more easily afford medical bills after the Affordable Care Act's provisions have taken effect. The *2015 National Healthcare Quality and Disparities Report* and *5th Anniversary Update on the National Quality Strategy* reflects gains in enrollment in qualified health plans through the Affordable Care Act's Health Insurance Marketplace as well as expanded Medicaid coverage that became available in more than half of the states. The report found that the rate of uninsured Americans under age 65 decreased from 18 percent to 10 percent. Hispanics showed the biggest gains in having a usual place to go for medical care, climbing from 77 percent in 2010 to 83 percent in the first half of 2015. The cost of healthcare coverage, meanwhile, became more affordable as fewer people reported having trouble paying medical bills within the past year.

Press Release: <http://www.ahrq.gov/news/qdr.html>

NEW FROM NIMH

NEW WEB PORTAL: CHILD AND ADOLESCENT MENTAL HEALTH

Children and teens can develop the same mental health disorders and conditions as adults, but their symptoms may be different or hard to identify. Learn more about child and adolescent mental health by visiting NIMH's new web portal.

<http://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health/index.shtml>

TWITTER CHAT ON DMDD AND SEVERE IRRITABILITY: TRANSCRIPT AVAILABLE

The transcript from NIMH's Twitter chat on disruptive mood dysregulation disorder (DMDD) and severe irritability is available. <https://storify.com/NIMHgov/nimh-twitter-chat-on-disruptive-mood-dysregulation>

HEALTH AND EDUCATION MATERIALS ARE NOW PINNABLE!

NIMH brochures and booklets on various mental disorders are now all pinnable to share on Pinterest! To pin, just hover your mouse over the publication image and you will see the pin button appear.

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

NEW FROM NIH

MOMS' MENTAL HEALTH MATTERS: EDUCATION INITIATIVE

This initiative is designed to educate consumers and healthcare providers about who is at risk for depression and anxiety during and after pregnancy, the signs of these problems, and how to get help. This first phase of outreach focuses on educating consumers using free materials, including an action plan, posters, and tips that family and friends can use to start a conversation about this issue with their loved one. This initiative is part of the National Institute of Child Health and Human Development's (NICHD) National Child and Maternal Health Education Program. <https://www.nichd.nih.gov/ncmh/About.aspx>

NIH RESEARCH MATTERS: ANTIDEPRESSANTS HAVE VARIED EFFECTS ON WEIGHT CHANGE

An analysis of antidepressant use found that non-smokers who took bupropion lost weight compared to those taking other depression medications. The potential effect on weight is one factor for people to consider with their doctors when choosing an antidepressant.

<https://www.nih.gov/news-events/nih-research-matters/antidepressants-have-varied-effects-weight-change>

NIH DIRECTOR'S BLOG: FIGHTING DEPRESSION: KETAMINE METABOLITE MAY OFFER BENEFITS WITHOUT THE RISKS

For people struggling with severe depression, antidepressants have the potential to provide much-needed relief, but they often take weeks to work. That's why there is growing excitement about reports that the anesthetic drug ketamine, when delivered intravenously in very low doses, can lift depression and suicidal thoughts within a matter of hours. Still, there has been reluctance to consider ketamine for widespread treatment of depression because, even at low doses, it can produce very distressing side effects, such as dissociation—a sense of disconnection from one's own thoughts, feelings, and sense of identity. NIH Director Francis Collins blogs about new research on ketamine that suggests there may be a way to tap into ketamine's depression-fighting benefits without the side effects.

<https://directorsblog.nih.gov/2016/05/10/fighting-depression-ketamine-metabolite-may-offer-benefits-without-the-risks/>

ASSESSING COGNITIVE IMPAIRMENT IN OLDER PATIENTS: A QUICK GUIDE FOR PRIMARY CARE PHYSICIANS

Primary care practices are often the first to address a patient's complaints—or a family's concerns—about memory loss or possible dementia. This quick guide from the National Institute on Aging provides information about assessing cognitive impairment in older adults. With this information, primary care practice staff can identify emerging cognitive deficits and possible causes, following up with treatment for what may be a reversible health condition.

