UPDATE

September 15, 2018

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Prepared by the U.S. Department of Health and Human Services, National Institutes of Health, National Institute of Mental Health
DAILY USE OF MARIJUANA AMONG NON-COLLEGE YOUNG ADULTS AT ALL-TIME HIGH; 2017 DRUG USE DATA SHOWS CLEAR DIFFERENCES IN SUBSTANCE USE TRENDS BETWEEN COLLEGE AGE ADULTS AND THEIR NON-COLLEGE PEERS

The National Institute on Drug Abuse (NIDA) announced that the latest Monitoring the Future survey results on substance use trends as teens transition to adulthood are now available online, comparing substance use patterns of full-time college students to their non-college peers. Most notably, more than 13 percent of young adults not in college report daily, or near daily, marijuana use; alcohol use is more common among college students; some opioid use is declining in both groups; and the most sizeable difference is the higher rate of cigarette smoking in the non-college group. [https://www.nih.gov/news-events/news-releases/daily-use-marijuana-among-non-college-young-adults-all-time-high](https://www.nih.gov/news-events/news-releases/daily-use-marijuana-among-non-college-young-adults-all-time-high)

EVENT REGISTRATION OPENS FOR NATIONAL DRUG & ALCOHOL FACTS WEEK; OBSERVANCE TO BE HELD JANUARY 22-27, 2019, WITH NEW RESOURCES FOR PARENTS AND EDUCATORS


VA MARKS SUICIDE PREVENTION MONTH IN SEPTEMBER WITH ‘BE THERE’ CAMPAIGN INITIATIVE URGES COMMUNITIES TO SUPPORT AT-RISK VETERANS THROUGH SIMPLE ACTIONS

To mark Suicide Prevention Month this September, the U.S. Department of Veterans Affairs (VA) is shining a light on effective ways to prevent Veteran suicide with its Be There campaign. The campaign highlights the risk factors and warning signs for suicide, provides information about VA mental health and suicide prevention resources, and helps individuals and organizations start the conversation around Veteran mental health in their communities. [https://www.va.gov/opa/pressrel/pressrelease.cfm?id=5106](https://www.va.gov/opa/pressrel/pressrelease.cfm?id=5106)
CDC’S NATIONAL VIOLENT DEATH REPORTING SYSTEM NOW INCLUDES ALL 50 STATES

The Centers for Disease Control and Prevention (CDC) announced new state grants for the National Violent Death Reporting System (NVDRS). A total of $3.2 million in the Fiscal Year 2018 funds will go to the ten new states to become part of NVDRS: Arkansas, Florida, Idaho, Mississippi, Montana, North Dakota, South Dakota, Tennessee, Texas, and Wyoming. NVDRS will now receive data on violent deaths from all 50 states; Washington, DC; and Puerto Rico. NVDRS is the only state-based system to combine data from law enforcement, coroners, and medical examiners, and vital statistics to obtain the most comprehensive data available on homicides and suicides. NVDRS provides information about who dies violently, where victims are killed, when they are killed, and the circumstances of the death. States can use this data to develop and inform tailored prevention and intervention efforts to reduce violent deaths.


NIOSH LAUNCHES NEW FRAMEWORK TO TACKLE OPIOID CRISIS IN THE WORKPLACE

Opioid use and misuse in the workplace are a definite part of America’s opioid crisis – and the CDC National Institute for Occupational Safety and Health (NIOSH) has a new plan to fight it. Approaching the crisis from an occupational perspective, NIOSH developed a framework that looks at different workplace conditions that can be risk factors for medically prescribed opioid use becoming opioid misuse. The framework also focuses on protecting first responders and includes guidance on developing methods to detect dangerously potent opioids in the workplace rapidly and how to effectively and safely decontaminate workplaces.

https://www.cdc.gov/media/releases/2018/p0831-NIOSH-opioid.html

SAMHSA AWARDS $215.2 MILLION TO SUPPORT JUSTICE-INVOLVED INDIVIDUALS WHO HAVE SUBSTANCE USE OR CO-OCCURRING MENTAL AND SUBSTANCE USE DISORDERS

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently awarded up to $215.2 million over five years for justice-involved individuals who have mental and substance use disorders. These programs are intended to provide effective treatment services to reduce further criminal justice involvement and to promote recovery for justice-involved individuals who have substance use disorders or co-occurring mental and substance use disorders.

