



UPDATE

December 1, 2017

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

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

NIMH DIRECTOR JOSHUA GORDON ELECTED TO RANK OF AAAS FELLOW; AAAS TO INDUCT DR. GORDON AND OTHER RECIPIENTS IN FEBRUARY CEREMONY

Joshua A. Gordon, M.D., Ph.D., Director of the National Institute of Mental Health (NIMH), has been elected to the rank of American Association for the Advancement of Science (AAAS) Fellow. Each year the AAAS Council elects members whose “efforts on behalf of the advancement of science or its applications are scientifically or socially distinguished.” Dr. Gordon will join other recipients of this prestigious honor at the new Fellows induction ceremony on Saturday, February 17, 2018, in Austin, Texas.

Press Release: <https://www.nimh.nih.gov/news/science-news/2017/nimh-director-joshua-gordon-elected-to-rank-of-aas-fellow.shtml>

NIH STUDY OF WWII EVACUEES SUGGESTS MENTAL ILLNESS MAY BE PASSED TO OFFSPRING; POPULATION STUDY FINDS HIGHER RISK OF PSYCHIATRIC HOSPITALIZATION AMONG DAUGHTERS OF FEMALE EVACUEES

Mental illness associated with early childhood adversity may be passed from generation to generation, according to a study of adults whose parents evacuated Finland as children during World War II. The study was conducted by researchers at the National Institutes of Health (NIH), Uppsala University in Sweden, and Helsinki University in Finland. It appears in *JAMA Psychiatry*.

Press Release: <https://nichd.nih.gov/news/releases/Pages/112917-mental-illness.aspx>

NATIONAL ORGANIZATIONS SUPPORT OUTREACH EFFORTS FOR NIH'S ALL OF US RESEARCH PROGRAM

Fourteen national community groups and health care provider associations have partnered with the *All of Us* Research Program, part of NIH, to help raise awareness about the program—an effort to engage one million or more volunteers across the country to build one of the largest, most diverse datasets of its kind for health research. This inaugural group of associations will receive a combined \$1 million to help educate their communities about the benefits of participation in this landmark project to accelerate breakthroughs in precision medicine.

Press Release: <https://allofus.nih.gov/news-events-and-media/announcements/national-organizations-support-outreach-efforts-nihs-all-us>

NIH'S ALL OF US RESEARCH PROGRAM PARTNERS WITH THE NATIONAL LIBRARY OF MEDICINE TO REACH COMMUNITIES THROUGH LOCAL LIBRARIES

NIH's *All of Us* Research Program and the National Library of Medicine have teamed up to raise awareness about the program, a landmark effort to advance precision medicine. Through this collaboration, the National Network of Libraries of Medicine has received a \$4.5 million award to support community engagement efforts by public libraries across the United States (U.S.).

<https://allofus.nih.gov/news-events-and-media/announcements/nihs-all-us-research-program-partners-national-library-medicine>

SEPARATING SIDE EFFECTS COULD HOLD KEY FOR SAFER OPIOIDS; NIH-FUNDED SCIENTISTS MAY HAVE REVEALED BRAIN FUNCTIONS IN PRE-CLINICAL RESEARCH THAT WIDEN THE SAFETY MARGIN FOR OPIOID PAIN RELIEF WITHOUT OVERDOSE

Opioid pain relievers can be extremely effective in relieving pain, but can carry a high risk of addiction and ultimately overdose when breathing is suppressed and stops. Scientists have discovered a way to separate these two effects -- pain relief and breathing -- opening a window of opportunity to make effective pain medications without the risk of respiratory failure. The research, published in *Cell*, was funded by the National Institute on Drug Abuse (NIDA).