<https://www.nia.nih.gov/alzheimers/publication/assessing-cognitive-impairment-older-patients>

USING RESEARCH TO HELP STOP YOUTH VIOLENCE

NICHD Acting Director Dr. Catherine Spong describes advances such as better screening tools and educational programs in an overview on NICHD-sponsored research to protect young people from violence.

https://www.nichd.nih.gov/about/overview/directors_corner/Pages/default.aspx

NEW FROM SAMHSA

EARLY PSYCHOSIS INTERVENTION: RESEARCH REVIEW

This review contains articles that set the context for early psychosis interventions and describe some emerging practices in the field. It features the voices of youth and families – informing the reader from a variety of perspectives. This annual research review is developed by the Research and Training Center for Pathways to Positive Futures jointly funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the U.S. Department of Education.

<http://pathwaysrtc.pdx.edu/focalpointS16>

BLOG POST: WHAT'S GOOD FOR MENTAL HEALTH IS GOOD FOR THE ECONOMY

SAMHSA's Center for Mental Health Services Director Paolo del Vecchio describes research about the costs of mental illness on the global economy that were released at a recent World Bank Group and World Health Organization meeting of international leaders. There is growing recognition that providing necessary treatment and services to people with mental illness brings a significant return on investment. Every dollar spent on mental health programs results in \$3-\$5 in new economic contributions and years of healthy life.

<http://blog.samhsa.gov/2016/04/29/whats-good-for-mental-health-is-good-for-the-economy>

BLOG POST: HELPING CHILDREN RECOVER AND THRIVE DURING NATIONAL MENTAL HEALTH AWARENESS MONTH

This SAMHSA blog post discusses the importance of speaking up about child traumatic stress and connecting families with the resources and supports they need to help their children. Through the "Helping Kids Recover and Thrive" campaign, SAMHSA's National Child Stress Initiative provides resources to help parents and caregivers, educators, and health professionals learn more about child traumatic stress and connect with support services. <http://blog.samhsa.gov/2016/05/10/helping-children-recover-and-thrive-during-national-mental-health-awareness-month/#.VzIzfoQrJD9>

ALCOHOLFX: A NEW EDUCATIONAL APP FOR UNDERAGE DRINKING PREVENTION

SAMHSA has released a new mobile application (app) for underage drinking prevention—*Alcohol's Effects on the Brain (AlcoholFX)*. This free, science-based app for tablets teaches students ages 10 to 12 how alcohol can harm their brains. Based on lesson plans from SAMHSA's Reach Out Now initiative, the app can easily integrate with instruction in fifth- and sixth-grade classrooms. *AlcoholFX* helps increase students' knowledge of alcohol's negative consequences before they reach the average age of first use.

<https://www.stopalcoholabuse.gov/townhallmeetings/whatsnew/technicalassistance.aspx?ID=86>

TOOLS FOR TREATMENT: FAMILY-FOCUSED BEHAVIORAL HEALTH SUPPORT FOR PREGNANT AND POSTPARTUM WOMEN

The Addiction Technology Transfer Center (ATTC) Center of Excellence on Behavioral Health for Pregnant Women and Their Families has launched its website, featuring a web-based, mobile-friendly toolkit.

<http://attcppwtools.org/home.aspx>

NEW SAMHSA REPORTS

ADOLESCENT MENTAL HEALTH SERVICE USE AND REASONS FOR USING SERVICES IN SPECIALTY, EDUCATIONAL, AND GENERAL MEDICAL SETTINGS

Of the 24.9 million adolescents aged 12 to 17 in the U.S. in 2014, 3.4 million received mental health services in a specialty setting (i.e., inpatient or outpatient mental health setting), 3.2 million received services in an educational setting, and 700,000 received services in a general medical setting.

http://www.samhsa.gov/data/sites/default/files/report_1973/ShortReport-1973.html

CHARACTERISTICS OF CRIMINAL JUSTICE SYSTEM REFERRALS DISCHARGED FROM SUBSTANCE ABUSE TREATMENT AND FACILITIES WITH SPECIALLY DESIGNED CRIMINAL JUSTICE PROGRAMS

