



PERSONNEL AND
READINESS

OFFICE OF THE UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

JAN 29 2016

The Honorable John McCain
Chairman
Committee on Armed Services
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

The enclosed final report responds to Senate Report 113-85, page 189, accompanying S. 1429, the Department of Defense Appropriations Bill, 2014, which requests the Assistant Secretary of Defense for Health Affairs to provide a report to the congressional defense committees on expenditure and obligation data of the \$60 million (M) in funding added by Congress above the fiscal year 2014 budget request for research into treatment and prevention of traumatic brain injuries (TBI) and improved psychological health (PH), including information on agreements made with other government agencies. Because the additional \$60M was embedded in the TBI/PH medical research appropriation, this report provides information on all TBI/PH medical research funding.

The total fiscal year (FY) 2014 Defense Health Program PH/TBI Congressional Special Interest expenditure is \$119,102,567 (intramural and extramural). Research projects focused on understudied PH research (e.g., military-related grief and guilt), pilot programs under section 704 of the National Defense Authorization Act (NDAA) for FY 2014 (P.L. 113-66) and section 706 of NDAA for FY 2013 (P.L. 112-239), and neurosensory effect of TBI.

In addition, this report addresses Section 5 of the President's August 31, 2012, Executive Order 13625; "Improving Access to Mental Health Services for Veterans, Service Members, and Military Families," which called for the development of a National Research Action Plan to improve coordination among agency efforts working toward improving prevention and treatment of posttraumatic stress disorder, TBI, and related PH issues. This section responds to the Senate report's request for information on agreements made with other government agencies.

Thank you for your interest in the health and well-being of our Service members, veterans, and their families. A similar letter is being sent to the other congressional defense committees.

Sincerely,

Brad Carson
Acting Principal Deputy

Enclosure:
As stated

cc:
The Honorable Jack Reed
Ranking Member



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4000 DEFENSE PENTAGON
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JAN 29 2016

The Honorable William M. "Mac" Thornberry
Chairman
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

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cc:
The Honorable Adam Smith
Ranking Member



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4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

JAN 29 2016

The Honorable Thad Cochran
Chairman
Subcommittee on Defense
Committee on Appropriations
United States Senate
Washington, DC 20510

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As stated

cc:
The Honorable Richard J. Durbin
Vice Chairman



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4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

JAN 29 2016

The Honorable Rodney P. Frelinghuysen
Chairman
Subcommittee on Defense
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

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Brad Carson
Acting Principal Deputy

Enclosure:
As stated

cc:
The Honorable Peter J. Visclosky
Ranking Member

**REPORT TO THE CONGRESSIONAL DEFENSE COMMITTEES IN RESPONSE TO
SENATE REPORT 113-85, PAGES 189-190, ACCOMPANYING S. 1429, THE
DEPARTMENT OF DEFENSE APPROPRIATIONS BILL, 2014**

“TRAUMATIC BRAIN INJURY [TBI]/PSYCHOLOGICAL HEALTH [PH]”



**SUBMITTED BY THE OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
FOR HEALTH AFFAIRS**

**SUPPORTED BY THE U.S. ARMY MEDICAL RESEARCH AND MATERIEL
COMMAND, CONGRESSIONALLY DIRECTED MEDICAL
RESEARCH PROGRAMS**

The estimated cost of this report or study for the Department of Defense is approximately \$4,290 for the 2014 Fiscal Year. This includes \$3,750 in expenses and \$540 in DoD labor.

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TABLE OF CONTENTS

| | | |
|----------------|--|-----------|
| 1.0 | PURPOSE | 3 |
| 2.0 | BACKGROUND | 3 |
| 3.0 | FY 2014 DEFENSE HEALTH PROGRAM (DHP) PH/TBI CONGRESSIONAL SPECIAL INTEREST (CSI) EXPENDITURES | 4 |
| 3.1 | SUPPORT FOR ONGOING RESEARCH | 4 |
| 3.2 | SUPPORT FOR NEW RESEARCH | 6 |
| 3.2.1 | FY 2014 USAMRMC Broad Agency Announcement for Extramural Medical Research | 6 |
| 3.2.2 | FY 2014 Program Announcements | 8 |
| 3.2.2.1 | MOMRP/JPC-5 | 8 |
| a. | Psychological Health Research Award | 8 |
| b. | Investigational Treatments for TBI and PTSD Clinical Trial Award (ITTPCTA)... | 9 |
| c. | Community Partners in Mental Health Research Award (CPMHRA) | 10 |
| 3.2.2.2 | CRM RP/JPC-8 | 10 |
| a. | Neurosensory and Rehabilitation Research Award (NSRRA) | 10 |
| 4.0 | COLLABORATIVE EFFORTS WITH OTHER FEDERAL AGENCIES | 12 |

