

National Institute of Mental Health Outreach Partnership Program

Update

November 1, 2009

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<http://www.nimh.nih.gov/health/outreach/partnership-program/subscribe-to-the-update.shtml>

**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

NIMH: Significant Weight Gain, Metabolic Changes Associated with Antipsychotic Use in Children

Many children and adolescents who receive antipsychotic medications gain a significant amount of weight and experience metabolic changes, according to NIMH-funded research published October 28, 2009, in the *Journal of the American Medical Association*.

Science Update: <http://www.nimh.nih.gov/science-news/2009/significant-weight-gain-metabolic-changes-associated-with-antipsychotic-use-in-children.shtml>

NIMH: Telephone-based Depression Treatment Program Effective While Cost Efficient

Patients who receive structured, telephone-based support to manage their depression gain significant benefits with only moderate increases in health care costs compared to those who receive usual care, according to an NIMH-funded analysis published in the October 2009 issue of the *Archives of General Psychiatry*.

Science Update: <http://www.nimh.nih.gov/science-news/2009/telephone-based-depression-treatment-program-effective-while-cost-efficient.shtml>

NIMH: History of Childhood Maltreatment Linked to Higher Rates of Unemployment, Poverty—Outcomes of Abuse and Neglect Impose Significant Costs to Individual and Society

The long-term impacts of childhood maltreatment include higher rates of unemployment, poverty, and use of social services in adulthood, according to a new study by NIMH staff. The related losses in productivity and tax revenues, increased spending on social services, and potential transmission of abusive behaviors from one generation to the next, suggest major costs to society as well. The results were published online ahead of print on October 8, 2009, in the journal *Child Abuse and Neglect*.

Science Update: <http://www.nimh.nih.gov/science-news/2009/history-of-childhood-maltreatment-linked-to-higher-rates-of-unemployment-poverty.shtml>

HHS to Create a National Resource Center for Lesbian, Gay, Bisexual and Transgender Elders

Department of Health and Human Services (HHS) announced plans to establish the nation's first national resource center to assist communities across the country in their efforts to provide services and supports for older lesbian, gay, bisexual and transgender (LGBT) individuals. The new Resource Center for LGBT Elders will provide information, assistance and resources for both LGBT organizations and mainstream aging services providers at the state and community level to assist them in the development and provision of culturally sensitive supports and services. The LGBT Center will also be available to educate the LGBT community about the importance of planning ahead for future long term care needs.

Press Release: <http://www.hhs.gov/news/press/2009pres/10/20091021a.html>

Resources: Publications, Toolkits, Other Resources

New on NIMH Website

NIMH's Response to New Autism Prevalence Estimate

On October 5, 2009, researchers with the Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), and Massachusetts General Hospital published a new estimate of the prevalence of autism spectrum disorders (ASD) among children in the United States. Published online ahead of print in *Pediatrics*, the new estimate that roughly 1 in 90 U.S. children ages 3–17 were given an ASD diagnosis in 2007 is significantly higher than previous reports. But, this finding is consistent with previous reports that the prevalence—the number of people diagnosed with a particular condition at a given time—of ASD is increasing. Epidemiological studies and surveys from the early 1990s estimated that 1 in 1500 children had autism. In 2002, this figure increased to 1 in 150. <http://www.nimh.nih.gov/about/director/updates/2009/nimhs-response-to-new-autism-prevalence-estimate.shtml>

Recovery After an Initial Schizophrenia Episode (RAISE): A Research Project of the NIMH

RAISE is a large-scale, NIMH research project that seeks to fundamentally change the way schizophrenia is treated by developing and testing innovative and coordinated intervention approaches in the early stages of the illness when symptoms may be most responsive to treatment. RAISE is being funded by NIMH with additional support from the American Recovery and Reinvestment Act.

<http://www.nimh.nih.gov/health/topics/schizophrenia/raise/index.shtml>

NIH Radio Story: Cocaine Vaccine Shows Promise for Treating Addiction

Immunization with an experimental anti-cocaine vaccine resulted in a substantial reduction in cocaine use in 38 percent of vaccinated patients in a clinical trial supported by the National Institute on Drug Abuse (NIDA). The study is the first successful, placebo-controlled demonstration of a vaccine against an illicit drug of abuse.

