UPDATE

November 15, 2017

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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 LAUNCHES TWITTER ACCOUNT FOR DIRECTOR; DR. JOSHUA GORDON TO TWEET RESEARCH, NEWS, EVENTS, AND FUNDING OPPORTUNITIES

The National Institute of Mental Health (NIMH) launched an official Twitter account—@NIMHDirector—for Joshua A. Gordon, M.D., Ph.D., Director of the NIMH. As the lead federal agency for research on mental disorders, NIMH established its enterprise Twitter account, @NIMHgov, in May of 2009. It surpassed more than a million followers earlier this year. Dr. Gordon joined NIMH in September of 2016. Through Twitter, he plans to share his vision and priorities for the Institute, build relationships with other leaders invested in mental health research, and share his thoughts on NIMH news items and resources.


NIH ANNOUNCES AWARDS FOR BRAIN INITIATIVE NEUROETHICS RESEARCH; GRANTS AIM TO ADDRESS NEUROETHICAL ISSUES ASSOCIATED WITH HUMAN BRAIN RESEARCH

As scientists develop powerful neurotechnologies to monitor and regulate brain activity, ethical questions arise about how these new tools should be incorporated into medical research and clinical practice. To inform this discussion, the National Institutes of Health (NIH) has awarded grants to five teams of experts who will study the neuroethical issues surrounding the use of deep brain stimulation in neuropsychiatric and movement disorders, and appropriate consent for brain research. The grants are part of the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative.


BRAIN’S ALERTNESS CIRCUITRY CONSERVED THROUGH EVOLUTION; MOLECULAR METHOD REVEALS NEURONAL BASIS OF BRAIN STATES – NIH-FUNDED ANIMAL STUDY

Using a molecular method likely to become widely adopted by the field, NIH-supported researchers have discovered brain circuitry essential for alertness, or vigilance – and for brain states more generally. Strikingly, the same cell types and circuits are engaged during alertness in zebra fish and mice, species whose evolutionary forebears parted ways hundreds of millions of years ago. This suggests that the human brain is likely similarly wired for this state critical to survival.

NIDA LAUNCHES TWO ADOLESCENT SUBSTANCE USE SCREENING TOOLS

The National Institute on Drug Abuse (NIDA) has launched two evidenced-based online screening tools that providers can use to assess substance use disorder risk among adolescents 12 to 17 years old. These tools can be self-administered, or completed by clinicians in less than two minutes. They are being offered through the NIDAMED Web Portal. The screening options are: Brief Screener for Alcohol, Tobacco, and other Drugs, and Screening to Brief Intervention.

OPIOID TREATMENT DRUGS HAVE SIMILAR OUTCOMES ONCE PATIENTS INITIATE TREATMENT; NIDA STUDY COMPARES BUPRENORPHINE/NALOXONE COMBINATION TO EXTENDED RELEASE NALTREXONE

A study comparing the effectiveness of two pharmacologically distinct medications used to treat opioid use disorder – a buprenorphine/naloxone combination and an extended release naltrexone formulation – shows similar outcomes once medication treatment is initiated. Among active opioid users, however, it was more difficult to initiate treatment with the naltrexone. Study participants were dependent on non-prescribed opioids, 82 percent of them on heroin, and 16 percent on pain medications. The research was conducted at eight sites within the NIDA Clinical Trials Network.

NIH ESTABLISHES NEW RESEARCH IN SOCIAL EPIGENOMICS TO ADDRESS HEALTH DISPARITIES

NIH will award 10 grants to support social epigenomics research in health disparities. Social epigenomics is the study of how social experiences affect the genes and our biology. Experiences do not alter the genetic code itself; however, social experiences may bring about changes in the various molecules that interact with DNA, determining which genes are switched on or off. Recent studies suggest that social stressors may affect health status through epigenomic modifications of various biological pathways. Living in disadvantaged neighborhoods with exposure to chemical stressors, violence, discrimination, residential segregation, psychosocial stress, and limited access to healthy foods, can affect a person’s ability to stay healthy - becoming barriers to health.
**HIGHER BRAIN GLUCOSE LEVELS MAY MEAN MORE SEVERE ALZHEIMER’S; NIH STUDY SHOWS CONNECTIONS BETWEEN GLUCOSE METABOLISM, ALZHEIMER’S PATHOLOGY, SYMPTOMS**

For the first time, scientists have found a connection between abnormalities in how the brain breaks down glucose and the severity of the signature amyloid plaques and tangles in the brain as well as the onset of eventual outward symptoms of Alzheimer’s disease. The study was supported by the National Institute on Aging.


