



UPDATE

January 15, 2012

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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

ATYPICAL ANTIPSYCHOTIC MORE EFFECTIVE THAN OLDER DRUGS IN TREATING CHILDHOOD MANIA, BUT SIDE EFFECTS CAN BE SERIOUS

The antipsychotic medication risperidone is more effective for initial treatment of mania in children diagnosed with bipolar disorder compared to other mood stabilizing medications, but it carries the potential for serious metabolic side effects, according to an NIMH-funded study published online ahead of print January 2, 2012, in the *Archives of General Psychiatry*.

Science News: <http://www.nimh.nih.gov/science-news/2012/atypical-antipsychotic-more-effective-than-older-drugs-in-treating-childhood-mania-but-side-effects-can-be-serious.shtml>

TURNING ON DORMANT GENE MAY HOLD KEY FOR CORRECTING A NEURODEVELOPMENTAL DEFECT: FINDING SHOWS THERAPEUTIC POTENTIAL OF SMALL-MOLECULE TARGETING STRATEGY

Scientists working in cell culture and in mice have been able to correct the loss of gene activity underlying a rare but severe developmental disorder by turning on a gene that is normally silenced in brain cells. Further testing of the identified compound that activates the gene will determine whether it has potential as a genetically-based treatment for the disorder, Angelman syndrome.

Science News: <http://www.nimh.nih.gov/science-news/2012/turning-on-dormant-gene-may-hold-key-for-correcting-a-neurodevelopmental-defect.shtml>

NIH ESTABLISHES NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES: NEW CENTER TO SPEED MOVEMENT OF DISCOVERIES FROM LAB TO PATIENTS

In a move to re-engineer the process of translating scientific discoveries into new drugs, diagnostics, and devices, the National Institutes of Health (NIH) has established the National Center for Advancing Translational Sciences (NCATS). The action was made possible by Congress' approval of a fiscal year 2012 spending bill and the President's signing of the bill, which includes the establishment of NCATS with a budget of \$575 million. NCATS will serve as the nation's hub for catalyzing innovations in translational science. Working closely with partners in the regulatory, academic, nonprofit, and private sectors, NCATS will strive to identify and overcome hurdles that slow the development of effective treatments and cures.

Press Release: <http://www.nih.gov/news/health/dec2011/od-23.htm>

SEXUAL VIOLENCE, STALKING, AND INTIMATE PARTNER VIOLENCE WIDESPREAD IN THE UNITED STATES

On average, 24 people per minute are victims of rape, physical violence, or stalking by an intimate partner in the United States, according to findings released by the Centers for Disease Control and Prevention (CDC). Over the course of a year, that equals more than 12 million women and men. Those numbers only tell part of the story – more than one million women reported being raped in a year and over six million women and men were victims of stalking in a year, the report says. The National Intimate Partner and Sexual Violence Survey is designed to better describe and monitor the magnitude of sexual violence, stalking, and intimate partner violence victimization in the United States. It is the first survey of its kind to provide simultaneous national and state-level prevalence estimates of violence for all states.

Press Release: http://www.cdc.gov/media/releases/2011/p1214_sexual_violence.html

ILLICIT DRUG RELATED EMERGENCY DEPARTMENT VISITS VARY BY METROPOLITAN AREA

Major metropolitan areas show significant variation in the rates of emergency department (ED) visits involving illicit drugs, according to a new report published by the Substance Abuse and Mental Health Services Administration (SAMHSA). In terms of overall illicit drug-related ED visits, Boston has the highest rate, followed by New York City, Chicago, and Detroit. The report was drawn from SAMHSA's Drug Abuse Warning Network – (DAWN), a public health surveillance system that monitors drug-related ED visits throughout the nation. The information was collected from 11 metropolitan areas, including Boston, Chicago, Denver, Detroit, Miami (Dade County and Fort Lauderdale Division), Minneapolis, New York (Five Boroughs Division), Phoenix, San Francisco, and Seattle.