In 2011, there were 1.7 million discharges from substance abuse treatment programs; of these, 34.4 percent came to treatment through a referral from the criminal justice system.

http://www.samhsa.gov/data/sites/default/files/report_2321/ShortReport-2321.html

ADULTS IN POOR PHYSICAL HEALTH REPORTING BEHAVIORAL HEALTH CONDITIONS HAVE HIGHER HEALTH COSTS

Adults aged 18 to 64 in poor physical health who also reported behavioral health conditions (i.e., mental or substance use disorders) had higher total health care expenditures than adults in poor health without behavioral health conditions. http://www.samhsa.gov/data/sites/default/files/report_2107/ShortReport-2107.html

INCREASING ACCESS TO BEHAVIORAL HEALTH SERVICES AND SUPPORTS THROUGH SYSTEMS OF CARE

A new report shows that behavioral health treatment and supports provided through systems of care can have far-reaching benefits for children and adolescents who experience mental disorders. Some of these benefits include a reduction in rates of suicidal thoughts and suicide attempts.

http://www.samhsa.gov/sites/default/files/programs_campaigns/childrens_mental_health/awareness-day-2016-short-report.pdf

NEW FROM SAMHSA'S NATIONAL CHILD TRAUMATIC STRESS NETWORK

SECONDARY TRAUMATIC STRESS: A FACT SHEET FOR ORGANIZATIONS EMPLOYING COMMUNITY VIOLENCE WORKERS

Community violence (CV) workers or interventionists provide peer support services, lead afterschool activities, act as “violence interrupters,” and advocate for the most vulnerable or underserved members of a community. This fact sheet is intended to support organizations employing CV workers in reducing the risks associated with this important work.

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

ESSENTIAL ELEMENTS OF A TRAUMA-INFORMED JUVENILE JUSTICE SYSTEM

Children who come to the attention of the juvenile justice system are a challenging and underserved population. The *Essential Elements of a Trauma-Informed Juvenile Justice System* help juvenile justice professionals understand and provide trauma-focused services to these youth. The eight elements discussed include Trauma-Informed Policies and Procedures, Identification/Screening of Youth Who Have Been Traumatized, Clinical Assessment/Intervention for Trauma-Impaired Youth, Trauma-Informed Programming and Staff Education, Prevention and Management of Secondary Traumatic Stress, Trauma-Informed Partnering with Youth and Families, Trauma-Informed Cross System Collaboration, and Trauma-Informed Approaches to Address Disparities and Diversity.

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

NEW FROM CDC

CDC STUDY: FORMER NFL PLAYERS NOT AT INCREASED RISK OF SUICIDE

Retired National Football League players are at no greater risk of suicide when compared with the general U.S. population, according to a new CDC study. <http://www.cdc.gov/media/releases/2016/p0510-nfl-suicide-risk.html>

CDC LAUNCHES NEWLY DESIGNED CDC LEARNING CONNECTION

CDC has launched the newly designed *CDC Learning Connection*, a source for information on public health training opportunities developed by CDC, CDC partners, and other federal agencies. Website features, social media, and an e-newsletter update the public health field about training opportunities, including many that offer free continuing education. <http://www.cdc.gov/learning/index.html>

PREVENTING HOMELESSNESS AMONG YOUTH AGING OUT OF CARE

Over 20,000 youth exit or "age out" of foster care each year once they reach the age of maturity in their particular state. Many of these young people may not have the supports and assistance they need to successfully transition to adulthood, and they may find it particularly difficult to secure safe and stable housing. A study conducted on behalf of the U.S. Department of Housing and Urban Development and the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Planning and Evaluation examined public resources and policies that address homelessness among youth aging out of care. https://www.huduser.gov/portal/youth_foster_care.html

SYSTEMATIC REVIEW: INTERVENTIONS TO IMPROVE MEDICATION ADHERENCE FOR SERIOUS MENTAL ILLNESS AND PTSD

Non-adherence to medication is a serious problem in the U.S. It is associated with increased emergency department visits and hospitalizations, higher costs of care, and greater mortality. For patients with serious mental illness, including schizophrenia and other psychotic spectrum disorders, bipolar disorder, and posttraumatic stress disorder (PTSD), adherence to psychopharmacological and/or non-psychopharmacological medications is an important concern. This report synthesized the evidence examining: 1) the effectiveness of interventions to improve medication adherence in patients with psychotic spectrum disorders, bipolar disorder, and PTSD; 2) the effect of these interventions on patient outcomes; and 3) the related costs and any associated intervention-specific harms.