SAMHSA’S ANNUAL MENTAL HEALTH, SUBSTANCE USE DATA PROVIDE ROADMAP FOR FUTURE ACTION

SAMHSA released the 2017 National Survey on Drug Use and Health (NSDUH). The annual survey comprises data that help provide a statistical context for the country’s opioid crisis and other behavioral health matters. Among the findings of the 2017 NSDUH, approximately 8.1 percent of individuals are living with a co-occurring mental and substance use disorder. Further, those who have any mental illness or serious mental illness are significantly more likely to use cigarettes, illicit drugs, and marijuana, misuse opioids and pain relievers and binge drink than individuals with no mental illness.


HHS AWARDS NEARLY $60 MILLION TO SUPPORT COMMUNITY HEALTH CENTERS IMPACTED BY HURRICANES HARVEY, IRMA, AND MARIA

The U.S. Department of Health and Human Services (HHS) awarded nearly $60 million to 161 community health centers in six southern states and two U.S. territories that were impacted by hurricanes Harvey, Irma, and Maria. Administered by the Health Resources and Services Administration (HRSA), Capital Assistance for Hurricane Response and Recovery Efforts funding will help ensure continued access to primary health care services at community health centers in areas affected by the hurricanes.


HHS AWARDS $21 MILLION TO SUPPORT HEALTH CENTER PARTICIPATION IN NIH’S ALL OF US RESEARCH PROGRAM

Health Resources and Services Administration (HRSA) awarded $21 million to 46 community health centers to support their participation in the National Institutes of Health’s (NIH) All of Us Research Program. All of Us is a national effort to gather data from one million or more U.S. residents to accelerate research and improve health by taking individuals’ differences in lifestyle, environment, biology, and other factors into account. HRSA’s investment supports community health centers’ capabilities to enroll and retain participant partners in All of Us, which seeks to advance precision medicine.

FDA APPROVES NEW DOSAGE STRENGTH OF BUPRENOPHINE AND NALOXONE SUBLINGUAL FILM AS MAINTENANCE TREATMENT FOR OPIOID DEPENDENCE

The U.S. Food and Drug Administration (FDA) approved Cassipa (buprenorphine and naloxone) sublingual film (applied under the tongue) for the maintenance treatment of opioid dependence. This action provides a new dosage strength of buprenorphine and naloxone sublingual film, which is also approved in both brand name and generic versions and various strengths.
https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm619864.htm

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NEW FROM NIH

NIH DIRECTOR’S BLOG: RESEARCHERS ELUCIDATE ROLE OF STRESS GENE IN CHRONIC PAIN

For most people, pain eventually fades away as an injury heals. But for others, the pain persists beyond the initial healing and becomes chronic, hanging on for weeks, months, or even years. NIH Director Francis Collins describes NIH-funded research that may have uncovered an answer to help explain why: subtle differences in a gene that controls how the body responds to stress.

UPDATES AND NEWS FROM THE “ALL OF US” RESEARCH PROGRAM

This newsletter from the NIH “All of Us” Research Program highlights the importance of program’s surveys that are collecting data about participants’ health, environment, and lifestyle. The issue also describes plans to release a new tool for participants to share their mental health experiences and track their moods.
https://links.joinallofus.org/e/evib?_t=a9af0da6ea934373b84f8d07b8b3a951&_m=8d56ec0172e64dd2a3f0accf2ff9f1326&_e=7Q8th0vF4jJT31vJsrfsO459Ag80GuQ3MM5mgr7r2lddrozfKG9LR5NB8HWqfr6Fccg42FVDSnwrj0UEuTFqlJNsIMX35_kcVZQxDvi9IxOelolM81xACE5yg2UoTK8u

PROVEN PREVENTION PROGRAM AIMS TO ADAPT FOR NATIVE AMERICANS

The Communities That Care (CTC) prevention system has demonstrated effectiveness in reducing youth drug use and other problem behaviors in a variety of communities. This NIDA-supported research demonstrates that a survey that is a key tool in the CTC system is largely valid in Native American communities. Further, adjusting the survey to incorporate culturally specific risk and protective factors can improve its usefulness.
**NEW FROM SAMHSA**