Full Report:

http://www.samhsa.gov/data/2k11/WEB_DAWN_023/DAWN_023_IllicitDrugEDVisits_plain.pdf

Press Release: <http://www.samhsa.gov/newsroom/advisories/1112142112.aspx>

SAMHSA ANNOUNCES A WORKING DEFINITION OF “RECOVERY” FROM MENTAL AND SUBSTANCE USE DISORDERS

A new working definition of recovery from mental and substance use disorders has been released by SAMHSA. The definition is the product of a year-long effort by SAMHSA and a wide range of partners in the behavioral healthcare community and other fields to develop a working definition of recovery that captures the essential, common experiences of those recovering from mental and substance use disorders, along with major guiding principles that support the recovery definition.

Press Release: <http://www.samhsa.gov/newsroom/advisories/1112223420.aspx>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NEW NIMH DIRECTOR BLOG POSTINGS

NIMH'S TOP 10 RESEARCH ADVANCES OF 2011

NIMH Director Thomas Insel describes 10 breakthroughs and events of 2011 that are changing the landscape of mental health research. <http://www.nimh.nih.gov/about/director/2011/nimhs-top-10-research-advances-of-2011.shtml>

TREATMENT DEVELOPMENT: WHERE DO WE GO FROM HERE?

NIMH Director Thomas Insel describes how NIMH can facilitate future treatment development by supporting science that can catalyze innovation and discovery in both the public and private sectors. <http://www.nimh.nih.gov/about/director/2012/treatment-development-where-do-we-go-from-here.shtml>

TREATMENT DEVELOPMENT: THE PAST 50 YEARS

NIMH Director Thomas Insel discusses the state of psychiatric research and development in the public and private sectors. <http://www.nimh.nih.gov/about/director/2011/treatment-development-the-past-50-years.shtml>

NEW RESOURCES ON NIMH WEBSITE

FACT SHEET ON STRESS

This fact sheet provides answers to common questions about stress and explains the different types of stress and how to manage it. <http://www.nimh.nih.gov/health/publications/stress/fact-sheet-on-stress.shtml>

SPANISH PUBLICATION: TREATMENT OF CHILDREN WITH MENTAL ILLNESS

This publication that answers frequently asked questions about the treatment of mental disorders in children is now available in Spanish. <http://www.nimh.nih.gov/health/publications/espanol/tratamiento-de-ni-os-con-enfermedades-mentales/index.shtml>

SPANISH PUBLICATION: GENERALIZED ANXIETY DISORDER: WHEN WORRY GETS OUT OF CONTROL

This brochure that explains the signs, symptoms, and treatment of generalized anxiety disorder is now available in Spanish. <http://www.nimh.nih.gov/health/publications/generalized-anxiety-disorder-gad/generalized-anxiety-disorder-gad-when-worry-gets-out-of-control.shtml>

NIMH VIDEO: EMBEDDED IN IRAQ

In this video, an embedded reporter and NIMH discuss mental health issues for some Iraq War veterans. <http://www.nimh.nih.gov/media/video/finkel.shtml>

DIRECTOR'S REPORT TO THE 229TH NATIONAL ADVISORY MENTAL HEALTH COUNCIL

This report from the September 23, 2011 National Advisory Mental Health Council provides an overview about new and ongoing NIMH initiatives. <http://www.nimh.nih.gov/about/advisory-boards-and-groups/namhc/2011/september/directors-report.shtml>

MEETING SUMMARIES: CLOSING THE GAPS: REDUCING DISPARITIES IN MENTAL HEALTH TREATMENT THROUGH ENGAGEMENT

NIMH's Office for Research on Disparities and Global Mental Health convened this workshop to bring together thought leaders from a range of fields—epidemiology, psychology, psychiatry, social work, and community-based services and intervention research—and representatives of key federal agencies to discuss the role of engagement in reducing mental health treatment disparities.

<http://www.nimh.nih.gov/research-funding/scientific-meetings/2011/closing-the-gaps-reducing-disparities-in-mental-health-treatment-through-engagement/index.shtml>

NIH LAUNCHES FIRST ONLINE GENETICS COURSE FOR SOCIAL AND BEHAVIORAL SCIENTISTS

A new genetics educational program will provide social and behavioral scientists with sufficient genetics background to allow them to engage effectively in interdisciplinary research with genetics researchers. NIH's Office of Behavioral and Social Sciences Research partnered with the National Coalition for Health Professional Education in Genetics to create the free, web-based project.

