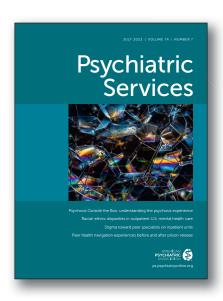
See and Hear What the Field Is Discussing!

Psychiatric Services features research related to the delivery of mental health services, especially for people with serious mental illness in community-based treatment programs. Provision of high-quality care involves collaboration among a variety of professionals. Clinicians, administrators, and policy makers look to Psychiatric Services for research on how to deliver evidence-based treatments, to take an integrated "whole-health" approach to care, and to better engage individuals in their care. Mental health's current focus on patient-centered, recovery-oriented care and on dissemination of evidence-based practices is transforming service delivery systems at all levels. Research published in Psychiatric Services contributes to this transformation.



Our Most Talked About Articles in 2023:



Established Outpatient Care and Follow-Up After Acute Psychiatric Service Use Among Youths and Young Adults

January issue



Mental Health Emergency Hotlines in the United States: A Scoping Review (2012–2021)

May issue

The Discussion Continues: Psychiatric Services' Podcast "From Pages to Practice"

Editor Lisa Dixon, M.D., M.P.H., and Podcast Editor and co-host Josh Berezin, M.D., M.S., discuss the latest mental health services research published in *Psychiatric Services* and why it is relevant. Topics include community-based treatment programs, collaborative care, evidence-based treatment and service delivery, criminal and social justice, policy analysis, and more. Recent episodes include:



Factors Influencing Turnover and Attrition in the Public Behavioral Health System Workforce

Eliza Hallett, M.S., discusses the challenges faced by staff and behavioral health service providers, including low wages, traumatic work environments, low wages, and physical and administrative infrastructure.

Medicaid Costs and Utilization of Collaborative Versus Colocation Care for Patients With Depression

Henry Chung, M.D., discusses the differences between the collaborative care model and the colocation model, and the impact on Medicaid costs and utilization, for the treatment of patients with depression.