**NIH LAUNCHES PREGSOURCE, A CROWDSOURCING PROJECT TO BETTER UNDERSTAND PREGNANCY; PREGNANT WOMEN CAN TRACK THEIR EXPERIENCES THROUGH A SECURE AND CONFIDENTIAL WEBSITE**

NIH has launched *PregSource*, a research project that aims to improve knowledge of pregnancy by collecting information directly from pregnant women. The project will explore physical and emotional aspects of pregnancy, labor, and delivery and will identify distinct challenges faced by subgroups of women, such as those with physical disabilities. By offering a more comprehensive picture of the pregnancy experience — from normal pregnancies to those complicated by disease or other factors — *PregSource* promises to inform strategies for improving maternal care in the United States (U.S.). Women who sign up for PregSource use online surveys to share what they are experiencing, and they can compare these experiences to those of other participants. Over the course of their pregnancies, women can chart changes to their weight, sleep, mood, morning sickness, and physical activity. In addition, they can access informational resources developed by experts on pregnancy, childbirth, and child development.


**FDA APPROVES PILL WITH SENSOR THAT DIGITALLY TRACKS IF PATIENTS HAVE INGESTED THEIR MEDICATION; NEW TOOL FOR PATIENTS TAKING ABILIFY**

The U.S. Food and Drug Administration (FDA) approved the first drug in the U.S. with a digital ingestion tracking system. Abilify MyCite (aripiprazole tablets with sensor) has an ingestible sensor embedded in the pill that records that the medication was taken. The product is approved for the treatment of schizophrenia, acute treatment of manic and mixed episodes associated with bipolar I disorder and for use as an add-on treatment for depression in adults.

*Press Release: https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm584933.htm*
NEW FROM NIH

NIH RESEARCH MATTERS: MACHINE LEARNING IDENTIFIES YOUTH AT RISK FOR SUICIDE

Researchers used machine learning to analyze brain images and identify individuals experiencing suicidal thoughts. If validated in larger groups of people, the approach could be used to assess suicide risk and monitor response to treatments. https://www.nih.gov/news-events/nih-research-matters/machine-learning-identifies-suicidal-youth

NIH NEWS IN HEALTH: WHEN FOOD CONSUMES YOU; TAKING EATING TO EXTREMES

This NIH News in Health article describes the three most widely recognized eating disorders, which are binge-eating disorder, bulimia nervosa, and anorexia nervosa. https://newsinhealth.nih.gov/2017/11/when-food-consumes-you

NIH WELLNESS TOOLKITS

These online toolkits highlight evidence-based tips for living well and improving one’s health. The resource includes six strategies for improving one’s emotional health. https://www.nih.gov/health-information/your-healthiest-self-wellness-toolkits

NIAAA VIDEO: INTRODUCING AND DEMONSTRATING THE NIAAA ALCOHOL TREATMENT NAVIGATOR

This video provides a demonstration of the National Institute on Alcohol Abuse and Alcoholism’s (NIAAA) new Treatment Navigator. The navigator is an online tool to help individuals and their loved ones navigate the process of choosing treatment for alcohol problems. https://www.niaaa.nih.gov/news-events/news-noteworthy/video-introducing-and-demonstrating-niaaa-alcohol-treatment-navigator

NIDA SCIENCE HIGHLIGHT: HOW THE BRAIN GROWS UP: PREFRONTAL CORTEX GAINS NEW DOPAMINE AXONS

Developmental changes in the prefrontal cortex underlie the maturing of cognitive functioning and emotional control that occurs in adolescence. Findings from this NIDA-supported study shed light on how genetic and environmental factors may interact in adolescence to influence the structure and function of the prefrontal cortex. https://www.drugabuse.gov/news-events/latest-science/how-brain-grows-up
NEW FROM SAMHSA

TIPS FOR SURVIVORS OF A DISASTER OR OTHER TRAUMATIC EVENT: COPING WITH RE-TRAUMATIZATION

This resource explains the signs and symptoms of re-traumatization. It gives guidance on how to manage the symptoms, and provides resources for building resilience and an adequate support system for dealing with triggering events. https://store.samhsa.gov/product/SMA17-5047

INTIMATE PARTNER VIOLENCE AND CHILD TRAUMA

The Substance Abuse and Mental Health Services Administration’s (SAMHSA) National Child Traumatic Stress Network (NCTSN) released this new policy brief for policymakers and other stakeholders, which provides an overview of intimate partner violence (IPV) and its relationship to child trauma. It also provides policy-relevant and child trauma-focused recommendations to assist them in their response to IPV. http://www.nctsn.org/sites/default/files/assets/pdfs/intimate_partner_violence_and_child_trauma.pdf