<http://www.nih.gov/news/health/jan2012/od-03.htm>

AHRQ: EXPERTS CALL FOR INTEGRATING MENTAL HEALTH INTO PRIMARY CARE

This newsletter story summarizes discussions at a recent Mental Health Forum and Town Hall held by the Agency for Healthcare Research and Quality (AHRQ). A large panel of experts discussed the importance of integrating mental health professionals into primary care practices. The goal of integration is to reduce the fragmented and inadequate care of mental health problems in primary care patients.

<http://www.ahrq.gov/research/jan12/0112RA1.htm>

SAMHSA RESOURCES

NATIONAL CHILD TRAUMATIC STRESS NETWORK (NCTSN) NEWSLETTER

This newsletter features articles about efforts to increase family ties for children of incarcerated parents and ideas on helping Latin-American immigrant families.

http://www.nctsn.org/sites/default/files/assets/pdfs/newsletters/Impact_WN11_FINAL.pdf

BIRTH PARENTS AND TRAUMA HISTORIES IN THE CHILD WELFARE SYSTEM: GUIDES FOR FOSTER PARENTS AND FOR JUDGES AND ATTORNEYS

NCTSN has released the second and third fact sheets in a series of five highlighting the serious consequences that trauma histories can have for birth parents and the potential effects on their parenting. These fact sheets were developed to help foster parents, lawyers, and judges to better understand the birth parents with whom they work.

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

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

WORKING WITH IMMIGRANT LATIN-AMERICAN FAMILIES EXPOSED TO TRAUMA

This NCTSN resource discusses the cumulative adversities associated with immigration that place children and families at considerable psychological risk and the use of Child-Parent Psychotherapy, which considers the child-parent relationship, the family's cultural beliefs, parenting practices, immigration experiences, and the intergenerational transmission of trauma.

http://nctsn.org/sites/default/files/assets/pdfs/NCTSN_SOC_Fall2011.pdf

HELPING LATIN-AMERICAN IMMIGRANT PREGNANT WOMEN EXPOSED TO TRAUMA

This NCTSN resource discusses the use of "cultural mirroring" in Child-Parent Psychotherapy to enhance the pregnant Latin-American woman's sense of self and foster the mother-child relationship during the perinatal period. http://www.nctsn.org/sites/default/files/assets/pdfs/nctsn_soc_winter_2011_final.pdf

LATEST ISSUE OF JOURNAL ON DISASTER BEHAVIORAL HEALTH

The latest issue of this SAMHSA journal features a discussion on how to address the gaps in disaster preparedness, response, and recovery programs that put children at risk. It also includes articles on disaster planning for people experiencing homelessness, and the benefits of co-locating companion animals during disasters. http://www.samhsa.gov/dtac/dialogue/Dialogue_vol8_issue2.pdf

CDC REPORTS

PREVALENCE OF CURRENT DEPRESSION AMONG PERSONS AGED 12 YEARS AND OLDER

This QuickStats table shows the prevalence of current depression among persons aged 12 years and older by age group and sex in the United States from 2007 to 2010, according to the CDC's National Health and Nutrition Examination Survey. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6051a7.htm>

DEATH RATES FROM SUICIDE FOR PERSONS AGED 45–64 YEARS

This CDC Quick Stats figure shows death rates from suicide for persons aged 45 to 64 years, by black or white race and sex in the United States from 1999 to 2008.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6101a6.htm>

DRUG POISONING DEATHS IN THE UNITED STATES, 1980-2008

This report summarizes trends in drug poisonings. In 2008, the number of poisoning deaths exceeded the number of motor vehicle traffic deaths for the first time since at least 1980. In 2008, there were more than 41,000 poisoning deaths, compared with about 38,000 motor vehicle traffic deaths. Eighty-nine percent of poisoning deaths were caused by drugs. From 1980 to 2008, the percentage of poisoning deaths caused by drugs increased from 56 percent to 89 percent. In 2008, about 77 percent of the drug poisoning deaths were unintentional, 13 percent were suicides, and 9 percent were of undetermined intent.

