



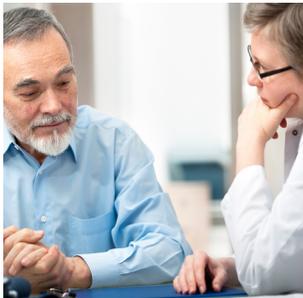
# Mental Health Innovations

Updates from VA's Specialized Mental Health Centers

IN THIS ISSUE: **Mental Health and Primary Care: Partnering to Improve Veteran Care**

## RESEARCH

### Integration of Mental Health and Primary Care Increases Engagement in Specialized Mental Health Care



*Veterans seen in the integrated program are more likely to return for a second appointment with specialty mental health care in a timely manner.*

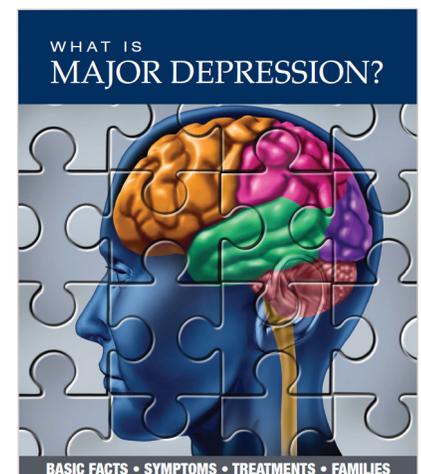
A significant portion of Veterans can benefit from brief treatment for mental health concerns in primary care, but others may need specialty mental health care services for Posttraumatic Stress Disorder and severe depression. Many of these Veterans, however, will not seek out these services or will attend only their first appointment in specialty mental health care. The Department of Veterans Affairs (VA) is striving to change this trend by placing mental health services in primary care clinics. Across the country, mental health clinicians are working as part of Veterans' primary care teams, allowing them to collaborate closely

with Veterans' other providers. "VA is helping to break down the barriers to accessing mental health treatment. When we bring these services into primary care, we help to decrease the stigma associated with going to mental health clinics," said VA psychologist, Dr. Laura Wray of the VISN 2 Center for Integrated Healthcare. Dr. Wray and colleagues studied whether receiving a mental health visit in primary care increased the chances of a Veteran later engaging in specialty mental health care. Specifically, they were interested in whether a Veteran was more likely to return for a second specialty care appointment if he or she had been seen in the primary care integration program. They found that the odds of a Veteran returning for the second specialty care appointment within three months of their first appointment increased by 1.4 times. According to Dr. Wray, "Our study suggests that either the Primary Care –Mental Health Integration (PC-MHI) provider is improving the identification of Veterans who will engage in specialty mental health treatment or that after working with the PC-MHI provider, Veterans are better prepared to engage in specialty mental health care. Both may be true. Either way, Veterans are benefiting from services available where they want to receive them."

*VA is helping to break down the barriers to accessing mental health treatment.*

## HIGHLIGHT

Education Handout -  
What is Major Depression?



## LEARN MORE

VA Primary Care -  
Mental Health Integration

VISN 2 Center for Integrated  
Healthcare (CIH)

Foundations for Integrated Care:  
Behavioral Health Solutions for  
Primary Care Manuals

VA Mental Health Depression  
Information

Review of Brief  
Psychotherapy for Depression in  
Primary Care

Therapist's Guide to Brief  
Cognitive Behavioral Therapy

EDUCATION

VA Develops a Family/Caregiver Education Program for Depressed Veterans in Primary Care

Treatment for depression in primary care settings can be improved through close collaboration with mental health providers. The Translating Initiatives for Depression into Effective Solutions (TIDES) Project places mental health providers and care managers into VA primary care settings where they work closely with primary care providers to give optimum care. To further improve Veterans' outcomes, Dr. Noosha Niv and colleagues at the VISN 22 MIRECC developed a family/caregiver intervention for Veterans enrolled in the TIDES program. Family members or caregivers were mailed a depression education handout. Care managers followed up with four telephone sessions focused on education about depression and the importance of medication, symptom monitoring, engagement in activities, and social support. Early results have been positive. Veterans with family members who participated in the program improved in overall depression severity and increased their participation in activities. Family members found the education and direct phone contact with the depression care manager most helpful. One family member said, "The connection and sense of having a support team in place was so comforting." Another family member stated, "I really hope that this whole thing continues and helps other families because it was such a phenomenal experience." This new program shows promise in providing family members and caregivers education, VA connection and support. By addressing the needs of family members and caregivers, the program enhances the quality of care to Veterans.



*Providing education and support to families decreases depression severity and increases activity levels in Veterans receiving care for depression in primary care.*

CLINICAL

Brief Cognitive Behavioral Therapies Show Promise for Treating Depression in Primary Care



*A review of the research literature concludes that brief CBT for depression in primary care is effective.*

Cognitive Behavioral Therapy (CBT), which focuses on the relationship of thoughts, emotions, and behavior, is an effective and first-line treatment for depression. Since depression is often first diagnosed and treated within primary care, patients may benefit from having CBT available to them in this setting. However, the length of these interventions (typically 12-20 sessions) makes them difficult to integrate into a primary care setting. Brief versions of CBT (8 or fewer sessions) are available and could make it easier for health care providers to deliver CBT in primary care. The question is - are these brief versions of CBT effective? Drs. Nieuwsma and colleagues at the Evidence-Based Synthesis Program (ESP) Center in Durham, NC and the VISN 6 MIRECC examined the available research on the effectiveness of brief CBT for depression. They concluded that these treatments can be beneficial for primary care patients regardless of whether they are delivered in-person, either individually or in a group, or by telephone. This report provides a solid rationale for increasing efforts to train VA providers in primary care to use these interventions. Accordingly, a number of studies at VA Medical Centers are testing brief CBT in primary care. One such study is led by Dr. Cully with the VISN 16 MIRECC. This project is evaluating the effectiveness and implementation of brief CBT for Veterans with chronic medical conditions who are also experiencing depression and/or anxiety. By bringing brief CBT into VA primary care settings, more Veterans will have the opportunity to receive and benefit from these interventions.

There are 15 VA specialized mental health centers of excellence which include 10 Mental Illness Research, Education and Clinical Centers (MIRECCs), 4 Mental Health Centers of Excellence, and the National Center for PTSD. The centers share a mission to improve the health and well being of Veterans through cutting-edge science, education, and clinical initiatives. Mental health problems are often multiple complex conditions. Each center addresses a particular mental health disorder, environmental situation or Veteran cohort. To learn more about these centers, go to [www.mirecc.va.gov](http://www.mirecc.va.gov).

Noosha Niv, PhD (Editor), Shannon McCaslin, PhD (Lead Writer) and MIRECC Communications Workgroup (Contributors)