Press Release: <https://www.drugabuse.gov/news-events/news-releases/2017/11/separating-side-effects-could-hold-key-safer-opioids>

FDA GRANTS MARKETING AUTHORIZATION OF THE FIRST DEVICE FOR USE IN HELPING TO REDUCE THE SYMPTOMS OF OPIOID WITHDRAWAL

The U.S. Food and Drug Administration (FDA) granted a new indication for an electric stimulation device for use in helping to reduce the symptoms of opioid withdrawal. The *NSS-2 Bridge* device is a small electrical nerve stimulator placed behind the patient's ear. It contains a battery-powered chip that emits electrical pulses to stimulate branches of certain cranial nerves. Such stimulations may provide relief from opioid withdrawal symptoms. Patients can use the device for up to five days during the acute physical withdrawal phase. Opioid withdrawal causes acute physical withdrawal symptoms, including sweating, gastrointestinal upset, agitation, insomnia, and joint pain.

Press Release: <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm585271.htm>

NEW FROM NIH

NIH RESEARCH MATTERS: BRAIN CIRCUITS LINKED TO ALERTNESS

In this study, researchers discovered brain circuits that regulate alertness in fish and mice. The findings might help researchers better understand the brain circuits involved in mental health conditions associated with alertness such as anxiety and mania. <https://www.nih.gov/news-events/nih-research-matters/brain-circuits-linked-alertness>

NIDA DIRECTOR'S BLOG: MOBILIZING CITIZEN SCIENCE TO ADDRESS THE OVERDOSE EPIDEMIC

Could existing social media or new, built-for-purpose apps be used to attack the opioid problem? It is an area where additional research and partnerships with technology startups could potentially make a big impact. NIDA Director Dr. Nora Volkow explores the potential role that crowdsourcing capabilities and social media apps could play in addressing the opioid epidemic. <https://www.drugabuse.gov/about-nida/noras-blog/2017/11/mobilizing-citizen-science-to-address-overdose-epidemic>

ALCOHOL AND WOMEN'S HEALTH: STUDIES REVEAL PROBLEMS

Increases in the prevalence of alcohol misuse and alcohol use disorder among women point to a growing adverse effect of alcohol on the health of women in the U.S., according to findings by National Institute on Alcohol Abuse and Alcoholism (NIAAA) scientists. While alcohol misuse by anyone presents serious public health concerns, women have a higher risk of certain alcohol-related pathologies compared to men. <https://www.spectrum.niaaa.nih.gov/features/features-01.html>

NEW FROM FDA

THE REAL COST NOW INFORMS YOUTH: VAPING, TOO, CAN REWIRE YOUR BRAIN

The FDA is expanding “The Real Cost” public education campaign to include advertising about e-cigarettes and other electronic nicotine delivery systems. New messages focus specifically on how nicotine can rewire the developing brain to crave more nicotine.

<https://www.fda.gov/TobaccoProducts/PublicHealthEducation/PublicEducationCampaigns/TheRealCostCampaign/default.htm>

PUBLIC HEALTH ADVISORY: FDA AND KRATOM

The FDA is warning consumers not to use *Mitragyna speciosa*, commonly known as kratom, a plant which grows naturally in Thailand, Malaysia, Indonesia, and Papua New Guinea. FDA is concerned that kratom, which affects the same opioid brain receptors as morphine, appears to have properties that expose users to the risks of addiction, abuse, and dependence.

<https://www.fda.gov/NewsEvents/PublicHealthFocus/ucm584952.htm>

NEW FROM CDC

RURAL/ETHNIC HEALTH DISPARITIES AMONG RURAL ADULTS – U.S., 2012-2105

Rural communities often have worse health outcomes, have less access to care, and are less racially and ethnically diverse than urban communities. Data from the 2012–2015 Behavioral Risk Factor Surveillance System were used to evaluate racial/ethnic disparities in health, access to care, and health-related behaviors, including frequent mental distress, among rural residents in all 50 states and the District of Columbia. https://www.cdc.gov/mmwr/volumes/66/ss/ss6623a1.htm?s_cid=ss6623a1_e

ESTIMATED PREVALENCE OF CHILDREN WITH DIAGNOSED DEVELOPMENTAL DISABILITIES IN THE U.S., 2014–2016

This data brief from the Centers for Disease Control and Prevention (CDC) provides the latest prevalence estimates for diagnosed autism spectrum disorder (ASD), intellectual disability, and other developmental delay among children aged 3–17 years. During 2014–2016, there was a significant increase in the prevalence of children who had ever been diagnosed with any developmental disability. This increase was largely the result of an increase in the prevalence of children diagnosed with a developmental delay other than ASD or intellectual disability. There was not a significant change in the prevalence of diagnosed ASD or intellectual disability over the same time period. <https://www.cdc.gov/nchs/products/databriefs/db291.htm>