CREATING, SUPPORTING, AND SUSTAINING TRAUMA-INFORMED SCHOOLS: A SYSTEM FRAMEWORK

This NCTSN resource provides a tiered approach to creating a trauma-informed environment that addresses the needs of all students, staff, administrators, and families who might be at risk for experiencing the symptoms of traumatic stress. The framework presents a vision of a trauma-informed school, adhering to the “4 R’s”: 1) realizing the widespread impact of trauma and pathways to recovery; 2) recognizing trauma's signs and symptoms; 3) responding by integrating knowledge about trauma into all facets of the system; and 4) resisting re-traumatization of trauma-impacted individuals by decreasing the occurrence of unnecessary triggers (i.e., trauma and loss reminders), and by implementing trauma-informed policies, procedures, and practices. http://www.nctsn.org/sites/default/files/assets/pdfs/creating_supporting_sustaining_trauma_informed_schools_a_systems_framework.pdf

MASS VIOLENCE AND BEHAVIORAL HEALTH

Mass violence events expose survivors and witnesses to trauma, whether they experience the event in person, within the community, or through the media. This SAMHSA bulletin discusses the effects of mass violence events and the sequence of behavioral health reactions after the event in adult and youth survivors. https://content.govdelivery.com/accounts/USSAMHSA/bulletins/1c374bf
NEW FROM CDC

CONNECTING THE DOTS: TIPS FOR ADDRESSING AND PREVENTING MULTIPLE TYPES OF VIOLENCE

*Connecting the Dots* is a new online training from the Centers for Disease Control and Prevention (CDC) about shared risk and protective factors across multiple forms of violence. Combined with evidence-based practices, the training will help users implement violence prevention strategies, and address risks in the context of the home environment, neighborhood, and community.

https://vetoviolence.cdc.gov/apps/connecting-the-dots/

QUICKSTATS: PERCENTAGE OF CHILDREN AND TEENS AGED 6–17 YEARS WHO MISSED MORE THAN 10 DAYS OF SCHOOL IN THE PAST 12 MONTHS BECAUSE OF ILLNESS OR INJURY, BY SERIOUS EMOTIONAL OR BEHAVIORAL DIFFICULTIES STATUS AND AGE GROUP

During 2014–2016, children aged six to 17 years whose parent or guardian indicated the child had serious emotional or behavioral difficulties (EBDs) were almost four times as likely to miss more than 10 days of school because of illness or injury compared with children without serious EBDs. Among children with serious EBDs, those aged six to 10 years were less likely to miss more than 10 days of school compared with children aged 11 to 14 years and children aged 15 to 17 years.

https://www.cdc.gov/mmwr/volumes/66/wr/mm6644a13.htm

OPIOID REPORTS

CDC has prepared this 17-year online compilation of *Morbidity and Mortality Weekly Report*, which provides information on a variety of opioid-related topics such as trends, prevalence, incidence, and prescribing practices. https://www.cdc.gov/mmwr/opioid_reports.html

NEW FROM HHS

BLOG POST: ADVANCING THE PRACTICE OF PAIN MANAGEMENT UNDER THE HHS OPIOID STRATEGY

This U.S. Department of Health and Human Services (HHS) blog post describes the focus on advancing the practice of acute and chronic pain management as part of its overall strategy to address the opioid crisis. The activities fall into three categories: 1) advancing national pain care policy; 2) providing clinicians and patients with education and tools to improve pain care; and 3) supporting cutting-edge research on pain.

NEW CYBERBULLYING CONTENT ON STOPBULLYING.GOV

The re-developed StopBullying.gov website makes it easier to understand what cyberbullying is, where the vulnerable online spaces are, and how best to respond when online abuse takes place. The website includes information on recognizing the warning signs of cyberbullying, how best to respond when someone is experiencing bullying in an app or on a website, and what can be done to prevent cyberbullying. It reviews some of the most commonly used apps by teens and explores how online gaming can be a forum where kids can gang up or exclude other players. https://www.stopbullying.gov/blog/2017/10/31/new-cyberbullying-content-on-revamped-stopbullinggov.html

