ABOUT MENTAL HEALTH

- Mental health conditions are common in the United States. According to the National Institute of Mental Health, an estimated 43.4 million adults had a mental illness in 2015, representing about 18 percent of all U.S. adults, not including substance-use disorders.

- VA offers a wide range of mental health services to Veterans. The goal of VA mental health care is to support recovery and enable Veterans who experience mental health problems to live meaningful lives in their communities and achieve their full potential.

- VA aims to provide coordinated care for the whole person, not just for the person’s mental illness. VA promotes the idea that having a healthy body, satisfying work, and supportive family and friends are integral to mental health.

- Mental health services are available in VA's mental health specialty clinics, primary care clinics, nursing homes, and residential care facilities. Those with serious mental health problems may take part in specialized programs such as mental health intensive case management, day centers, work programs, and psychosocial rehabilitation.

- Emergency mental health care is available 24 hours a day, seven days a week at VA medical centers. Facilities that do not have 24-hour emergency rooms must provide emergency services through a local non-VA hospital.

VA RESEARCH ON MENTAL HEALTH: OVERVIEW

- VA researchers are looking at potential new approaches for treating and preventing mental health disorders. They are also working on related projects such as developing collaborative primary care models and improving access to services from rural and other remote areas by using the internet.

- VA investigators are also looking at the co-occurrence of mental health issues and physical disorders—for instance, depression in those with spinal cord injury, or substance use disorder in patients with chronic pain.

- VA has many facilities researching aspects of mental health, such as the Mental Illness Research, Education, and Clinical Centers, the Center for Integrated Health Care, the Center of Excellence for Research on Returning War Veterans, the Center of Excellence for Stress and Mental Health, the Center for Mental Healthcare Outcomes Research, and the Brain Rehabilitation Research Center.

SELECTED MILESTONES AND MAJOR EVENTS

1941 - Set up a research lab at the Northport VA Medical Center to conduct research in neuropsychiatric disorders

1997 - Identified a gene associated with a major risk for schizophrenia

2003 - Determined that while atypical antipsychotic drugs vary in cost, there is limited evidence of differences in effectiveness

2013 - Determined an association between homelessness among Veterans and childhood problems such as abuse and family instability

2013 - Found that a loss of gray matter in three separate brain structures is common across a spectrum of psychiatric disorders widely perceived to be distinct

2016 - Found that the use of an injectable antipsychotic led to significant cost-savings for patients with schizophrenia compared to oral atypical antipsychotics

2017 - Learned that compensatory cognitive training (CCT) can improve thinking ability, psychiatric symptoms, and quality of life in people with severe mental illnesses

(Continued on back)
RECENT STUDIES: SELECTED HIGHLIGHTS

• Women Veterans with mental health disorders are more likely to have experienced unintended pregnancy than those without, found a VA Pittsburgh Health Care System study. In a phone survey, 60 percent of women with at least one mental health disorder reported having an unintended pregnancy, while 51 percent of women without a mental health disorder said they had had an unintended pregnancy. Mental health disorders were also connected to a greater number of unintended pregnancies. (Journal of Internal Medicine, December 2018)

• Prenatal exposure to maternal stress and depression could lead to psychological disorders in children, according to a study by VA researchers and colleagues. They found that children born to mothers with PTSD, depression, or both together showed a pattern of gene expression not seen in children of mothers without psychological disorders. These changes in gene expression were similar to genetic biomarkers associated with autism spectrum disorder and schizophrenia. (Brain, Behavior, and Immunity, October 2018)

• Oxytocin did not improve social cognition in patients with schizophrenia, in a study by VA San Diego Healthcare System researchers. Social cognition refers to how a person deals with other people, and is often impaired in people with schizophrenia. Although oxytocin has been shown to improve social cognition in the past, schizophrenia patients taking the drug showed no improvements in social cognition over the course of the study. (Psychological Medicine, Sept. 5, 2018)

• The PRIME program helped patients with recent-onset schizophrenia improve their mood and motivation, in a study by San Francisco VA Medical Center researchers. PRIME is a mobile digital tool designed to improve motivation and quality of life. After using PRIME for 12 weeks, participants had significant improvements in depression, defeatist beliefs, self-efficacy, and motivation, compared with schizophrenia patients not using the program. They also had greater improvements in social motivation three months after the trial. (Schizophrenia Bulletin, Aug. 20, 2018)

• Mortality rates for people with schizophrenia are not decreasing, according to a study by VA San Diego Healthcare System researchers. Mortality rates for people with schizophrenia have not gone down in recent years, despite a decline in mortality rates in the general population. People with schizophrenia tend to have a shorter life expectancy than those without, by 15 to 20 years. The researchers suggest that major changes in mental health stigma, health care, and economic policy are urgently needed to improve care for people with schizophrenia. (Schizophrenia Research, June 2018)

• An international consortium including several VA researchers identified genetic markers that predict lithium nonresponse. Lithium is the standard mood stabilizer used to treat bipolar disorder, but up to 30 percent of patients do not respond to the drug. Researchers looked at the genomes of more than 2,000 patients with bipolar disorder. They found patients who had gene variations previously shown to predict schizophrenia also did not respond to lithium. The results can be used to predict how effective lithium treatment will be for individual patients. (JAMA Psychiatry, Jan. 1, 2018)

• Anxiety sensitivity may link PTSD and suicide risk, according to a Southeast Louisiana Veterans Health Care System study. Anxiety sensitivity is an exaggerated fear of experiencing symptoms related to anxiety, separate from the actual symptoms. Researchers found a significant association between the severity of PTSD in 60 male Veterans and a greater frequency of suicidal thoughts, plans, and impulses. They also found that cognitive anxiety sensitivity concerns may be responsible for this link—meaning that when people with PTSD worry that their personalities have changed or that they are not thinking normally, they may be at increased risk of suicidal behavior. (Journal of Affective Disorders, November 2017)

For more information on VA studies on mental health and other key topics relating to Veterans’ health, please visit www.research.va.gov/topics

VA investigators are looking at the co-occurrence of mental health issues and physical disorders—for instance, depression in those with spinal cord injury, or substance abuse in patients with chronic pain.

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