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

BINGE DRINKING PREVALENCE, FREQUENCY, AND INTENSITY AMONG ADULTS

CDC analyzed data collected in 2010 on the prevalence of binge drinking (defined as four or more drinks for women and five or more drinks for men on an occasion during the past 30 days) among U.S. adults aged 18 years and older in 48 states and the District of Columbia, and on the frequency (average number of episodes per month) and intensity (average largest number of drinks consumed on occasion) among binge drinkers. This report summarizes that analysis.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm61e0110a1.htm>

CDC PREVENTING CHRONIC DISEASE ARTICLES

DEPRESSIVE SYMPTOMS AND HEALTH-RELATED QUALITY OF LIFE AMONG PARTICIPANTS IN THE *PASOS ADELANTE* CHRONIC DISEASE PREVENTION AND CONTROL PROGRAM, ARIZONA, 2005-2008

Chronic diseases are the leading causes of death in the U.S. and have been associated with depressive symptoms and poor health-related quality of life (HRQOL). This study examined whether depressive symptoms and HRQOL indicators changed among participants in *Pasos Adelante*, a chronic disease prevention and control program implemented in a U.S.–Mexico border community.

http://www.cdc.gov/pcd/issues/2012/11_0020.htm

PROMOTING SMOKE-FREE ENVIRONMENTS AND TOBACCO CESSATION IN RESIDENTIAL TREATMENT FACILITIES FOR MENTAL HEALTH AND SUBSTANCE ADDICTIONS, OREGON, 2010

This study assessed tobacco-related policies and procedures at all state-funded, community-based residential mental health and substance addiction treatment facilities before implementation of new state policy requirements. Only 15 percent had voluntarily implemented 100 percent smoke-free campus policies, and 47 percent offered cessation resources at patient discharge; however, less than 10 percent expressed opposition to these future requirements. http://www.cdc.gov/pcd/issues/2012/11_0080.htm

OJJDP BULLETIN DISCUSSES BULLYING IN SCHOOLS

This report from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) examines the connection between different types of bullying, truancy, and student achievement and whether students' engagement in school mediates these factors. It discusses the results of three studies that the National Center for School Engagement conducted and compares the findings with those from a Swedish study on bullying.

<http://www.ojjdp.gov/pubs/234205.pdf>

PREVALENCE AND IMPLEMENTATION FIDELITY OF RESEARCH-BASED PREVENTION PROGRAMS IN PUBLIC SCHOOLS

This Department of Education report presents findings on key program implementation measures for the Safe and Drug-Free Schools and Communities Act: State Grants Program. The study examines the prevalence of research-based drug and violence prevention programs in schools, and the extent to which research-based drug and violence prevention programs adhere to the program features on which they are based. Findings are based on a review of the research literature and national probability sample surveys of districts, schools, and research-based prevention programs.

<http://www2.ed.gov/about/offices/list/oepd/ppss/reports.html#safe>

INDIAN HEALTH SERVICE NEWSLETTER: BEHAVIORAL HEALTH OF NATIVE AMERICANS

This Indian Health Service (IHS) newsletter is distributed to health care providers working for the IHS, tribal, and urban healthcare programs, to medical and nursing schools throughout the country, and to health professionals working with or interested in American Indian and Alaska Native healthcare. This issue includes a report highlighting six community-defined practices to improve behavioral health in California Native Americans. http://www.ihs.gov/provider/documents/2010_2019/PROV1211.pdf

CALENDAR OF EVENTS

WEBCAST: THE SCIENCE BASE FOR PREVENTION OF INJURY AND VIOLENCE

JANUARY 17, 2012, 1:00-2:00 PM ET

As CDC commemorates the 20th Anniversary of its Injury Center, this session of Public Health Grand Rounds will explore the role of public health in the prevention of injury and violence, and provide a comprehensive picture of the science of injury and violence that has been used to develop and implement solutions such as suicide prevention programs in Oregon and the adoption of the .08 blood alcohol limit for U.S. drivers. This session will be available for Continuing Education, and an archived video will be made available by January 21. <http://www.cdc.gov/about/grand-rounds>