http://www.hsrd.research.va.gov/publications/management_briefs/default.cfm?ManagementBriefsMenu=eBrief-no109

JOURNAL OF JUVENILE JUSTICE: IMPACT OF TRAUMA ON YOUTH

This journal issue from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) features articles on the impact trauma has on youth and the importance of a trauma-informed juvenile justice system. Other topics include studies on substance use as a predictor of the types of offending among youth, the effect of ethnic/racial socialization on recent aggressive behaviors among youth who offend, and gender and the risk for recidivism among youth in truancy court. Also included is a pilot study to assess probation officer knowledge of youth with intellectual disabilities. <http://www.journalofjuvjustice.org/JOJJ0501/epub.htm>

ED-HHS STATEMENT ON FAMILY ENGAGEMENT

The Departments of Education and HHS have issued a policy statement on the implementation of effective family engagement practices from the early years to the early grades.

<http://www2.ed.gov/about/inits/ed/earlylearning/families.html>

EVENTS

HEALTH OBSERVANCE: NATIONAL FOSTER CARE MONTH

MAY 2016

2016 National Foster Care Month focuses on family reunification with the theme, "Honoring, Uniting, and Celebrating Families." This year's initiative website offers resources and tools for child welfare professionals, birth parents, foster parents and caregivers, youth, and more to help all parties in a child's life work toward and support the reunification process. <https://www.childwelfare.gov/fostercaremonth/>

HEALTH OBSERVANCE: NATIONAL PREVENTION WEEK

MAY 15-21, 2016

National Prevention Week (NPW) is an annual health observance dedicated to increasing public awareness of, and action around, substance abuse and mental health issues. The overall theme for 2016 is, “Strong As One. Stronger Together.” <http://www.samhsa.gov/prevention-week>

WEBINAR: PROGRAM EVALUATION CAN HELP YOU ACHIEVE OUTCOMES: EMPOWERMENT EVALUATION

MAY 17, 2016, 1:00-2:00 PM ET

This webinar supports the efforts of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) to improve the psychological health and traumatic brain injury (TBI) system of prevention and care. This webinar will provide guidance on understanding the basics about empowerment evaluation—putting the logic and tools of evaluation into the hands of program evaluation practitioners, so that they can plan more systematically, implement with quality, better self-evaluate, and use continuous quality improvement. http://dcoe.mil/Training/Monthly_Webinars.aspx

WEBINAR: SPECIAL ENROLLMENT PERIODS AND RESOURCES FOR THE UNINSURED

MAY 18, 2016, 3:00 PM ET

Getting married or graduating from college this spring? The healthcare law has created special enrollment periods for those who experience special circumstances such as graduating from college and losing health insurance, getting married and needing coverage for a spouse, losing employer insurance, or turning 26 and losing coverage on a parent’s health plan. Join this HHS webinar to learn more about special enrollment periods and how to enroll in the Health Insurance Marketplace. For those who are uninsured and don’t qualify for the special enrollment period, learn what resources are available and when to enroll in the Health Insurance Marketplace. <https://attendeegotowebinar.com/register/4047050887298556675>

WEBINAR: FINDING COMMON GROUND: COLLABORATING WITH PAYERS TO SUPPORT INTEGRATION

MAY 19, 2016, 3:00 PM ET

Integrated care is more than a partnership between primary and behavioral healthcare agencies – it is also a partnership with payers. By engaging in meaningful conversations about the long-term goals of integrating primary and behavioral healthcare, providers and payers can create mutually beneficial solutions that support cost savings and improved health. Join this SAMHSA-Health Resources and Services Administration Center for Integrated Health Solutions webinar to learn the key strategies to connecting with payers and establishing meaningful partnerships. Get tips and insights from a payer and behavioral health providers on how they established partnerships to support behavioral health and primary care integration.