AHRQ: COMPARISON OF ALL-CAUSE 7-DAY AND 30-DAY READMISSIONS STATISTICAL BRIEF

There have been increasing efforts among health care policymakers, payers, and providers to measure and reduce hospital readmissions. This Agency for Healthcare Research and Quality (AHRQ) statistical brief presents data on rates of seven-day readmissions compared with 30-day readmissions in 2014. Schizophrenia, alcohol-related disorders, and congestive heart failure were among the leading diagnoses with both the highest seven-day and 30-day readmission rates. Among Medicaid patients who were discharged with congestive heart failure or schizophrenia at the index stay, nearly one in 10 stays resulted in readmission within seven days. Among individuals readmitted within 30 days of an index stay for septicemia or schizophrenia, uninsured individuals were more likely than individuals with insurance to return within seven days. https://www.ahrq.gov/news/comparison-all-cause-readmissions.html

EVENTS

NATIONAL ADOPTION MONTH

NOVEMBER 2017

The goal of National Adoption Month, an initiative of the Administration for Children and Families’ Children’s Bureau, is to increase national awareness and bring attention to the need for permanent families for children and youth in the U.S. foster care system. Each year, the initiative focuses its outreach and awareness-raising efforts around a new adoption-related theme. The 2017 theme, “Teens Need Families, No Matter What,” highlights the importance of identifying well-prepared and committed families for the thousands of teenagers in foster care. Many of these young people are less likely to be adopted, often because of their age, and will too often age out of the system without a stable support system. Securing lifelong connections for these teens, legally and emotionally, is an urgent need and critical component of their future achievement and overall well-being. https://www.childwelfare.gov/topics/adoption/nam/
NATIONAL RUNAWAY PREVENTION MONTH ACTIVITIES

NOVEMBER 2017

National Runaway Prevention Month provides an opportunity for federal representatives and communities to come together to increase awareness about runaway prevention and youth homelessness. Every year, thousands of U.S. youth are forced to run away from home or asked to leave their homes. Alone and struggling to meet basic needs, these youth face many challenges, including substance abuse and an increased risk of becoming a victim of human trafficking. This year’s theme, “Friends Helping Friends,” highlights the importance of friends and family supporting youth at risk of running away or becoming homeless. [https://www.acf.hhs.gov/fysb/news/national-runaway-prevention-month-activities](https://www.acf.hhs.gov/fysb/news/national-runaway-prevention-month-activities)

NATIONAL RURAL HEALTH DAY WEBCAST

NOVEMBER 16, 2017, 9:30 AM-3:30PM ET

In recognition of National Rural Health Day, the Health Resources and Services Administration (HRSA) will host a webcast featuring how HHS agencies are collaborating to improve rural health. Webcast topics include federal efforts addressing the opioid epidemic. [https://www.hrsa.gov/rural-health/about-us/rural-healthday.html](https://www.hrsa.gov/rural-health/about-us/rural-healthday.html)

WEBINAR: HEALTHY NATIVE YOUTH: A ONE-STOP-SHOP FOR CULTURALLY-RELEVANT HEALTH CURRICULA

NOVEMBER 16, 2017, 1:00-2:00 PM ET

As part of the HHS Office of Minority Health’s (OMH) observance of Native American Heritage Month, the OMH Resource Center will host this webinar in collaboration with the Northwest Portland Indian Health Board. This webinar will explore trends in health information-seeking by American Indian/Alaska Native teens and young adults, and will introduce viewers to the Healthy Native Youth website, a one-stop-shop for health advocates who want to expand learning opportunities for Native youth. [https://register.gotowebinar.com/register/1479693448311653377](https://register.gotowebinar.com/register/1479693448311653377)
WEBINAR: CLINICAL BEST PRACTICES IN ORAL HEALTH FOR INDIVIDUALS WITH SUBSTANCE USE DISORDERS

NOVEMBER 16, 2017, 2:00-3:00 PM ET

This webinar will identify ways that oral health and behavioral health professionals, and safety net health care systems, can integrate oral health into the care of individuals with substance use disorders. The webinar is hosted by SAMHSA and HRSA's Bureau of Health Workforce and Bureau of Primary Health Care. https://content.govdelivery.com/accounts/USSAMHSA/bulletins/1bdd168

OFFICE OF MINORITY HEALTH RESOURCE CENTER GRANT WRITING WORKSHOP

NOVEMBER 16-17, 2017, FT. LAUDERDALE, FL

Learn to write winning grants and build sustainable partnerships to improve minority health. This OMH grant writing workshop, to be held at Nova Southeastern University, is intended for university and college junior faculty, staff, and health professionals. https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=100

FACEBOOK LIVE EVENT: CHOOSING QUALITY ALCOHOL TREATMENT

NOVEMBER 17, 2017, 11:00 AM-12:00 PM ET

Join the Addiction Policy Forum and NIAAA for this Facebook Live event about choosing quality alcohol treatment. Attendees will be provided with an overview of the NIAAA Alcohol Treatment Navigator and a demonstration of how it can be used to help find quality alcohol treatment, followed by a question and answer session with the developers. https://www.niaaa.nih.gov/news-events/news-noteworthy/join-us-facebook-live-event-choosing-quality-alcohol-treatment