NEW FROM SAMHSA

ARCHIVED WEBISODE: ADDRESSING THE MENTAL HEALTH NEEDS OF CHILDREN, YOUTH, AND FAMILIES EXPERIENCING HOMELESSNESS

Children, youth, and families who are experiencing homelessness and mental or substance use disorders often face barriers to accessing care. The Substance Abuse and Mental Health Services Administration (SAMHSA) hosted this webisode focused on addressing the mental health needs of these children, youth, and families. In addition to a panel discussion, the webisode featured common concerns and experiences, tips, resources, and information about support programs.

<http://fda.yorkcast.com/webcast/Play/1d62df68ded04204997542d3a5ea4e311d>

SUICIDE PREVENTION SURVEILLANCE SUCCESS STORIES: CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

This *Surveillance Success Story* details how the California Department of Corrections and Rehabilitation accesses and analyzes data on suicide deaths and self-harm, and uses that data to strengthen its prevention efforts. The Surveillance Success Story Series from SAMHSA's Suicide Prevention Resource Center describes how states, tribes, and health systems access and analyze data on suicide deaths and attempts, and use data to inform evaluation and program planning. http://www.sprc.org/sites/default/files/resource-program/california_final.pdf

WORDS MATTER: HOW LANGUAGE CHOICE CAN REDUCE STIGMA

This resource examines the role of language in perpetuating substance use disorder stigma, followed by tips for assessing when and how we may be using stigmatizing language, and steps for ensuring that the language we use and messages we deliver are positive, productive, and inclusive.

<https://www.samhsa.gov/capt/tools-learning-resources/sud-stigma-tool>

PREVENTING OPIOID OVERDOSE: UNDERSTANDING GOOD SAMARITAN LAWS

This resource provides an overview of the Good Samaritan laws overdose prevention strategy, including the aims of these laws and types of protections they can offer. It also presents some of the obstacles that prevent overdose bystanders and the criminal justice system from applying their state's Good Samaritan laws, and steps prevention practitioners can take to raise awareness of these laws among various target populations. <https://www.samhsa.gov/capt/tools-learning-resources/good-samaritan-law-tool>

SAMHSA VIDEOS: PREVENTION CONVERSATIONS: DEVELOPING MEDIA CAMPAIGNS

These short video interviews feature SAMHSA grantees and other prevention professionals sharing their experiences developing media campaigns to prevent prescription drug misuse.

PREVENTING PRESCRIPTION OPIOID MISUSE IN UTAH: LEVERAGING PARTNERSHIPS

This video describes how one community's "can-do" approach to preventing underage drinking became a model for community prevention efforts across the state. <https://youtu.be/t7TqWqnYHkQ>

LESSONS FROM UTAH: USING MEDIA CAMPAIGNS TO ENGAGE LOCAL PARTNERS

This video examines the value of statewide media campaigns in raising awareness of pressing substance misuse problems and mobilizing stakeholders. <https://youtu.be/6VQatml8BhE>

LESSONS FROM WISCONSIN: THE VALUE OF BROAD STAKEHOLDER INVOLVEMENT

This video highlights the importance of involving key stakeholders in the development of media messages and materials. <https://youtu.be/Ku1bSSjhbhY>

LESSONS FROM WISCONSIN: FINDING A PREVENTION CHAMPION

This video explores the value of having high-profile supporters who are willing to champion prevention efforts. <https://youtu.be/sXYDswkfhnk>

NEW FROM AHRQ

DIAGNOSTIC ACCURACY OF SCREENING AND TREATMENT OF POST-ACUTE CORONARY SYNDROME DEPRESSION: A SYSTEMATIC REVIEW

A new analysis from the Agency for Healthcare Research and Quality (AHRQ) helps providers know how to screen for depression in patients who have suffered an acute coronary syndrome event. The Beck Depression Inventory-II screening tool is the most studied and is as accurate in this population as in others. Available depression screening tools may miss three percent of people with depression, but less than 50 percent of those who screen positive have clinically confirmed depression. Enhanced care interventions that integrate psychiatric treatment into cardiology and primary care settings improve depression symptoms. Current evidence is insufficient to determine if enhanced care improves cardiac outcomes. Combining cognitive behavioral therapy and antidepressant medication may improve depression outcomes, but does not clearly improve cardiac outcomes.