<https://goto.webcasts.com/starthere.jsp?ei=1100830>

WEBINAR: GOT COVERAGE? NEXT STEPS IN USING YOUR HEALTH INSURANCE

MAY 19, 2016, 2:00 PM ET

Many people now have health insurance, but may not know how to use it. This HHS webinar will highlight From Coverage to Care health insurance literacy tools and how to use them. The importance of preventive benefits and primary care will also be discussed. Guest speakers will highlight how they use the materials.

<https://attendee.gotowebinar.com/register/3319728344435418371>

WEBINAR: PREVENTING YOUTH MARIJUANA USE: CHANGING PERCEPTION OF RISK

MAY 19, 2016, 2:00 PM ET

As social norms regarding the harms of marijuana use shift, communities face increasing challenges to prevent and reduce youth marijuana use. At the same time, limited information exists on the effectiveness of strategies designed to prevent marijuana use among young people. This NPW webinar will explore how attitudes, beliefs, and norms about marijuana influence its use, highlighting examples of how states have increased perception of risk among young people. Discussion will also highlight strategies for preventing youth marijuana use and new tools available to support prevention efforts from SAMHSA's Center for the Application of Prevention Technologies. <https://captconnect.edc.org/event/preventing-youth-marijuana-use-changing-perception-risk>

WEBINAR: OUTREACH, PREVENTION, AND INTERVENTION STRATEGIES IN TRIBAL COMMUNITIES: A FOCUS ON CHILD SAFETY

MAY 19, 2016, 2:00-3:30 PM ET

This OJJDP webinar will present participants with considerations and methods for conducting outreach, prevention, and intervention in tribal communities. Several community safety topics are addressed within tribal communities; however, the messages are not always well received. This webinar will discuss common outreach, prevention, and intervention program failures surrounding child safety and how to improve these approaches. Participants will also identify strategies that include partnerships and technology to increase child safety messaging. https://events-na8.adobeconnect.com/content/connect/c1/1110525827/en/events/event/shared/default_template_simple/event_landing.html?sco-id=1820148125

TWITTER CHAT: SUICIDE PREVENTION

MAY 20, 2016, 1:00–2:00 PM ET

In observance of the fifth annual NPW, join SAMHSA and Torrey DeVitto, this year's NPW ambassador, in a Twitter chat to discuss suicide prevention. Participate in the conversation with the hashtag #NPW2016, and follow @samhsagov and @torreydevitto on Twitter.

<https://www.facebook.com/events/1082224051851380/>

WEBINAR: HELPING EDUCATORS AND COUNSELORS PREVENT BULLYING OF AND DISCRIMINATION AGAINST OUR NATION'S MUSLIM YOUTH

MAY 23, 2016, 2:00-3:30 PM ET

This OJJDP webinar will discuss civil rights, bullying and harassment, basic cultural competence, behavioral health implications of bullying, and resources for protecting America's Muslim youth. https://events-na8.adobeconnect.com/content/connect/c1/1110525827/en/events/event/shared/default_template_simple/event_registration.html?sco-id=1872941724&_charset_=utf-8

WEBINAR: COUNTERING SCHOOL PUSHOUT AND THE CRIMINALIZATION OF GIRLS OF COLOR

MAY 24, 2016, 3:00-4:30 PM ET

This OJJDP webinar will examine the pathways to school pushout and confinement for girls of color, particularly African American girls, who are consistently over-represented in school discipline categories. The session will also explore key concepts and strategies to reduce the criminalization of these girls and repair their relationships with schools. https://events-na8.adobeconnect.com/content/connect/c1/1110525827/en/events/event/shared/default_template_si/mple/event_registration.html?sco-id=1876787398&_charset=utf-8

WEBINAR: TEEN SMOKING, VAPING & DIPPING: HOW SHOULD PROVIDERS RESPOND?