1.0 PURPOSE

In January 2014, the Department of Defense (DoD) Appropriations Act, 2014 (Public Law 113-76), with further detail in the House explanatory statement printed on Congressional Record, 113th Congress, page H782, appropriated \$125 million (M) for the Peer-Reviewed Traumatic Brain Injury (TBI) and Psychological Health (PH) Research Program.

This report is in response to the Senate Report 113-85, page 189, accompanying S. 1429, the DoD Appropriations Bill, 2014, which request the Assistant Secretary of Defense for Health Affairs to provide a report to the congressional defense committees on expenditure and obligation data of the \$60,000,000 in congressional special interest (CSI) funding added by Congress above the fiscal year (FY) 2014 budget request for research into treatment and prevention of TBIs and improved PH, including information on agreements made with other government agencies.

In addition, this report addresses Section 5 of the President's August 31, 2012, Executive Order (EO); "Improving Access to Mental Health Services for Veterans, Service Members, and Military Families," which called for the development of a National Research Action Plan (NRAP) to improve coordination among agency efforts working toward improving prevention and treatment of posttraumatic stress disorder (PTSD), TBI, and related PH issues.

2.0 BACKGROUND

Although TBI has been described as the signature injury of the Iraq and Afghanistan wars, its relationship with PH issues and long-term health consequences are largely unknown. Toward the goal of developing improved preventive and management strategies for TBI and associated PH issues in both the military and civilian populations, the DoD currently supports research projects that are relevant to the prevention, detection, diagnosis, treatment, and rehabilitation of TBI and PH issues.

As directed by the Office of the Assistant Secretary of Defense for Health Affairs (OASD(HA)), the Defense Health Agency, Research, Development and Acquisition (DHA RDA) Directorate manages and executes the Defense Health Program (DHP) Research, Development, Test, and Evaluation appropriation. The U.S. Army Medical Research and Materiel Command (USAMRMC) Congressionally Directed Medical Research Programs provides execution management support aligned with specific DHA RDA Directorate research program areas, including the Military Operational Medicine Research Program (MOMRP)/Joint Program Committee (JPC)-5, Combat Casualty Care Research Program/JPC-6, and the Clinical and Rehabilitative Medicine Research Program (CRM RP)/JPC-8.

This report conveys the FY 2014 DHP PH/TBI CSI funding expenditures as well as information on collaborative efforts initiated by the DoD, Department of Veterans Affairs (VA), and Department of Health and Human Services (HHS) in FY 2014.

3.0 FY 2014 DHP PH/TBI CSI EXPENDITURES

The total FY 2014 DHP PH/TBI CSI expenditure is \$119,102,567 (intramural and extramural).

3.1 Support for Ongoing Research

Table 1 summarizes the ongoing research efforts that were funded with FY 2014 DHP PH/TBI CSI funds.

Table 1. Ongoing efforts funded with FY 2014 DHP PH/TBI CSI

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|---|--|-----------------|
| JPC-5 | Evaluation of the Safety and Efficacy of the Fatty Acid Amide Hydrolase Inhibitor in Patients with PTSD | Uniformed Services University of the Health Sciences (USUHS) | \$1,956,000 |
| JPC-5 | Spin, Unit Climate and Aggression, New Term, Long Term and Reciprocal Predictors of Violence among Workers in Military Settings | University of Texas, San Antonio | \$49,110 |
| JPC-5 | STRONG STAR Assessment Core Infrastructure | VA Boston Healthcare System | \$250,000 |
| JPC-5 | Under Body Blast/Warrior Injury Assessment Manikin Project | Army Research Laboratory/Research, Development and Engineering Command | \$328,000 |
| JPC-5 | Changing Family Roles Across the Deployment Cycle | Purdue University | \$631,737 |
| JPC-5 | Biomechanical Modeling and Measurement of Blast Injury and Hearing Protection Mechanisms | University of Oklahoma | \$361,531 |
| JPC-5 | HomeFront Strong: Building Resiliency in Military Families | University of Michigan | \$959,372 |
| JPC-5 | Comparing Web, Group and Telehealth Formats of a Military Parenting Program | University of Minnesota | \$812,030 |
| JPC-5 | Intervening to Reduce Suicide Risk in Veterans with Substance Abuse Disorders | University of Michigan | \$3,054,208 |