<https://effectivehealthcare.ahrq.gov/topics/acs-depression/research-review-final>

CHARTBOOK ON RURAL HEALTH CARE: QUALITY OF CARE IMPROVED IN RURAL AREAS

This chartbook is part of the *2016 AHRQ National Healthcare Quality and Disparities Report*, which tracks trends in effectiveness and timeliness of care, patient safety, patient-centeredness, disparities, and efficiency of care. The chartbook shows that the quality of care for those living in rural areas improved for 53 percent of the measures studied. It also found that in 2014, the percentage of people who used a hospital, emergency room, or clinic as a source of ongoing health care was higher for residents of rural areas compared with residents of large metropolitan areas. Between 1999 and 2015, suicide rates increased from 17 to 25 per 100,000 among Whites living in rural areas and 21 to 34 per 100,000 among American Indians and Alaska Natives (AI/AN) living in rural areas. <https://www.ahrq.gov/news/chartbook-rural-health-care.html>

MANAGEMENT OF SUSPECTED OPIOID OVERDOSE WITH NALOXONE BY EMERGENCY MEDICAL SERVICES PERSONNEL

A new AHRQ review looks at optimal doses, routes of administration, and dosing strategies of naloxone for suspected opioid overdose in out-of-hospital settings, and whether transport to a hospital following successful opioid overdose reversal with naloxone is necessary.

<https://effectivehealthcare.ahrq.gov/topics/emt-naloxon/>

EVENTS

WEBINAR: PRACTICAL IMPACT OF THE AGE OF CRIMINAL RESPONSIBILITY: PERSPECTIVES OF YOUTH AND FAMILY MEMBERS

DECEMBER 6, 2017, 12:00-1:00 PM ET

The Office of Juvenile Justice and Delinquency Prevention, in collaboration with the Age of Criminal Responsibility Research Training and Technical Assistance Center, presents this webinar, which will highlight a young adult who was formerly incarcerated as a juvenile within the adult criminal justice system, a family member of a justice-involved youth from a state where the age of criminal responsibility is younger than 18, and a representative from a family advocacy organization.

<https://www.ojjdp.gov/enews/17juvjust/171120.html>

WEBINAR: BUILDING PARTNERSHIPS AND COLLABORATION BETWEEN HOUSING PROVIDERS AND BEHAVIORAL HEALTH PRACTITIONERS

DECEMBER 6, 2017, 1:00-2:00 PM ET

This final webinar in the SAMHSA Recovery to Practice series on Homelessness and Unstable Housing explores how strong communication and collaboration between housing programs and behavioral health practitioners can positively impact engagement and recovery outcomes. Participants will learn the advantages of developing partnerships among housing services and behavioral and primary health providers, ways to overcome common challenges with partnerships between housing and clinical teams, and strategies to strengthen and enrich collaboration.

https://events-na2.adobeconnect.com/content/connect/c1/916603251/en/events/event/shared/1109348579/event_landing.html?sco-id=1092860604&_charset_=utf-8

WEBINAR: DO I NEED THIS PILL? UNDERSTANDING PAIN AND PRESCRIPTION DRUGS

DECEMBER 7, 2017, 12:00 -1:00 PM ET

Whether acute or chronic, poor pain treatment is a contributing factor to today's opioid crisis. Join the U.S. Department of Health and Human Services' Partnership Center hosting NIDA staff to present on a webinar designed especially for faith-based and community leaders about the nature of pain, as well as new and healthy strategies for pain management. Participants will learn how pain works, how opioids work for pain, and why these drugs are so addictive. The presentation will also address the influx of dangerous synthetics that are increasing the risk of overdose for youth and other vulnerable populations.