**BLOG POST: PREVENTING SUICIDE IN TRIBAL COMMUNITIES—AND BEYOND**


**PODCAST: THE ROLE OF PAIN MANAGEMENT IN RECOVERY FROM SERIOUS MENTAL ILLNESS**

This podcast offers providers practical tools and strategies for incorporating person-centered, strength-based approaches to pain management for persons in recovery from serious mental illness. [https://www.samhsa.gov/recovery-to-practice/webinars-podcasts#Complex%20Clinical](https://www.samhsa.gov/recovery-to-practice/webinars-podcasts#Complex%20Clinical)

**CLINICAL DECISION SUPPORT FOR PRESCRIBERS TREATING INDIVIDUALS WITH CO-OCCURRING DISORDERS**

This two-course series offers practitioners tools, tips, and strategies for addressing the needs of individuals with serious mental illness and co-occurring substance use disorders from a strength-based and recovery-oriented perspective. The American Academy of Family Physicians offers continuing education credits for the series. [https://www.samhsa.gov/recovery-to-practice/virtual-learning](https://www.samhsa.gov/recovery-to-practice/virtual-learning)

**WEBINARS: GETTING AHEAD OF THE STORM: ENSURING CONTINUED CARE AND SUPPORT FOR SENIORS, THEIR FAMILIES, AND CAREGIVERS (ENGLISH AND SPANISH)**

SAMHSA’s Center for Mental Health Services’ Long-Term Recovery Workgroup, together with HRSA, offer two webinars that provide guidance on supporting older adults with complex medical and behavioral health needs before, during, and after a hurricane. Hosted in English and Spanish, the panel discussions include information for family members, first responders, and behavioral health staff to optimize the health and wellness of older adults with complex health needs in disaster situations. The webinars specifically focus on persons living in and near Puerto Rico and the U.S. Virgin Islands but can be generalized to any major coastal storm. [https://www.samhsa.gov/disaster-preparedness/publications-resources](https://www.samhsa.gov/disaster-preparedness/publications-resources)
NEW FROM CDC

PREVALENCE OF CHRONIC PAIN AND HIGH-IMPACT CHRONIC PAIN AMONG ADULTS—UNITED STATES, 2016

In a new analysis, CDC researchers estimate that chronic pain affects approximately 50 million U.S. adults, and high-impact chronic pain affects approximately 20 million U.S. adults. Chronic pain has been linked to restrictions in mobility and daily activities, dependence on opioids, anxiety, and depression, and poor quality of life. https://www.cdc.gov/mmwr/volumes/67/wr/mm6736a2.htm

NEW FROM AHRQ

ATTENTION DEFICIT HYPERACTIVITY DISORDER IN CHILDREN: STATISTICAL BRIEF

This brief from the Agency for Healthcare Research and Quality (AHRQ) provides an analysis of reported attention deficit hyperactivity disorder (ADHD) diagnosis and purchases of prescription drugs to treat ADHD. Trends in diagnosis, prescription utilization, and prescription type are shown for two age groups (5–12 and 13–17 years). In addition, variation in diagnosis and prescription treatment are examined by poverty status and by insurance coverage for all children ages 5–17. https://www.ahrq.gov/news/meps-adhd-children.html
EVENTS

NATIONAL SUICIDE PREVENTION MONTH

SEPTEMBER 2018

During the month of September, mental health advocates, prevention organizations, survivors, and community members unite to promote suicide prevention awareness. Throughout the month of September, NIMH will post social media messages across Twitter, Facebook, YouTube, Google+, and LinkedIn to promote educational suicide prevention resources and the Suicide Prevention Lifeline. Lifeline: https://suicidepreventionlifeline.org/promote-national-suicide-prevention-month/

NATIONAL RECOVERY MONTH

SEPTEMBER 2018

Each September, SAMHSA sponsors National Recovery Month (Recovery Month) to increase awareness and understanding of mental and substance use disorders, and to celebrate individuals living in recovery. This year’s theme is “Join the Voices for Recovery: Invest in Health, Home, Purpose, and Community.” The 2018 Recovery Month Toolkit and television and radio public service announcements are available to view and download. Communities across the country use these materials to organize events, issue proclamations, increase public awareness, and encourage individuals in need of services and their friends and families to seek help. https://recoverymonth.gov/