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|--|---|-----------------|
| JPC-5 | The STRONG STAR Multidisciplinary PTSD Research Consortium | Duke University | \$261,645 |
| JPC-5 | Military Suicide Research Consortium (MSRC) | Florida State University | \$306,218 |
| JPC-5 | Millennium Cohort Study | Naval Health Research Center (NHRC) | \$1,100,000 |
| JPC-5 | Occupational Standard Development for Multiple Exposures to Blast | USUHS | \$30,000 |
| JPC-5 | The PTSD Practitioner Registry: An Innovative Tracking, Dissemination, and Support Tool for Providers in Military and Nonmilitary Settings | Walter Reed Army Institute of Research (WRAIR) | \$48,462 |
| JPC-5 | Biomarkers for PTSD Through Systems Biology | U.S. Army Center for Environmental Health Research Institute of Systems Biology | \$1,383,182 |
| JPC-6 | High Definition Fiber Tracking Biological Diagnosis of TBI | University of Pittsburgh | \$3,000,000 |
| JPC-6 | Portable Neuromodulation Stimulator, University of Wisconsin IGCE Support | University of Wisconsin | \$500,000 |
| JPC-6 | The Major Extremity Trauma Research Consortium | Johns Hopkins University | \$3,926,245 |
| JPC-6 | Role of micro RNA in mTBI and PTSD: Identification of Biomarkers and Therapeutic Strategies | USUHS | \$2,274,000 |
| JPC-6 | Concussion Definition | Brain Trauma Foundation | \$279,000 |
| JPC-6 | Mission Connect Mild TBI Translational Research Consortium | Virginia Polytechnic Institute and State University | \$155,724 |
| JPC-6 | Uncovering Latent Deficiencies due to mTBI by Using Normobaric Hypoxic Stress | U.S. Army Aeromedical Research Laboratory | \$521,000 |
| | | National Intrepid Center of Excellence | \$522,000 |
| JPC-6 | Enhancing the Detection and Management of mTBI in Military Personnel using the Combat Casualty Care App | Cleveland Clinic | \$70,042 |

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|--|--|-----------------|
| JPC-6 | Analysis of Alternatives | Booz Allen Hamilton | \$250,000 |
| JPC-6 | Strategic Planning Support | Booz Allen Hamilton | \$750,000 |
| JPC-6 | Eye-Sync Clinical Validation | Brain Trauma Foundation | \$2,530,000 |
| JPC-6 | Eyetrac Application Clinical Trial | Brain Trauma Foundation | \$59,000 |
| JPC-6 | Protocol to Expand Access to Brain Specimens | USUHS | \$2,217,000 |
| JPC-6 | Partnership to Develop Tau Prion Therapeutics for Chronic Traumatic Encephalopathy | University of California, San Francisco USUHS | \$2,800,000 |

3.2 Support for New Research

Research projects addressing military-relevant TBI and PH issues were solicited via the FY 2014 USAMRMC Broad Agency Announcement (BAA) for Extramural Medical Research and by FY 2014 Program Announcements (PAs) for the MOMRP/JPC-5 and the CRM RP/JPC-8.

3.2.1 FY 2014 USAMRMC Broad Agency Announcement for Extramural Medical Research

The FY 2014 USAMRMC BAA for Extramural Medical Research solicited research applications relevant to research areas of interest with the potential to benefit and inform both military and civilian medical practice and knowledge. Extramural investigators and DoD investigators collaborating with extramural organizations were eligible to apply. Applications selected for FY 2014 DHP PH/TBI CSI funding are summarized in Table 2, below.