WEBINAR: BRINGING RECOVERY SUPPORTS TO SCALE: A NEW APPROACH

JANUARY 19, 2012, 1:00-2:30 PM ET

This webinar will introduce SAMHSA's Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS). Consistent with SAMHSA's Recovery Support Strategic Initiative, BRSS TACS is being implemented to help states, tribes, jurisdictions, providers, and other stakeholders develop recovery-oriented systems of care across the United States. The webinar will review the vision and goals of BRSS TACS. Experts in behavioral health, including self-identified people in recovery and state-level program administrators, will discuss challenges, resources, and lessons learned that inform the work of this SAMHSA initiative. <https://www.acteva.com/booking.cfm?bevalD=225341>

WEBINAR: ADVANCES IN UNDERSTANDING AND PROMOTING FAMILY RESILIENCE

JANUARY 20, 2012, 1:00 PM ET

This NCTSN Family Systems Speaker Series webinar will discuss existing theoretical and practical perspectives on family resilience, and the clinical and research implications for children and families who have experienced trauma. <http://learn.nctsn.org/>

WEBINAR: ASSESSING FOR AND ADDRESSING TRAUMA IN RECOVERY-ORIENTED PRACTICE

JANUARY 25, 2012, 3:00-4:30 PM ET

This SAMHSA Recovery to Practice session will help practitioners determine when and how extensively traumatic experiences have affected people with behavioral health conditions. In a comprehensive discussion on trauma-informed care, presenters will describe a range of supports, tools, and interventions to address the role of trauma in recovery. Three multidisciplinary practitioners will share their perspectives on the differences between trauma-informed systems and other systems of care, including how assessment incorporates approaches to ensure safety, meet the consumer's needs, and minimize distressing events that could harm the client or staff.

<https://www304.livemeeting.com/lrs/8000963084/Registration.aspx?pageName=k01m8psx1dd71bzn>

WEBINAR: IMPLEMENTING EVIDENCE-BASED PRACTICE: A EUROPEAN PERSPECTIVE ON CULTURE AND CONTEXT

JANUARY 25, 2012, 12:00 PM ET

This NCTSN Implementing and Sustaining Evidence-Based Practice Speaker Series webinar will explore cultural and contextual considerations that may apply when implementing evidence-based and evidence-informed practices throughout the world. While often originating in North America, many such practices are spreading elsewhere. Drawing on examples from Britain, Ireland, and Scandinavia, presenters will reflect on how variations in culture and in system/service-provider contexts may affect success in implementing evidence-based practice. <http://learn.nctsn.org/>

WEBINAR: ADDRESSING ALCOHOL MISUSE AMONG SERVICE MEMBERS: THE SBIRT MODEL

JANUARY 26, 2012, 1:00-2:30 PM ET

This Defense Centers of Excellence (DCoE) webinar will focus on alcohol misuse among service members and examine a secondary prevention method in non-specialty settings to engage service members at an early stage of risk. Screening, brief intervention, and referral to treatment (SBIRT) is a system level approach to identify and treat people with drinking problems. Research has demonstrated that SBIRT is effective in identifying individuals at risk of developing serious alcohol problems.

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

RESTORATIVE JUSTICE WEBINAR

JANUARY 26, 2012, 2:00-3:30 PM ET

OJJDP is hosting this webinar to help participants understand how communities can use restorative justice practices in place of court processing and punitive disciplinary approaches to address juvenile offending. It will also discuss the roles of the victim, offender, and community in the restorative process; describe how to design and implement restorative practices in a variety of juvenile justice settings; and explain how offenders in restorative justice programs learn to become accountable for their actions.

<http://www.ojjdp.gov/enews/flyer/ResJusWeb0126.pdf>

WEBINAR: SECONDARY TRAUMATIC STRESS ... WHAT IS IT?