Transcript and MP3 file: <http://www.nih.gov/news/radio/oct2009/20091023nidacocainevac.htm>

NIH Research Matters: Childhood Maltreatment Linked to Adulthood Economic Problems

Childhood maltreatment is known to affect both physical and mental health in adulthood. According to a new study, the long-term impacts of child maltreatment also include higher rates of unemployment, poverty and use of social services.

<http://www.nih.gov/researchmatters/october2009/10262009maltreatment.htm>

NIAAA Spectrum: NIAAA's First-ever Webzine

With engaging feature articles, short news updates, and colorful graphics, *NIAAA Spectrum* offers accessible and relevant information on the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the alcohol research field for a wide range of audiences. Each issue includes feature-length stories, news updates from the field, articles and photo essays, and an interview with an NIAAA staff member or alcohol researcher. *NIAAA Spectrum* is published three times a year.

<http://www.spectrum.niaaa.nih.gov/aboutus/default.aspx>

New Resources from SAMHSA

Practice Guidelines: Core Elements in Responding to Mental Health Crises

Developed by a diverse expert panel that included individuals with mental illnesses, providers, public officials, and advocates, the guidelines presented here define appropriate responses to mental health crises across various situations and environments.

<http://download.ncadi.samhsa.gov/ken/pdf/SMA09-4427.pdf>

New Research on Homelessness and Parenting

SAMHSA's Homelessness Resource Center released a Special Section of the *American Journal of Orthopsychiatry* focused on homelessness and parenting. The Special Section, guest edited by the Homelessness Resource Center, includes the latest research on parenting in the context of homelessness.

<http://homeless.samhsa.gov/Organization/Parenting-and-Homelessness---FREE-Access-to-Full-Articles-403.aspx>

National Child Traumatic Stress Network: Pathways to Partnership Tip Sheets

The Center for Mental Health Services funded National Child Traumatic Stress Network offers the practical resources to give organizations the tools they need to begin this process of effective engagement. The resources below can guide mental health providers and consumers to develop fruitful partnerships.

Frequently Asked Questions on Compensation for Family, Youth, and Consumer

Involvement: http://www.nctsn.org/nctsn_assets/pdfs/Pathways_CompensationTipsheet.pdf

Tips for Developing an Effective Advisory Board:

http://www.nctsn.org/nctsn_assets/pdfs/Pathways_AdvisoryBdTipsheet.pdf

Tips for Incorporating Peer-to-Peer Support Into Your Program:

http://www.nctsn.org/nctsn_assets/pdfs/Pathways_PeertoPeerTipsheet.pdf

SAMHSA: New Office of Applied Studies Reports

Residential Substance Abuse Treatment Facilities Offering Residential Beds for Clients' Children

In 2007, 515 residential substance abuse treatment facilities offered beds for both mothers and their children. Facilities with beds for clients' children were more likely than those without to offer motivational interviewing, trauma-related counseling, and anger management. Residential facilities that provided beds for clients' children were more likely than those that did not to use a sliding fee scale, to offer treatment at no charge to clients who could not afford to pay, or to accept Medicaid payments.

<http://oas.samhsa.gov/2k9/219/219ResChildBed2k9.cfm>

Outpatient Substance Abuse Treatment Facilities that Provide Child Care for Their Clients' Children

In 2007, 7 percent of outpatient treatment facilities also offered child care services for their clients' children. Outpatient-only facilities that provided child care for clients' children were more likely than facilities that did not to use a sliding fee scale, to offer treatment at no charge to clients who cannot afford to pay, or to accept Medicaid payments. Outpatient-only facilities that offered child care were more likely than those that did not to provide trauma-related counseling and anger management counseling.

<http://oas.samhsa.gov/2k9/220/220OutPtChildcare2k9.cfm>

Injection Drug Use and Related Risk Behavior

Combined 2006 to 2008 data indicate that an annual average of 425,000 persons aged 12 or older used a needle to inject heroin, cocaine, methamphetamine, or other stimulants during the past year. 13.0 percent of past year injection drug users had used a needle that they knew or suspected someone else had used before them the last time they used a needle to inject drugs, and less than one third of them cleaned the needle with bleach prior to their last injection.