Table 2. FY 2014 USAMRMC BAA for Extramural Medical Research Funded Applications

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|--|--|-----------------|
| JPC-5 | Trauma Brain Triage Tool: Multi-modal Early Detection Interactive Classifier | U.S. Army Research Institute of Environmental Medicine | \$500,000 |

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|--|---|-----------------|
| JPC-5 | Inflammation, Oxidative Stress, and Neuroprotective Mechanism in the Pathophysiology of PTSD in an Animal Model: Blueberries and Exercise as Possible Therapeutic Approaches | Louisiana State University and A&M College | \$225,000 |
| JPC-5 | Neurogenic Tremors Training for Stress and PTSD: A Controlled Clinical Trial | Phoenix VA Health Care System | \$494,859 |
| JPC-5 | Primary Blast Injury Criteria for Animal/Human TBI Models Using Field Validated Shock Tubes | New Jersey Institute of Technology | \$1,065,032 |
| JPC-5 | Demonstrating the Efficacy of Group Prolonged Exposure Treatment of PTSD in OEF/OIF/OND Veterans | New Mexico VA Health Care System | \$1,568,196 |
| JPC-5 | A Nonpharmacologic Method for Enhancing Sleep in PTSD | McLean Hospital | \$3,823,700 |
| JPC-5 | Internet-Delivery of Prolonged Exposure Therapy for Combat-Related PTSD | University of Pennsylvania | \$333,299 |
| JPC-5 | Historical Blast Data Recovery and Knowledge Base | L-3 Applied Technologies | \$4,000,008 |
| JPC-5 | Investigating Resilience Training in Military Spouses | University of Miami | \$1,253,905 |
| JPC-5 | Prevention of Alcohol Related Incidents in the U.S. Air Force | University of Tennessee Health Science Center | \$3,772,062 |
| JPC-5 | A POC Clinical Trial for PTSD with a First-in-Class Vasopressin 1a Receptor Antagonist | Azevan Pharmaceuticals, Inc. | \$1,000,000 |
| JPC-6 | Brain Trauma Evidence-Based Consortium | Stanford University/ Brain Trauma Foundation | \$2,610,000 |
| JPC-6 | Federal Interagency Traumatic Brain Injury Research (FITBIR) Operation and Management Costs | National Institute of Neurological Disorders and Stroke | \$2,100,000 |
| JPC-5/6 | Army-Navy Head Acceleration Data Digitization/Entry into FITBIR | US Army Aeromedical Research Laboratory | \$2,200,000 |

| Alignment | Title | Organization | FY 2014 Funding |
|-----------|---|--|-----------------|
| JPC-6 | LATBI | Banyan/Philips | \$2,356,958 |
| JPC-6 | Transforming Research and Clinical Knowledge in TBI Enhancement | University of Pittsburgh | \$2,500,000 |
| JPC-6 | NCAA-DoD Grand Alliance | Indiana University Medical School | \$12,847,755 |
| JPC-6 | Omega-3 Fatty Acids - A Nutraceutical Currently in Widespread Use by Our Troops, Achieving Proof of Concept for a Safe Product to Prevent TBI in Our Troops | WRAIR | \$804,000 |
| JPC-6 | Team Approach to the Prevention and Treatment of Post-Traumatic Epilepsy | Citizens United for Research in Epilepsy | \$2,000,000 |

3.2.2 FY 2014 Program Announcements

The following sections describe the PAs and awards supported by the FY 2014 DHP PH/TBI CSI funds by research program areas.

3.2.2.1 MOMRP/JPC-5

a. Psychological Health Research Award

The FY 2014 MOMRP Psychological Health Research Award PA solicited applications addressing one or more of the following specific PH research topic areas that have been historically understudied : (1) military-related grief, guilt, or loss issues, and/or anger, rage or aggression issues; (2) interdisciplinary and comprehensive prevention and life-skills training strategies to improve brain health; (3) military-related psychosocial/psychological health challenges unique to persons of non-traditional sexual orientation [i.e., lesbian, gay, bisexual, and transgender]; and (4) sexual assault and trauma related issues in a military context.

The MOMRP/JPC-5 allotted \$13,239,878 of the FY 2014 DHP PH/TBI CSI appropriation to fund 6 Psychological Health Research Award applications (Table 3).

Table 3. FY 2014 MOMRP Psychological Health Research Award PA Funded Applications

| Title | Organization | FY 2014 Funding |
|---|---|-----------------|
| Improving Acceptance, Integration, and Health Among LGBT Service Members | University of Southern California | \$583,259 |
| | University of Southern California | \$857,387 |
| | University of Southern California | \$397,533 |
| Effects of Interpersonal Challenges, Social Support, and Transitions on the Mental Health and Readiness of Lesbian, Gay and Bisexual Military Personnel | Claremont Graduate University | \$987,911 |
| Strength at Home Couples Program to Prevent Military Partner Violence | Boston VA Research Institute, Inc. (BVARI) | \$609,933 |
| Sexual Assault Prevention for Men in the Military | Rhode Island Hospital | \$2,686,278 |
| Trauma-Informed Guilt Reduction Intervention | Veterans Medical Research Foundation, San Diego | \$1,989,869 |
| | Brown University | \$935,978 |
| Great-SF (Grief-focused Resilience Activities and Training for Surviving Families) An Online Selective Intervention for Bereaved Military Families | Henry M. Jackson Foundation | \$1,679,814 |
| | Columbia University | \$2,511,916 |

b. Investigational Treatments for TBI and PTSD Clinical Trial Award (ITTPCTA)