JANUARY 31, 2012, 1:00 PM ET

This NCTSN Secondary Traumatic Stress Speaker Series webinar will discuss child welfare caseworkers' response to Charles Figley's definition of Secondary Traumatic Stress (STS), outline assessing for STS through instruments and self-examination, and discuss strategies for coping with STS at the supervisor and worker level. <http://learn.nctsn.org/>

WEBINAR: THERAPEUTIC INTERVENTIONS FOR YOUNG FOSTER CHILDREN AND THEIR CAREGIVERS

FEBRUARY 2, 2012, 12:00 PM ET

This NCTSN Zero to Six Child Welfare Speaker Series webinar will address providing or referring infants, young children, and their caregivers for trauma-sensitive therapeutic interventions, including Child-Parent Psychotherapy, and Attachment and Biobehavioral Catch-Up. <http://learn.nctsn.org/>

WEBINAR: IMPLICATIONS FOR IMPLEMENTING AND SUSTAINING INTERVENTIONS IN CHILD WELFARE AND CHILD MENTAL HEALTH SERVICE SYSTEMS

FEBRUARY 22, 2012, 12:00 PM ET

This NCTSN Implementing and Sustaining Evidence-Based Practice Speaker Series webinar will continue the series' goal of raising awareness and understanding of issues arising from the use evidence-based practices within child welfare and mental health organizations. <http://learn.nctsn.org/>

DOD/VA SUICIDE PREVENTION CONFERENCE 2012 – PRESENTATION SUBMISSIONS

JUNE 20-22, 2012 – RENAISSANCE HOTEL, WASHINGTON, DC

The theme of this year's Department of Veterans Affairs (VA) and DCoE conference is, *Back to Basics: Enhancing the Well-Being of our Service Members, Veterans, and their Families*. The deadline for presentations is February 16, 2012.

http://www.suicidology.org/c/document_library/get_file?folderId=236&name=DLFE-490.pdf

WARRIOR RESILIENCE CONFERENCE IV: RESTORING READINESS: INDIVIDUAL, UNIT, COMMUNITY, AND FAMILY

MARCH 29-30, 2012, WASHINGTON, DC

The mission of this DCoE conference is to restore readiness and enhance resilience within the individual, unit, family, and community. Conference attendees will engage in plenary, panel, and breakout sessions where presenters will provide information and share experiences that augment and build readiness skills. Attendees will receive tools and resources that can be used by service members, units, families, and communities to enhance resilience whether at home or in the field.

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

ADOLESCENT TREATMENT EFFECTIVENESS CONFERENCE

APRIL 10-12, 2012, WASHINGTON, DC

OJJDP will cosponsor the Joint Meeting on Adolescent Treatment Effectiveness. Conference sessions will include presentations on juvenile justice, school-based services, recovery services, treatment and recovery systems collaboration and integration, youth and families, evidence-based practices, and special topics.

<http://www.jmate.org/jmate2012/>

CALLS FOR PUBLIC INPUT

COMMENT ON THE HHS PROPOSED ESSENTIAL HEALTH BENEFITS BULLETIN

The Affordable Care Act ensures that Americans have access to quality, affordable health insurance. To achieve this goal, the law ensures that health plans offered in the individual and small group markets, both inside and outside of the Affordable Insurance Exchanges, offer a comprehensive package of items and services known as "essential health benefits." On December 16, 2011, the U.S. Department of Health and Human Services issued a bulletin to provide information and solicit comments on the regulatory approach it plans to propose to define essential health benefits. Public input on this proposal is encouraged. Comments are due by January 31, 2012.

<http://www.healthcare.gov/news/factsheets/2011/12/essential-health-benefits12162011a.html>

PROJECT EVOLVE: COMMENT ON THE NEW SAMHSA.GOV DESIGN

SAMHSA has posted a prototype of the new SAMHSA.gov homepage and is seeking feedback on this draft design. Based on feedback received so far from visitors to the SAMHSA website, this draft reflects a focus on improving navigation, organizing information by topic and audience, and streamlining the information on the homepage. SAMHSA is asking everyone to take a look at the new SAMHSA.gov homepage and answer the question, "What is missing?" on its feedback forum site. <http://blog.samhsa.gov/2012/01/03/project-evolve-another-step-forward/>

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 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:

PRACTICE-BASED INTERVENTIONS ADDRESSING CONCOMITANT MENTAL HEALTH AND CHRONIC MEDICAL CONDITIONS IN THE PRIMARY CARE SETTING (COMMENTS DUE FEBRUARY 1, 2012)

<http://www.effectivehealthcare.ahrq.gov/index.cfm/research-available-for-comment/comment-draft-reports/?pageaction=displayDraftCommentForm&topicid=297&productID=913>