<http://oas.samhsa.gov/2k9/139/139IDU.cfm>

AHRQ: New Evidence Report Shows Consumer Health Informatics Applications Can Improve Health Care Processes

The Agency for Health Research and Quality (AHRQ) released a new evidence report, *Impact of Consumer Health Informatics Applications*, which found that consumer health informatics applications can help improve health care processes, such as medication adherence. These applications are defined as patient-focused electronic tools to support health improvement, process outcomes, and patient-centered care. The benefits of using such applications apply to a variety of clinical conditions, including cancer, smoking, diabetes mellitus, physical activity, and mental disorders.

<http://www.ahrq.gov/clinic/tp/chiapptp.htm>

AHRQ Research Summaries

Mental Illness was the Most Costly Condition between 1996 and 2006

The number of Americans under care for depression and other mental illnesses nearly doubled between 1996 and 2006, and the overall cost of treating them jumped by nearly two-thirds, according to the Agency for Healthcare Research and Quality (AHRQ). The Agency's recent data analysis revealed that the number of patients treated for mental disorders, including depression and bipolar disease, increased from 19 million to 36 million. The overall treatment costs for mental disorders rose from \$35 billion (in 2006 dollars) to nearly \$58 billion, making it the costliest medical condition between 1996 and 2006.

<http://www.ahrq.gov/research/nov09/1109RA21.htm>

Nearly Half of Patients With Depression Drop Out of Treatment in a Public Clinic Within 12 Months

More than 20 million people in the United States suffer from depression, and about 3 out of 10 people get better with the first antidepressant they try. However, a new study finds that nearly half the 179 patients receiving guideline-based treatment for depression in 4 Texas public health clinics discontinued treatment within 12 months. Researchers studied data on adult patients who were diagnosed with major depressive disorder (MDD) to determine dropout predictors. Patients who had fewer few side effects at baseline and younger patients tended to drop out more often in the first 6 months of treatment. In fact, the likelihood of abandoning treatment decreased 26 percent with every 5-year increase in age. At the 12-month mark, dropout predictors included younger age, negative attitudes about psychiatric medications, and higher perceived physical functioning. Additionally, making more frequent monthly visits to the clinic was associated with higher dropout rates.

<http://www.ahrq.gov/research/nov09/1109RA16.htm>

Doctors and Nurses in Teaching Hospitals Report Widespread Job Stress and Sleep Deprivation
Despite recently mandated reductions in medical student workload hours, a new study reveals the widespread presence of job stress and sleep deprivation among physicians and nurses in teaching hospitals. When asked to keep a running account of work activity, patient load, and work stress using handheld computers, physicians reported much higher levels of work stress than nurses.

<http://www.ahrq.gov/research/nov09/1109RA18.htm>

Morbidity and Mortality Weekly Report: Overdose Deaths Involving Prescription Opioids Among Medicaid Enrollees – Washington (State), 2004-2007

This study highlights the prominence of methadone in prescription opioid deaths and indicates that Medicaid enrollees may be a high-risk group. During 1999–2006, the number of poisoning deaths in the United States nearly doubled, largely as a result of deaths involving prescription opioid painkillers. These increases in drug overdose rates paralleled a nearly four-fold increase in the use of prescription opioids during this period nationally. In 2006, the rate of poisoning involving opioid painkillers in Washington was significantly higher than the national rate.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5842a1.htm>

OJJDP Report Highlights Benefits of Tribal Youth Program

In describing the activities of five program sites, *Strengthening Indian Country Through Tribal Youth Programs* examines how the Office of Juvenile Justice and Delinquency Prevention's (OJJDP) Tribal Youth Program is improving the lives of tribal youth and strengthening families. The programs featured in this report build a sense of attachment to heritage, promote belonging, support personal development, and provide exposure to career-related skills

<http://www.aypf.org/forumbriefs/2009/documents/TYPReportfinal.pdf>

National Center for PTSD Updates

New Launch of PTSD 101

PTSD 101 is a Web-based PTSD/trauma-related curriculum that offers a range of relevant and timely topics with the goal of developing or enhancing practitioner knowledge of trauma and its treatment. CE Credits are now available for most courses.

<http://www.ptsd.va.gov/professional/ptsd101/ptsd-101.asp>

Research on Aging Military Veterans: Lifespan Implications of Military Service

The PTSD Research Quarterly newsletter contains a review article written by guest experts on a specific topic related to PTSD. The article has a selective bibliography with abstracts and a supplementary list of annotated citations. The latest issue features research on aging military veterans.