MAY 25, 2016, 12:00-1:00 PM ET

Although teen cigarette smoking has dropped to historic lows, rates of electronic cigarette use is more than double that of regular cigarettes. The U.S. Surgeon General has declared adolescent nicotine use a pediatric epidemic. This webinar will provide participants with an overview of current research on rates of nicotine and tobacco use with respect to age and race/ethnicity, and the effects of nicotine on the adolescent brain. All cigarette smoking, including electronic cigarette use, or smokeless tobacco use, have associated health risks. Participants will obtain an understanding of how nicotine use often accompanies other drug use and therefore, needs to be addressed as part of all substance use disorder treatments. Participants will be provided ideas for implementing effective, evidence-based strategies for use with teens. This webinar is part of the quarterly series on new approaches in evidence-based prevention and treatment for youth from the National Institute on Drug Abuse-SAMHSA ATTC Blending Initiative. <https://umkcsonhs.adobeconnect.com/e7x1f65r7mf/event/registration.html>

WEBINAR: THE POWER OF ONE: THE ROLE OF PEER SUPPORT IN SUICIDE PREVENTION

MAY 25, 2016, 2:00-3:30 PM ET

The Defense Suicide Prevention Office in collaboration with the Department of Veterans Affairs (VA) and DCoE is hosting this webinar on peer support in suicide prevention. The objectives of the webinar include: understanding recent trends in the epidemiology of suicide and related service needs; understanding the theoretical mechanisms by which peer support might mitigate suicide risk factors; being familiar with the clinical trial evidence regarding the efficacy of peer support for reducing the risk of suicide; and understanding the spectrum of services in which peers are playing a role with regard to suicide prevention, efforts to evaluate those services, and areas in need of additional research. <http://dspocds.pesgce.com>

WEBINAR: TREATMENT ACCESS AND THE NEED FOR DIVERSE TREATMENT APPROACHES

MAY 25, 2016, 2:00-3:30 PM ET

Disparities in behavioral healthcare leave damaging impacts on underserved populations across the nation. HHS has launched several initiatives to help address challenges presented by gaps in behavioral healthcare access and delivery, and eliminate barriers to quality behavioral healthcare provided to underserved populations. This webinar presented by SAMHSA's Minority Fellowship Program Coordinating Center will highlight key initiatives that promote overall behavioral health equity and provide an overview of specific behavioral health approaches to working with Latinos/Latinas and other populations.

<https://attendee.gotowebinar.com/register/2115785102187121666>

WEBINAR: FACILITATING HELP-SEEKING BEHAVIOR FOR PSYCHOLOGICAL HEALTH CONCERNS IN SERVICE MEMBERS

MAY 26, 2016, 1:00-2:30 PM ET

This DCoE webinar presents research findings about the barriers to care for service members, along with systematic efforts to reduce stigma and facilitate help-seeking behavior. Additionally, the presentation will discuss strategies that health care providers and line leaders can implement to reduce stigma and facilitate help-seeking behavior. <http://dcoe.cds.pesgce.com>

WEBINAR: SCREENING AND ASSESSMENT OF CO-OCCURRING DISORDERS IN THE JUSTICE SYSTEM

MAY 26, 2016, 2:00 PM ET

In conjunction with the recently-released publication, *Screening and Assessment of Co-Occurring Disorders in the Justice System*, SAMHSA's GAINS Center is hosting a webinar that will review evidence-based practices for screening and assessment of adults in the justice system who have co-occurring mental and substance use disorders. The webinar is intended for those interested in developing and operating effective programs for justice-involved individuals who have co-occurring disorders. Key systemic and clinical challenges will be discussed as well as state-of-the art approaches for conducting screening and assessment. The webinar will review a range of selected instruments for screening, assessment, and diagnosis of co-occurring disorders in justice settings and provide a critical analysis of advantages, concerns, and practical implementation issues (e.g., cost, availability, and training needs) for each instrument.