INTERVENTIONS FOR THE SECONDARY PREVENTION OF POSTTRAUMATIC STRESS DISORDER IN ADULTS EXPOSED TO ONE OR MORE TRAUMATIC EVENTS (COMMENTS DUE FEBRUARY 1, 2012)

<http://www.effectivehealthcare.ahrq.gov/index.cfm/research-available-for-comment/comment-key-questions/?pageaction=displayquestions&topicid=403&questionset=203>

CLINICAL TRIAL PARTICIPATION NEWS

NIMH: SCHIZOPHRENIA ADULT RESEARCH STUDY

THE NIMH GENETIC STUDY OF SCHIZOPHRENIA

Individuals 18 years old or older diagnosed with schizophrenia or schizoaffective disorder (depressed type) may be able to participate in a genetic study that looks for genes in families. In order for family members to participate, the person with schizophrenia must be willing and able to participate. Eligible family members participate in an interview and contribute a sample of blood for genetic analysis. Individuals with schizophrenia, and if possible, their siblings, may qualify to participate in this study. There is no change in medication involved. The study involves simple cognitive tests and some MRI scans (no radiation). All testing is completed free of charge and there is compensation for each family member's participation in the study. Travel and lodging assistance is also available. Scientists believe that the identification of susceptibility genes is key to understanding the molecular pathways of this disease so that better treatments and preventive methods can be developed in the future. To find out more, please call 301-435-8970 (1-888-674-6464) or email schizophrenia@mail.nih.gov. For more information on research conducted by the National Institute of Mental Health in Bethesda, MD click here: <http://patientinfo.nimh.nih.gov>

FUNDING INFORMATION

BUREAU OF JUSTICE ASSISTANCE: JUSTICE AND MENTAL HEALTH COLLABORATION TRAINING AND TECHNICAL ASSISTANCE PROGRAM

<http://www.bja.gov/grant/JMHCprogram.html>

BUREAU OF JUSTICE ASSISTANCE: SECOND CHANCE ACT TECHNOLOGY CAREERS TRAINING DEMONSTRATION PROJECTS FOR INCARCERATED ADULTS AND JUVENILES

<http://www.bja.gov/grant/12SCATechCareersSol.pdf>

CDC: REDUCING HEALTH DISPARITIES AMONG PEOPLE WITH INTELLECTUAL DISABILITIES GRANT

<http://www07.grants.gov/search/search.do?&mode=VIEW&oppld=134973>

CDC: RESEARCH GRANTS FOR PREVENTING VIOLENCE AND VIOLENCE-RELATED INJURY GRANT

<http://www07.grants.gov/search/search.do?&mode=VIEW&oppld=134733>

CDC: IDENTIFYING MODIFIABLE PROTECTIVE FACTORS FOR INTIMATE PARTNER VIOLENCE OR SEXUAL VIOLENCE PREVENTION GRANT

<http://www07.grants.gov/search/search.do?&mode=view&oppid=134734>

NEURAL PROCESSES UNDERLYING SEX DIFFERENCES RELATED TO RISK AND RESILIENCE FOR MENTAL ILLNESS

<http://grants.nih.gov/grants/guide/rfa-files/RFA-MH-13-021.html>

SOLICITATION OF ASSAYS FOR HIGH THROUGHPUT SCREENING TO DISCOVER CHEMICAL PROBES

<http://grants.nih.gov/grants/guide/pa-files/PAR-12-058.html> (R01)

<http://grants.nih.gov/grants/guide/pa-files/PAR-12-059.html> (R21)

SOLICITATION OF VALIDATED HITS FOR THE DISCOVERY OF IN VIVO CHEMICAL PROBES

<http://grants.nih.gov/grants/guide/pa-files/PAR-12-060.html>

TOOLS TO ENHANCE STUDIES OF GLIAL CELL DEVELOPMENT, AGING, DISEASE, AND REPAIR

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-12-211.html>

COLLABORATIVE R34S FOR PILOT STUDIES OF INNOVATIVE TREATMENTS IN MENTAL DISORDERS

<http://grants.nih.gov/grants/guide/pa-files/PAR-12-071.html>



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 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.