<https://register.gotowebinar.com/register/4321772676574433282>

WEBINAR: EVIDENCE-BASED SYNTHESIS: INTERVENTIONS TO SUPPORT CAREGIVERS OR FAMILIES OF PATIENTS WITH TBI, PTSD, OR POLYTRAUMA

DECEMBER 13, 2017, 1:00-2:00 PM ET

Depending on the injuries and health conditions, for some families the need for intensive family caregiving support can last for decades. Further, caregiving can have negative implications for the caregiver's physical and mental health, employment, and financial security. There is a need to better understand the impact of interventions that support caregivers, or families of individuals with disabling conditions common among Veterans. This Department of Veterans Affairs webinar will review findings from a synthesis of literature evaluating the effects of family caregiving support programs for individuals with traumatic brain injury (TBI), post-traumatic stress disorder (PTSD), or polytrauma.

<https://register.gotowebinar.com/register/1773034354200879361>

TWITTER CHAT: WOMEN AND ALCOHOL

DECEMBER 14, 2017, 1:00 PM ET

Why are drinking guidelines different for women than men? How do the health effects of heavy drinking differ? Where can women turn for help if they have an alcohol problem? NIAAA and the National Council on Alcoholism and Drug Dependence (NCADD) are partnering for a Twitter chat on women and alcohol. Bring questions for NIAAA and NCADD experts for a discussion about what women need to know about alcohol and their health. Follow Hashtag: #FAQWomenDrinking. <https://www.niaaa.nih.gov/news-events/news-noteworthy/twitter-chat-about-women-and-alcohol-december-14>

WEBINAR: 2017 VA/DOD CLINICAL PRACTICE GUIDELINE FOR THE MANAGEMENT OF PTSD AND ACUTE STRESS DISORDER: A REVISED FRAMEWORK TO ASSESS AND TREAT PATIENTS

DECEMBER 14 ,2017, 1:00-2:30 PM ET

The VA and the Department of Defense released an updated *Clinical Practice Guideline for the Management of Posttraumatic Stress Disorder and Acute Stress Disorder* in June 2017 to provide health care providers with a framework to evaluate, treat, and manage the needs and preferences of patients with PTSD and acute stress disorder. This presentation will briefly review the purpose of the clinical practice guideline and discuss its key recommendations. In addition, the presentation will focus on the importance of patient-centered treatment planning and shared decision-making; the provision of trauma-informed psychotherapy, and over-arching pharmacology treatment recommendations. The presentation will conclude by identifying new clinical support tools available for providers, patients, and family members to help attendees implement these evidence-informed recommendations in their practice.

<https://dcoe.cds.pesgce.com/hub.php>

NATIONAL DRUG AND ALCOHOL FACTS WEEK

JANUARY 22-28, 2018

Prevention partners are invited to participate in National Drug and Alcohol Facts Week sponsored by NIDA and NIAAA. 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. Register your event and receive support from NIDA staff to plan a successful activity. NIDA staff can help you order free, science-based materials to complement your event, brainstorm activity ideas, and partner with other organizations. <https://teens.drugabuse.gov/national-drug-alcohol-facts-week/register>

SAMHSA'S 14TH ANNUAL PREVENTION DAY

FEBRUARY 5, 2018, NATIONAL HARBOR, MD

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>

NATIONWIDE RECRUITMENT: NIH RESEARCH STUDY: DEPRESSION IN TEENAGERS

NIMH study seeks to understand the causes of depression in teenagers. As part of a larger study looking at mood dysregulation, this part of the study is currently recruiting medically healthy teenagers ages 12 to 17, who meet the criteria for major depressive disorder and are in treatment with a physician. Study participation begins with an initial one-day evaluation. Research visits may include annual outpatient visits up to age 25, and/or a four- to 15-week inpatient treatment. Call 1-301-496-8381 [TTY: 1-866-411-1010], Email depressedkids@mail.nih.gov

Department of Health and Human Services, National Institutes of Health, National Institute of Mental Health
<http://go.usa.gov/x8Xmk>

Resource Listing or Facebook:

NIH Research Study: Understanding the causes of depression in teenagers. Currently recruiting ages 12-17. Initial 1-day evaluation for outpatient visits annually and/or 4- to 15-week inpatient treatment.