PAIN AWARENESS MONTH

SEPTEMBER 2018

September is Pain Awareness Month when organizations work to raise awareness of how pain affects persons, families, communities, and the nation and to support national action to address pain. https://www.cdc.gov/mmwr/volumes/67/wr/mm6736a1.htm
WEBINAR: ASSESSING WORKFORCE READINESS TO PROVIDE COMPREHENSIVE SUICIDE CARE

SEPTEMBER 18, 2018, 1:00-2:30 PM ET

Join SAMHSA for a webinar that presents the results from the Zero Suicide Workforce Survey and learn about establishing a culture where staff training is a critical and ongoing part of providing care. By the end of the webinar, participants will describe how surveying staff can support system-wide culture change critical to patient safety and continuous quality improvement, understand staff readiness to provide suicide-specific care, and explain the purpose and utility of the Zero Suicide Workforce Survey to health care staff.
https://content.govdelivery.com/accounts/USSAMHSA/bulletins/20caf20

LECTURE: NATURE CONTACT AND HUMAN HEALTH: A MULTIMETHOD APPROACH

SEPTEMBER 19, 2018, 11:00 AM ET, BETHESDA, MD AND AVAILABLE ON VIDEOCAST

The National Center for Integrative and Complementary Health Integrative lecture will address nature experience and how it affects our health. Topics will include the state of the science on nature in relation to mental health; approaches for measuring the impacts of nature experiences on mood, cognitive function, and emotion regulation; a theory on possible causal mechanisms; implications for urban planning and public policy; and a proposed agenda for future research. https://nccih.nih.gov/news/events/IMlectures

WEBINAR: CREATING SUPPORTIVE SYSTEMS TO IMPROVE MENTAL HEALTH OUTCOMES FOR AFRICAN AMERICAN BOYS

SEPTEMBER 20, 2018, 2:00-3:30 PM ET

SAMHSA is hosting a virtual roundtable on creating supportive systems to improve mental health outcomes for African American boys. It will be hosted in collaboration with the HHS Office of Minority Health for the National Network to Eliminate Disparities in Behavioral Health. Panelists will share ways emerging data is influencing work in early childhood settings, family and community systems, policy, and research.
https://nned.net/NNED_content/news_announcement/creating-supportive-systems-to-improve-mental-health-outcomes-for-young-afr
CONFERENCE: OPIOID AND NICOTINE USE, DEPENDENCE, AND RECOVERY: INFLUENCES OF SEX AND GENDER

SEPTEMBER 27-28, 2018, SILVER SPRING, MD; WEBCAST AVAILABLE

The FDA is hosting this public meeting, which will include presentations by experts in the field of opioid and tobacco research, professional education, and clinical care on the biological (sex) and sociological (gender) influences on use, misuse, and recovery.  
https://www.fda.gov/ForConsumers/ByAudience/ForWomen/ucm610847.htm

2018 RESEARCH CONFERENCE ON SLEEP AND THE HEALTH OF WOMEN

OCTOBER 16-17, 2018, BETHESDA, MD

This NIH conference is intended to sound a wakeup call throughout society about the importance of sleep for the health of women. It will showcase a decade of federally funded research advances in understanding health risks, societal burden, and treatment options associated with sleep deficiency and sleep disorders in women.  

CALLS FOR PUBLIC INPUT

CALL FOR NOMINATIONS FOR FUTURE AHRQ EVIDENCE-BASED PRACTICE CENTER REPORTS

What health care decisions are you struggling with? Would a review of the scientific evidence help inform this decision? Share your ideas with the AHRQ Evidence-based Practice Center (EPC) Program. AHRQ will use these ideas to determine the focus of its evidence reports for next fiscal year. The AHRQ EPC Program reviews and summarizes the available evidence on current health care issues, which can help: clinicians and policymakers understand the benefits and harms of different tests and treatments; health systems and policymakers understand the best options for implementing a new program or intervention; and patients make better decisions about their healthcare options. Propose your evidence report topics by September 21, 2018.  
https://effectivehealthcare.ahrq.gov/get-involved/suggest-topic
FUNDING INFORMATION

HRSA: RURAL HEALTH NETWORK DEVELOPMENT PLANNING PROGRAM
https://www.grants.gov/web/grants/view-opportunity.html?oppId=307887

CDC: RESEARCH GRANTS TO IDENTIFY EFFECTIVE STRATEGIES FOR OPIOID OVERDOSE PREVENTION (FORECAST)
https://www.grants.gov/web/grants/view-opportunity.html?oppId=308762

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. 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.