<http://www.ptsd.va.gov/professional/newsletters/research-quarterly/v20n3.pdf>

Calendar of Events

SSA Webinar: Social Security for Wounded Warriors

November 4, 2009 2:00 pm EST

During the webinar, you can learn more about Social Security benefit programs and the expedited processing of disability claims available to our nation's Wounded Warriors. The expedited process is used for military service members who become disabled while on active military service on or after October 1, 2001, regardless of where the disability occurs.

<http://www.socialsecurity.gov/survey/woundedwarriorsrsvp.htm>

NIDA CHAT DAY 2009

November 10, 2009

Registration for NIDA's annual Drug Facts Chat Day is now closed due to full capacity. Schools were registered on a first come first serve basis. For unregistered schools, Drug Facts Chat Day can still provide your students with a terrific learning experience. Schools will have the opportunity to observe NIDA scientists answer student's questions from across the country. The chat will also include factoids and quizzes about drug abuse and addiction.

<http://www.nida.nih.gov/chat/>

U.S. ED's OSDFS and HHS' HRSA: Bullying Prevention Training Webcast

November 10, 2009 2:00 PM EST

The U.S. Department of Education's Office of Safe and Drug-Free Schools and the U.S. Department of Health and Human Services' Health Resources and Services Administration (HRSA) are teaming up to provide high-quality, research-based bullying prevention resources and training. Topics to be covered in the Webcast: 1) Bullying 101 – the statistics and research you need to communicate effectively about the importance of bullying prevention; 2) How to Use HRSA's Stop Bullying Now! (SBN!) Campaign Resources; and 3) How States, Schools and Students Have Utilized and Adapted the Stop Bullying Now! Campaign. Get a head start on the training by reviewing the SBN! Campaign Web site: www.StopBullyingNow.hrsa.gov

Register at: <http://www.mchcom.com/liveWebcastDetail.asp?leid=408>

Webinar-Introduction to Shared Decision Making in Mental Health

November 12, 2009, 2:00 PM EST

As part of its ongoing effort to promote recovery and consumer choice SAMHSA will host a webinar introducing shared decision making. The teleconference is open to all interested persons including consumers, providers, family members, and other stakeholders. This Webinar is the first of a three-part series, which will include follow-up presentations in early 2010 oriented to service providers and people who use mental health services. All presentations will be archived and available on SAMHSA's shared decision making website:

<http://mentalhealth.samhsa.gov/consumersurvivor/shared.asp>

Participant access information:

Conference number: 9091473

Passcode: 7011561

https://www.mymeetings.com/emeet/rsvp/index.jsp?customHeader=mymeetings&Conference_ID=9091473&passcode=7011561

Identifying and Responding to Elder Abuse

November 18-19, 2009, San Jose, California

The Department of Justice's Office for Victims of Crime is offering this 2-day training workshop for victim service providers. Participants will learn information and skills to identify, respond to, and prevent elder abuse. The curriculum covers topics such as the types of elder abuse and the settings in which abuse might be found, the perpetrators and prevalence of elder abuse, and the intervention role of the victim service professional.

<https://www.sei2003.com/OVCTTAC2009/ElderAbuse.asp>

Elimination of Disparities in Mental Health Care: At the Organizational and Systems Level

November 19, 2009, 1:00-2:30PM ET

The elimination of disparities in mental health care requires changes at multiple levels of service delivery. It is the decisions at the policy, executive and administrative levels that provide the vision, mission, and infrastructure to address the elimination of disparities. The Center for Mental Health Services funded National Technical Assistance Center for Children's Mental Health is sponsoring this call which will offer examples of successful work being done by state and local entities to address the availability, accessibility, and affordability of services as strategies to address disparities.

<http://gucchd.georgetown.edu/training/78174.html>

The Second Annual Trauma Spectrum Disorders Conference: A Scientific Conference on the Impact of Military Service on Family and Caregivers.