Call 1-301-496-8381 [TTY: 1-866-411-1010] or Email depressedkids@mail.nih.gov
<http://go.usa.gov/x8Xmk>

Department of Health and Human Services, National Institutes of Health, National Institute of Mental Health

Twitter:

Teenagers with Depression: NIH Research study currently recruiting ages 12-17 for outpatient visits & treatment to understand the causes of depression. <http://go.usa.gov/x8Xmk>

CALLS FOR PUBLIC INPUT

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORT

The AHRQ'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:

PSYCHOLOGICAL AND PHARMACOLOGICAL TREATMENTS FOR ADULTS WITH PTSD: A SYSTEMATIC REVIEW UPDATE (COMMENTS ACCEPTED THROUGH DECEMBER 28, 2017)

<https://effectivehealthcare.ahrq.gov/topics/ptsd-adult-treatment-update/draft-report>

CDC SOLICITING NOMINATIONS FOR REVIEWERS FROM THE INJURY PREVENTION AND CONTROL FIELD

CDC's National Center for Injury Prevention and Control (NCIPC) is soliciting nominations for potential reviewers to be added to the NCIPC Extramural Research Program Office (ERPO) Scientific Reviewer and Advisor Database. CDC is looking for reviewers with expertise in the following research fields: child abuse and neglect, teen dating violence, opioid overdose, intimate partner violence, motor vehicle injury, older adult falls, self-directed violence, sexual violence, TBI, and youth violence. Criteria for inclusion might include independent publications in peer-reviewed scientific journals, other scientific activities, honor/awards, etc. Most of the existing potential reviewers within the database have a doctoral degree, but that is not mandatory for inclusion. This database will contain information extracted from the curriculum vitae (CV) of potential reviewers, including name, subject matter expertise, and level of experience. CDC will use this information to identify potential reviewers to serve on the Disease, Disability, and Injury Prevention and Control Special Emphasis Panels for NCIPC. As applicable, the reviewers perform the initial review, discussion, and evaluation of applications received in response to NCIPC's Notices of Funding Opportunity for extramural research for injury and violence prevention.

Interested individuals should send an email response to the NCIPC ERPO at NCIPC_ERPO@cdc.gov by December 31, 2017. Please state in your email that you agree for the NCIPC ERPO to enter your name and professional information into the database. Attach an updated CV, highlighting specific areas of research interest and expertise as well as complete contact information (name, affiliation, mailing address, telephone number, and email). We will use your CV to extract your professional information for the database (your CV will not be uploaded into this database). For questions, email NCIPC_ERPO@cdc.gov.

CDC Injury Center Research Priorities: <https://www.cdc.gov/injury/researchpriorities/index.html>

CDC CALLS FOR AI/AN PUBLIC HEALTH SUCCESS STORIES

Tribal nations are active and important contributors to public health, and tribal cultures have long fostered health and wellness among AI/AN. CDC invites the public to share stories that show how tribal communities are doing just that, so they can be a part of an exciting new exhibit at the David J. Sencer CDC Museum in Atlanta, GA. The exhibition—to be held from Sept 22, 2019, through May 1, 2020—will recognize the public health contributions of the AI/AN community in a visually compelling, culturally appropriate manner. CDC's exhibition will showcase how native traditions and wisdom have affected public health in the past and present, and how AI/AN communities have made a difference in the health of their people.

CDC is interested in stories that highlight how native traditions and wisdom have affected health, or show contributions of specific AI/AN individuals to health and wellness among AI/AN people. CDC will consider stories that represent the diverse array of tribes, tribal organizations, health issues, and people of Indian Country and AI/AN culture. Story submissions are accepted through January 15, 2018.