The FY 2014 PH/TBIRP ITTPCTA PA solicited applications addressing Section 704 of the National Defense Authorization Act (NDAA) for FY 2014, which directs a pilot program and establishment of a process for randomized placebo-controlled clinical trials of investigational treatments (including diagnostic testing) of TBI and PTSD received by members of the Armed Forces in health care facilities other than military treatment facilities.

The OASD(HA) allotted \$4,766,675 of the FY 2014 DHP PH/TBI CSI appropriation to fund two ITTPCTA applications (Table 4).

Table 4. FY 2014 PH/TBI Research Program ITTPCTA PA Funded Applications

| Title | Organization | FY 2014 Funding |
|--|----------------------------|------------------------|
| Brief Treatment for PTSD: Enhancing Treatment Engagement and Retention | BVARI | \$2,269,882 |
| The Efficacy of 90-Minute vs 60-Minute Sessions of Prolonged Exposure for PTSD: A Randomized Control Trial in Active Duty Military Personnel | University of Pennsylvania | \$2,496,793 |

c. Community Partners in Mental Health Research Award (CPMHRA)

The FY 2014 PH/TBIRP CPMHRA PA solicited applications addressing section 706 of the NDAA for FY 2013 by supporting research on the causes, development, and innovative treatment of mental health, substance use disorders, TBI, and suicide prevention in members of the National Guard and Reserves, their family members, and their caregivers.

The OASD(HA) allotted \$4,685,372 of the FY 2014 DHP PH/TBI CSI appropriation to fund two CPMHRA applications (Table 5).

Table 5. FY 2014 PH/TBIRP CPMHRA PA Funded Applications

| Title | Organization | FY 2014 Funding |
|--|---------------------|------------------------|
| Mental Health Disorders, Suicide Risk, and Treatment Seeking Among Formerly Deployed National Guard and Reserve Service Member Seen in Non-VA Facilities | Geisinger Clinic | \$2,270,953 |
| Technologies for Assessing Behavioral and Cognitive Markers of Suicide Risk | University of Utah | \$2,414,419 |

3.2.2.2 CRM RP/JPC-8

a. Neurosensory and Rehabilitation Research Award (NSRRA)

The FY 2014 CRM RP NSRRA PA solicited both applied (preclinical) research and clinical trials addressing TBI within specific focus areas of pain management, hearing loss/dysfunction, balance disorders, tinnitus, vision, or physical rehabilitation.

The CRM RP/JPC-8 allotted \$19,715,333 of FY 2014 PH/TBI DHP CSI appropriation to fund 14 NSRRA applications (Table 6).

Table 6. FY 2014 CRM RP NSRRA PA Funded Applications

| Title | Organization | FY 2014 Funding |
|--|---|------------------------|
| Microglia Contribute to Ongoing Pain Caused by TBI | University of California, Irvine | \$1,498,566 |
| Automated Comprehensive Evaluation of mTBI Visual Dysfunction | Geneva Foundation | \$858,048 |
| Diagnosing Contributions of Sensory and Cognitive Deficits to Hearing Dysfunction in Blast-Exposed/TBI Service Members | Boston University, Charles River Campus | \$1,477,944 |
| Neuromodulation and Neurorehabilitation for Treatment of Functional Deficits after mTBI plus PTSD | Chicago Association for Research and Education in Science | \$2,999,030 |
| Neuroprotective Strategies for the Treatment of Blast-Induced Optic Neuropathy | Vanderbilt University | \$1,500,000 |
| Melanopsin-Specific Contributions to Photophobia in Brain Trauma | University of Pennsylvania | \$1,438,150 |
| Investigation of Notch Signaling during Spontaneous Regeneration of Cochlear Hair Cells | Southern Illinois University School of Medicine | \$1,499,960 |
| Controlling Mitochondrial Dynamics to Mitigate Noise-Induced Hearing Loss | Oregon Health & Science University | \$1,233,279 |
| Assessment and Rehabilitation of Central Sensory Impairments for Balance in mTBI | Oregon Health & Science University | \$1,993,522 |
| Preclinical Validation of Novel Fluorescently Labeled Compounds to Treat Neurodegenerative Hearing Loss | Massachusetts Eye and Ear Infirmary | \$1,500,000 |
| Development of Novel Local Analgesics for Management of Acute Tissue Injury Pain | Children's Hospital, Boston | \$711,000 |
| Vision Restoration with a Collagen Cross-linked Boston Kerato-prosthesis Unit | Massachusetts Eye and Ear Infirmary | \$294 |
| Sensorimotor Assessment and Rehabilitative Apparatus | Johns Hopkins University | \$1,500,000 |
| Automated Assessment of Postural Stability | Temple University | \$1,360,569 |