December 10, 2009, Bethesda, Maryland

The Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury, National Institutes of Health, Department of Veterans Affairs, and other Federal Partners present the second annual collaborative scientific conference examining recent research on trauma spectrum disorders (TSD). This year's conference will focus on the impact of TSD on military and veteran families and caregivers across deployment, homecoming, and reintegration. The conference will examine the needs of families and caregivers in support of military and veterans with TSD, factors related to family functioning and reintegration, and effective approaches that facilitate treatment of trauma disorders and services to families and caregivers, paying particular attention to gender and health disparities. Next steps will be developed for addressing research concerns identified at the conference.

<http://www.dcoe.health.mil/Events.aspx>

Calls for Public Input

NIH Announcement: Consumer Health Information Request for Information (RFI)

The National Institutes of Health (NIH) Office of Communication and Public Liaison and the NIH Director's Council of Public Representatives have partnered to develop a Consumer Health Information RFI in response to a Directive by President Barack Obama to all Federal agencies calling for greater transparency, public participation, and collaboration.

In conjunction with the NIH goals for public input and effective dissemination of science-based health resources and information to the public, the RFI will provide insight and better understanding of the health information needs and information-seeking behaviors of NIH health consumer audiences. Information gathered will assist the agency in developing and disseminating health, medical, and scientific information to a broader variety of audiences.

The RFI may be completed online in English or downloaded from the Web site in Spanish.

Response deadline: December 30, 2009

<http://nihhealthinfoRFI.nih.gov>

Request for Nominations for National Advisory Council for Healthcare Research and Quality

The Agency for Health, Research and Quality (AHRQ) is seeking nominations for seven new public members for its National Advisory Council for Healthcare Research and Quality, which advises the Secretary of HHS and the Director of AHRQ on matters related to actions of the Agency to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. The 21-member Council meets in the Washington, DC, metropolitan area, generally in Rockville, MD, approximately three times a year. Members generally serve 3-year terms, and new members will start their service in the spring of 2010. AHRQ is seeking individuals who are distinguished in the conduct of research, demonstration projects, and evaluations with respect to health care; in the field of health care quality research or health care improvement; in the practice of medicine or other health professions; in the private health care sector (including health plans, providers, purchasers) or administrators of health care delivery systems; in the fields of health care economics, information systems, law, ethics, business, or public policy; and in representing the interests of patients and consumers of health care.

Nominations are due November 20, 2009.

<http://edocket.access.gpo.gov/2009/E9-24306.htm>

Public Comment Solicited on the NCCAM Strategic Plan: 2010

As part of its strategic planning process, the National Center for Complementary and Alternative Medicine (NCCAM), part of the National Institutes of Health within the US Department of Health and Human Services, is seeking broad input from many communities, including researchers, health care providers, CAM providers, educators, and the public. An initial step in the planning process is seeking stakeholder comments on three "big picture" topics: 1) Mission; 2) Priority setting; and 3) Information and communication. The three papers posted are intended to provide some background and context for considering these issues. You are invited to send your thoughts on a series of issues included at the conclusion of each paper.

Comments accepted through November 19, 2009.

<http://plan.nccam.nih.gov/>

Clinical Research Participation News

NIMH: Anxious Depression & AZD2327

If you (or someone you know) have been diagnosed with major depression and have anxiety symptoms, you may be able to participate in an NIMH research study that seeks to decrease symptoms of depression and understand the causes of anxious depression. Anxiety symptoms may include tension, worry, apprehension, restlessness, or loss of appetite.

This study evaluates the effectiveness and safety of the study drug AZD2327, in the treatment of major depression and anxiety symptoms. This drug has a different mechanism of action from commonly used SSRI's (selective serotonin reuptake inhibitors) for anxiety and depression. This is a 12 week-outpatient study including an inpatient stay of 7 days in Bethesda, MD.

If you are 18-65 years of age and have been diagnosed with major depression and have anxiety symptoms, you may be eligible for this clinical trial. There is the chance of receiving placebo in this study.

After completion of the study, NIMH will provide short-term follow-up care, and then you will return to the care of your own provider. In addition, all research participation is without cost and we will cover all transportation costs from anywhere in the United States.