<https://www.cdc.gov/tribal/calls.html>

FUNDING INFORMATION

REDUCING THE DURATION OF UNTREATED PSYCHOSIS IN THE UNITED STATES

<https://grants.nih.gov/grants/guide/pa-files/PA-18-233.html> (R01)

<https://grants.nih.gov/grants/guide/pa-files/PA-18-232.html> (R34)

DEVELOPMENT OF PSYCHOSOCIAL THERAPEUTIC AND PREVENTIVE INTERVENTIONS FOR MENTAL DISORDERS

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-17-604.html> (R61/R33)

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-705.html> (R33)

CLINICAL TRIALS TO TEST THE EFFECTIVENESS OF TREATMENT, PREVENTIVE, AND SERVICES INTERVENTIONS

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-701.html> (R01)

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-700.html> (Collaborative R01)

EARLY STAGE TESTING OF PHARMACOLOGIC OR DEVICE-BASED INTERVENTIONS FOR THE TREATMENT OF MENTAL HEALTH DISORDERS

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-703.html>

CONFIRMATORY EFFICACY CLINICAL TRIALS OF NON-PHARMACOLOGICAL INTERVENTIONS FOR MENTAL DISORDERS

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-707.html>

NOVEL ASSAYS TO ADDRESS TRANSLATIONAL GAPS IN TREATMENT DEVELOPMENT

<https://grants.nih.gov/grants/guide/pa-files/PA-18-268.html>

PILOT SERVICES RESEARCH GRANTS NOT INVOLVING INTERVENTIONS

<https://grants.nih.gov/grants/guide/pa-files/PA-18-267.html>

PILOT EFFECTIVENESS TRIALS FOR TREATMENT, PREVENTIVE AND SERVICES INTERVENTIONS

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-706.html>

YOUTH VIOLENCE PREVENTION INTERVENTIONS THAT INCORPORATE RACISM/DISCRIMINATION PREVENTION

<https://grants.nih.gov/grants/guide/rfa-files/RFA-MD-18-005.html>

RESEARCH TO ADDRESS SLEEP DISORDERS IN THE CONTEXT OF MEDICAL REHABILITATION

<https://grants.nih.gov/grants/guide/pa-files/PA-18-212.html>

A FAMILY-CENTERED SELF-MANAGEMENT OF CHRONIC CONDITIONS

<https://grants.nih.gov/grants/guide/pa-files/PA-18-383.html> (R01)

<https://grants.nih.gov/grants/guide/pa-files/PA-18-380.html> (R21)

MHEALTH TOOLS FOR INDIVIDUALS WITH CHRONIC CONDITIONS TO PROMOTE EFFECTIVE PATIENT-PROVIDER COMMUNICATION, ADHERENCE TO TREATMENT AND SELF-MANAGEMENT

<https://grants.nih.gov/grants/guide/pa-files/PA-18-386.html> (R01)

<https://grants.nih.gov/grants/guide/pa-files/PA-18-389.html> (R21)

INTEGRATIVE RESEARCH ON POLYSUBSTANCE ABUSE AND ADDICTION

<https://grants.nih.gov/grants/guide/pa-files/PAR-18-084.html>

T2 TRANSLATIONAL RESEARCH: RESEARCH LEADING TO NEW HEALTH CARE PRACTICES,
COMMUNITY PROGRAMS AND POLICIES AFFECTING OLDER PERSONS

<https://grants.nih.gov/grants/guide/pa-files/PAR-18-178.html>

SMALL GRANTS FOR NEW INVESTIGATORS TO PROMOTE DIVERSITY IN HEALTH-RELATED
RESEARCH

<https://grants.nih.gov/grants/guide/pa-files/PAR-18-102.html>

BEHAVIORAL SCIENCE TRACK AWARD FOR RAPID TRANSITION

<https://grants.nih.gov/grants/guide/pa-files/PAR-18-082.html>

OPIOID STATE TARGETED RESPONSE SUPPLEMENT

<https://www.samhsa.gov/grants/grant-announcements/ti-18-020>

SAMHSA OFFENDER REENTRY PROGRAM

<https://www.samhsa.gov/grants/grant-announcements/ti-18-003>



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.