4.0 COLLABORATIVE EFFORTS WITH OTHER FEDERAL AGENCIES

On August 31, 2012, President Obama issued an EO titled “Improving Access to Mental Health Services for Veterans, Service Members, and Military Families,” which directed the DoD, VA, HHS, and Department of Education, in coordination with the Office of Science and Technology Policy, to establish a NRAP to improve the coordination of agency research into PTSD, other mental health conditions, and TBI and reduce the number of affected men and women through better prevention, diagnosis, and treatment. In addition, the EO calls for the establishment of a comprehensive longitudinal study of 100,000 Service members focused on PTSD, TBI, and related injuries.

To attain these goals, the EO urged research agencies to improve data sharing and harness new tools and technologies. In the NRAP, the agencies outline coordinated research efforts to accelerate discovery of the causes and mechanisms underlying PTSD, TBI, and other co-occurring outcomes like suicide, depression, and substance abuse disorders. It describes research to rapidly translate and implement what is learned into new effective prevention strategies and clinical innovations; biomarkers to detect disorders early and accurately; and efficacious and safe treatments to improve function and quality of life and to promote community participation and reintegration. In addition, the NRAP describes research to accelerate the implementation of proven means of preventing and treating these devastating conditions.

To address the guidance outlined in the NRAP, the VA and DoD jointly funded two consortiums: (1) the Consortium to Alleviate PTSD (CAP), and (2) the Chronic Effects of Neurotrauma Consortium (CENC). The CAP seeks to improve the psychological and physical health and well-being of Operations Enduring Freedom, Iraqi Freedom, and New Dawn Service members and Veterans by developing and evaluating the most effective preventive, diagnostic, prognostic, treatment, and rehabilitative strategies for combat-related PTSD and comorbid conditions. The CENC is dedicated to establishing a comprehensive understanding of the chronic sequelae associated with neurotrauma, primarily focused on mTBI. To do so, the objectives of the CENC are to (1) establish the association of the chronic effects of mTBI and common co-morbidities; (2) determine whether there is a causative effect of chronic mTBI on neurodegenerative disease and other co-morbidities; (3) identify diagnostic and prognostic indicators of degenerative disease and other co-morbidities associated with mTBI; and (4) develop and advance methods to treat and rehabilitate chronic neurodegenerative disease and co-morbid effects of mTBI.

In addition to the above, some specific examples of other ongoing collaborations include the following:

- The DoD is participating in the National Institutes of Health (NIH)/National Institute of Mental Health-led National Action Alliance for Suicide Prevention portfolio analysis of federal and non-federal funding agencies and organizations. The joint NIH/DoD Funding Opportunity Announcement (FOA), “Prevention and Health Promotion Interventions to Prevent Alcohol and Other Drug Abuse and Associated Physical and Psychological Health Problems in U.S. Military Personnel, Veterans and their Families,” has funded 11 projects (4 DoD projects and 7 NIH projects [3 National Institute on Drug Abuse, 2 National Institute on Alcohol Abuse and Alcoholism, 2 National Center for Complementary and

Alternative Medicine]). Applications to the FOA are jointly reviewed through annual In Progress Reviews hosted by the DoD.

- The DoD is collaborating with the NIH to determine the feasibility of using Federal RePORTER to share data with the public and across federal funding agencies on current and past research studies.
- The DoD, VA, and NIH are collaborating to establish a preliminary set of recommendations of high-quality measures for common data elements for research data reporting.
- The DoD is collaborating with the VA on the NHRC Millennium Cohort Study. Two VA investigators work with the MCS team at the NHRC.