To find out if you qualify or for more information, please call 1-877-MIND-NIH (1-877-646-3644) or email us at moodresearch@mail.nih.gov . (TTY: 1-866-411-1010) Atendemos pacientes de habla hispana. <http://patientinfo.nimh.nih.gov>

Funding Information

NIH: Building Sustainable Community-Linked Infrastructure to Enable Health Science Research FOA: Clarification of Eligibility as Primary Applicant

The purpose of this Notice is to clarify what institutions are eligible to submit applications as the primary applicant and recipient of an award for the RFA-OD-09-010, Recovery Act Limited Competition: Building Sustainable Community-Linked Infrastructure to Enable Health Science Research (RC4). Only Academic Health Centers may serve as the primary applicant. Although multiple Principal Investigators are permitted, the primary award will go to a single Academic Health Center. The intent of this FOA is to encourage Academic Health Centers to engage with community entities to build or strengthen collaborative partnerships with those community entities in order to produce community health research infrastructure. Our ultimate goal is the facilitation of community health research through academic-community partnerships.

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-10-006.html>

SAMHSA: Accepting Applications for More than \$144 Million in Grants for Child Mental Health Initiative Programs

SAMHSA is accepting applications for up to \$144 million in grants for Cooperative Agreements for Comprehensive Community Mental Health Services for Children and Their Families. The purpose of the cooperative agreements is to develop and expand systems of care for children and youth with serious emotional disturbances and their families. It is expected that up to 16 grants will be awarded for cooperative agreements lasting up to six years. The agreements will support integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care.

APPLICATION DUE DATE: December 8, 2009

<http://www.samhsa.gov/Grants/2010/SM-10-005.aspx>

SAMHSA: Accepting Applications for \$8 Million in Statewide Family Network Grants to Strengthen State Capacity and Infrastructure

SAMHSA is accepting applications for fiscal year 2010 grants for the Statewide Family Network Program. The purpose of this program is to enhance State capacity and infrastructure and to be more oriented to the needs of children and adolescents with serious emotional disturbances and their families. SAMHSA expects that up to \$8 million will be available to fund 42 grants of approximately \$60,000 per year for up to three years. Up to six grantees will receive an additional \$10,000 per year for projects that include a youth leadership component. Annual continuation awards will depend on the availability of funds and the grantee's progress in meeting project goals and objectives.

APPLICATION DUE DATE: November 25, 2009

http://www.samhsa.gov/Grants/2010/sm_10_003.aspx

Programmatic Funding

CDC Research Grants for Preventing Violence and Violence –Related Injury (R01)

<http://www07.grants.gov/search/search.do;jsessionid=ptj2KrPPV6Gh69yJfLpnnzFpMJ1jNzJZvzlm1ImkhmHLPbyJbz4W!1313029350?oppId=50012&mode=VIEW>

Research Funding Opportunities

Selected NIH Requests for Applications (RFAs)

None.

Selected NIH Program Announcements (PAs)

Accelerating the Pace of Drug Abuse Research Using Existing Epidemiology, Prevention, and Treatment Research Data (R01)

<http://grants.nih.gov/grants/guide/pa-files/PAR-10-018.html>

NIH Blueprint for Neuroscience Research Competitive Revisions for Studies Focused on Neuropathic Pain or Neural Plasticity to Promote Collaborative Pain Research (R01)

<http://grants.nih.gov/grants/guide/pa-files/PAR-09-264.html>

Bioengineering Nanotechnology Initiative (SBIR [R43/44])

<http://grants.nih.gov/grants/guide/pa-files/PA-09-267.html>

Drug Discovery for Nervous System Disorders

<http://grants.nih.gov/grants/guide/pa-files/PAR-10-001.html> (R01)

<http://grants.nih.gov/grants/guide/pa-files/PAR-10-002.html> (R21)

Bioengineering Research Grants (BRG) (R01)

<http://grants.nih.gov/grants/guide/pa-files/PA-10-009.html>

Exploratory/Developmental Bioengineering Research Grants (EBRG) [R21]

<http://grants.nih.gov/grants/guide/pa-files/PA-10-010.html>



**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health**

The **Outreach Partnership Program** is a nationwide outreach initiative of the National Institute of Mental Health (NIMH) with support from the National Institute on Drug Abuse (NIDA) and in cooperation with the Substance Abuse and Mental Health Services Administration (SAMHSA) 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 on the NIMH Outreach 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/health/outreach/partnership-program/subscribe-to-the-update.shtml>

The information provided in the NIMH Update is intended for use by the 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.