<http://www.prainc.com/gains/enews/april16.html#third>

WEBINAR: THE ROLE OF SPIRITUAL AND FAITH COMMUNITIES IN RECOVERY

MAY 31, 2016, 1:00-2:00 PM ET

In this SAMHSA Practice to Recovery webinar, presenters will talk about their work with faith communities to help them address behavioral health issues of their members, and with behavioral health practitioners to equip them to better understand the role of faith and spirituality in recovery. Through examples of individual and organizational collaborations, participants will gain valuable strategies for their own practice.

https://ahpnet.adobeconnect.com/e4ybz58835q/event/event_info.html

HEALTH OBSERVANCE: PTSD AWARENESS MONTH

JUNE 2016

The purpose of PTSD Awareness Month is to encourage everyone to raise public awareness of PTSD and effective treatments. http://www.ptsd.va.gov/about/ptsd-awareness/ptsd_awareness_month.asp

WEBINAR: ENGAGING COMMUNITIES TO PROMOTE RECOVERY

JUNE 7, 2016, 1:00-2:00 PM ET

This SAMHSA Practice to Recovery webinar will provide information on how to help individuals identify their interests and learn what is available to them in the community as well as describing the benefit of engaging, educating, and helping to build welcoming places that benefit both individuals in recovery and the community at large. The presenters will provide examples of innovative projects that help challenge negative attitudes while offering opportunity for meaningful engagement in community life.

https://ahpnet.adobeconnect.com/e31x465kocq/event/event_info.html

WEBINAR: GOT COVERAGE? NEXT STEPS IN USING YOUR HEALTH INSURANCE

JUNE 9, 2016, 2:00 PM ET

Many people now have health insurance, but may not know how to use it. This HHS webinar will highlight From Coverage to Care health insurance literacy tools and how to use them. The importance of preventive benefits and primary care will also be discussed. Guest speakers will highlight how they use the materials.

<https://attendee.gotowebinar.com/register/8167795069183530755>

WEBINAR: INTEGRATING COMMUNITY RESOURCES INTO PERSON-CENTERED PLANS

JUNE 14, 2016, 1:00-2:00 PM ET

This SAMHSA Recovery to Practice webinar will introduce participants to the importance of developing community connections for supporting and sustaining a life in recovery. It will challenge the common practice of using segregated behavioral health venues for social, occupational, and other pursuits in favor of a “community first” approach that uses mainstream community activities to help meet people’s needs. The webinar will present a practical, person-directed, community-based approach to helping people build their preferred lives with focus on community resources and 'natural' supports.

https://ahpnet.adobeconnect.com/e4idqfior8o/event/event_info.html

WEBINAR: SPECIAL ENROLLMENT PERIODS AND RESOURCES FOR THE UNINSURED

JUNE 14, 2016, 3:00 PM ET

Getting married or graduating from college this spring? The healthcare law has created special enrollment periods for those who experience special circumstances such as graduating from college and losing health insurance, getting married and needing coverage for a spouse, losing employer insurance, or turning 26 and losing coverage on a parent’s health plan. Join this HHS webinar to learn more about special enrollment periods and how to enroll in the Health Insurance Marketplace. For those who are uninsured and don’t qualify for the special enrollment period, learn what resources are available and when to enroll in the Health Insurance Marketplace. <https://attendee.gotowebinar.com/register/5902525138546164739>

WEBINAR: INTERVENTIONS TO IMPROVE PHARMACOLOGICAL ADHERENCE AMONG ADULTS WITH PSYCHOTIC SPECTRUM DISORDERS, BIPOLAR DISORDER, AND PTSD

JULY 18, 2016, 3:00-4:00 PM ET

This VA webinar will discuss a recent report which synthesized evidence examining the effectiveness of interventions to improve medication adherence in patients with psychotic spectrum disorders, bipolar disorder, and PTSD; the effect of these interventions on patient outcomes; and the related costs and any associated intervention specific harms.

<https://attendee.gotowebinar.com/register/7245778702415373825>

NATIONAL AI/AN BEHAVIORAL HEALTH CONFERENCE

AUGUST 9-11, 2016, PORTLAND, OR

The Indian Health Service National American Indian/Alaska Native Behavioral Health Conference is the nation's premier opportunity to assemble and hear from nationally-recognized speakers, behavioral healthcare providers, Tribal leaders, and healthcare officials committed to addressing emergent behavioral health topics in Indian Country. The conference attracts presenters and participants from across the country who want to share their research and promising practices, while providing opportunities for professional development, collaboration, and networking. <https://www.ihs.gov/dbh/index.cfm/2016conference/>