FAMILY HEALTH HISTORY DAY

NOVEMBER 23, 2017

This Thanksgiving, discuss your family's health history to better predict your risk for illness and keep everyone healthy. Use My Family Health Portrait to create a family health history. https://www.genome.gov/17516481/
WEBINAR: ZERO SUICIDE APPROACH FOR CRISIS CENTERS

NOVEMBER 30, 2017, 2:00-3:00 PM ET

The National Suicide Prevention Lifeline is hosting a webinar on the role of crisis centers in the Zero Suicide initiative. Panelists will discuss how crisis centers are well-positioned to offer essential gap-filling services such as evidence-based follow-up care, and how providing these services can lead to increases in funding and capacity. https://register.gotowebinar.com/register/1863247084550160129

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

Family members perform a significant service caring for Veterans with severe physical, mental, and cognitive impairments. 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, post-traumatic stress disorder, or polytrauma. https://register.gotowebinar.com/register/1773034354200879361

NATIONAL DRUG AND ALCOHOL FACTS WEEK

JANUARY 22-28, 2018

Prevention partners are once again 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
CALLS FOR PUBLIC INPUT

CENTERS FOR MEDICARE AND MEDICAID SERVICES: INNOVATION CENTER NEW DIRECTION

The Centers for Medicare and Medicaid Services' Innovation Center is seeking public feedback on a new direction to promote patient-centered care and test market-driven reforms that empower beneficiaries as consumers, provide price transparency, increase choices and competition to drive quality, reduce costs, and improve outcomes. The Innovation Center welcomes stakeholder input on eight focus areas, including mental and behavioral health models, and on the future direction of the Innovation Center. Comments are due by November 20. https://innovation.cms.gov/initiatives/direction/

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:

TREATMENT FOR BIPOLAR DISORDER IN ADULTS: SYSTEMATIC REVIEW (COMMENTS ACCEPTED THROUGH NOVEMBER 22, 2017)
https://effectivehealthcare.ahrq.gov/get-involved/draft-comments/draft/15089/

REQUEST FOR INFORMATION: ENHANCING UTILIZATION OF THE NIH CLINICAL CENTER

NIH is seeking input from the community about areas of scientific opportunity that would benefit from the unique research resources of the NIH Clinical Center in Bethesda, Maryland. In particular, input is being sought to identify areas where the need for in-patient research beds exceeds availability. The NIH plans to use the input to consider new partnerships for enhancing utilization of the Clinical Center to address research questions that can be most effectively and efficiently answered by interventions or procedures that require hospitalization in a unique, research-focused setting. Responses accepted until November 24, 2017. https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-007.html
FUNDING INFORMATION

SAMHSA'S BRINGING RECOVERY SUPPORTS TO SCALE TECHNICAL ASSISTANCE CENTER STRATEGY
https://content.govdelivery.com/accounts/USSAMHSA/bulletins/1c30af2

ADVANCING SYSTEMS OF SERVICES FOR CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS

NIH RESEARCH PROJECT GRANT

NIH EXPLORATORY/DEVELOPMENTAL RESEARCH GRANT PROGRAM

SIMULATION MODELING AND SYSTEMS SCIENCE TO ADDRESS HEALTH DISPARITIES

REDUCING HEALTH DISPARITIES AMONG MINORITY AND UNDERSERVED CHILDREN
https://grants.nih.gov/grants/guide/pa-files/PA-18-152.html (R01)

CHRONIC CONDITION SELF-MANAGEMENT IN CHILDREN AND ADOLESCENTS

PROMOTING CAREGIVER HEALTH USING SELF-MANAGEMENT

PERSONALIZED STRATEGIES TO MANAGE SYMPTOMS OF CHRONIC ILLNESS

MECHANISMS, MODELS, MEASUREMENT, AND MANAGEMENT IN PAIN RESEARCH

HEALTH PROMOTION AMONG RACIAL AND ETHNIC MINORITY MALES
https://grants.nih.gov/grants/guide/pa-files/PA-18-144.html (R01)

ADDRESSING UNMET NEEDS IN PERSONS WITH DEMENTIA TO DECREASE BEHAVIORAL SYMPTOMS AND IMPROVE QUALITY OF LIFE

THE HEALTH OF SEXUAL AND GENDER MINORITY POPULATIONS
https://grants.nih.gov/grants/guide/pa-files/PA-18-037.html (R01)
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.