CALLS FOR PUBLIC INPUT

PUBLIC COMMENT: NIH PATHWAYS TO PREVENTION WORKSHOP: ADVANCING RESEARCH TO PREVENT YOUTH SUICIDE DRAFT REPORT

An unbiased, independent panel developed a draft report following the *2016 NIH Pathways to Prevention Workshop: Advancing Research to Prevent Youth Suicide*. The report summarizes the workshop discussions and identifies future research priorities for preventing youth suicide. This report provides a roadmap for optimizing youth suicide prevention efforts by highlighting a number of directions for guiding the next decade of research on youth suicide. These directions are organized around three larger issues: improving data systems, improving research design and analysis, and strengthening the research and practice community. Comments on the draft report will be accepted through May 25, 2016.

<https://prevention.nih.gov/programs-events/pathways-to-prevention/workshops/binders/2016/suicide-prevention/workshop-resources#draft-report>

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The Agency for Healthcare Research and Quality's 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:

KEY QUESTIONS: ANXIETY IN CHILDREN (COMMENTS DUE MAY 18, 2016)

<https://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-key-questions/?pageaction=displayquestions&topicid=640&questionset=282>

KEY QUESTIONS: TREATMENTS FOR ADULTS WITH SCHIZOPHRENIA (COMMENTS DUE MAY 18, 2016)

<https://www.effectivehealthcare.ahrq.gov/research-available-for-comment/comment-key-questions/?pageaction=displayquestions&topicid=641&questionset=283>

PUBLIC COMMENT: FDA PROPOSAL TO BAN ELECTRICAL STIMULATION DEVICES USED TO TREAT SELF-INJURIOUS OR AGGRESSIVE BEHAVIOR

The U.S. Food and Drug Administration (FDA) has issued a document entitled, *Proposal to Ban Electrical Stimulation Devices (ESDs) Used for Self-injurious or Aggressive Behavior*. ESDs administer electrical shocks through electrodes attached to the skin of individuals to attempt to condition them to stop engaging in self-injurious or aggressive behaviors. A number of significant psychological and physical risks are associated with the use of these devices, including depression, anxiety, worsening of self-injury behaviors and symptoms of PTSD, pain, burns, and tissue damage. In addition, there is a risk of errant shocks from a device malfunction. Banning the product is necessary to protect the public because these risks cannot be corrected through new or updated labeling. Public comments about the proposal will be accepted through May 25, 2016. <https://www.federalregister.gov/articles/2016/04/25/2016-09433/banned-devices-proposal-to-ban-electrical-stimulation-devices-used-to-treat-self-injurious-or>

COMMENTS ON PROPOSED RULE: MAT FOR OPIOID USE DISORDERS

HHS proposes a rule to increase the highest patient limit for qualified physicians to treat opioid use disorder under section 303(g)(2) of the Controlled Substances Act from 100 to 200. The purpose of the proposed rule is to increase access to treatment for opioid use disorder while reducing the opportunity for diversion of the medication to unlawful use. Comments are being accepted on this proposed rule through 5:00 PM ET on May 31, 2016. <https://content.govdelivery.com/accounts/USSAMHSA/bulletins/13fdb4d>

FUNDING INFORMATION

RESEARCH ON THE HEALTH DETERMINANTS AND CONSEQUENCES OF VIOLENCE AND ITS PREVENTION, PARTICULARLY FIREARM VIOLENCE

<http://grants.nih.gov/grants/guide/pa-files/PA-13-369.html>

HEALTH PROMOTION AMONG RACIAL AND ETHNIC MINORITY MALES

<http://grants.nih.gov/grants/guide/pa-files/PA-13-331.html>

BEHAVIORAL HEALTH WORKFORCE EDUCATION AND TRAINING (BHWET) FOR PARAPROFESSIONALS AND PROFESSIONALS

<http://www.grants.gov/web/grants/view-opportunity.html?oppld=283671>

DISSEMINATION AND IMPLEMENTATION RESEARCH IN HEALTH

<http://grants.nih.gov/grants/guide/pa-files/PAR-16-237.html> (R03)

<http://grants.nih.gov/grants/guide/pa-files/PAR-16-236.html> (R21)



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.