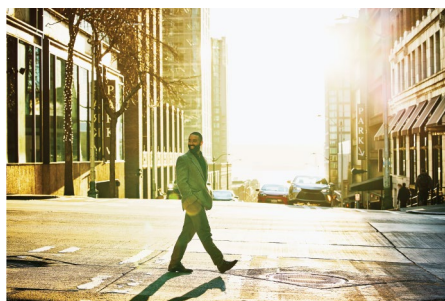


## Looking back, looking forward



**As *Nature Mental Health* closes in on one year of publication, there is a special opportunity to reflect on the state of mental health in 2023 to shape the mental health priorities for 2024. The journal considers the role of some of these defining issues as it readies for the new year.**



As the calendar year winds down, one of the natural impulses, especially at periodicals, is to take a walk back through what has been published, noting breakthroughs and highlights, and reminding ourselves of the many events that occurred over the course of a year. 2023 passed swiftly and, not surprisingly, constituted an important year in understanding and appreciating mental health and wellbeing.

Since our launch in January 2023, *Nature Mental Health* has published an issue each month comprising a range of commentaries, perspectives and reviews, and primary research. Building an issue naturally lends itself to noticing and underscoring some of the contemporary themes that emerge within mental health research. We have endeavored to feature some of these key topics, such as increasing the roles and perspectives of people with lived experience of mental health conditions, bolstering mental health and public health safety nets, and enshrining mental health as a universal human right.

For new journals that have not yet received an impact factor score and that are just beginning to have some name recognition, gauging the reception of the work you are publishing can be a challenge. Of course, there are metrics for downloads, audience engagement, and media and news reportage, but it can often take time to appreciate specific publications that truly stand out and break ground. In these early days of the journal, each paper that we publish feels like a highlight, an accomplishment, and the cornerstones in building a multidisciplinary home for mental health research. We are very fortunate to have interacted with authors and researchers from around the world and we are grateful and determined to keep building a dynamic outlet for mental health research. We also wish to

thank our reviewers who have shared their expertise and time evaluating and refining the manuscripts that we receive. As we continue to build momentum and turn the page on 2023, there is a need to take stock and consider the broader context and landscape of mental health, the topics and themes that will be most salient, and to identify pressing research questions – no easy task, given the complexity of this point in time.

In contrast to the winter months during the height of the COVID-19 pandemic, daily life now looks and feels decidedly different. With the push to resume work in offices and classrooms, less-restricted travel, and a diminished presence of COVID-19, whether there has been a return of sorts to pre-pandemic measures of mental health and wellbeing is an active question globally. Although there are indications of increased psychological distress that occurred during the early stages of the pandemic among children and adolescents, young adults, and people with physical health conditions or pre-existing mental health conditions, there does not seem to be a consistent pattern of deteriorating mental health over time associated with the pandemic above and beyond broad systemic shifts in mental health. It is, however, crucial to consider that some trends may be less prominent – for example, against a backdrop of a decades-long youth mental health crisis.

Most studies that investigate mental health consequences of the pandemic have been cross-sectional, assessed at differing time-points, and subject to country-specific or regional differences in the experience of lockdowns, school closures, and other physical and social restrictions, or have focused on specific subpopulations of individuals, such as adolescents with previously reported symptoms of depression and anxiety. From the longitudinal

work that has been conducted and through systematic reviews and meta-analyses, there are some interesting and possibly unanticipated findings that, at least in certain cohorts, measures of mental health and wellbeing look comparable or stable before and after the peak years of the pandemic. More work teasing out the temporal dynamics and analyzing aggregated data are likely to give us greater insight into these patterns.

With so much variability involved, however, finding useful year-over-year metrics to provide baselines of current mental health is undoubtedly a challenge for stakeholders in research, policy and advocacy. Yet the added value of benchmarking reports is to identify where mental health disparities may be emerging or widening. Honing in on a single context, the USA, presents a stark picture of consistently high prevalence of mental health conditions, including substance use disorders, coupled with unmet treatment needs. The annual [State of Mental Health Report](#) from Mental Health America, for example, provides a snapshot of mental health status in the USA in 2023 using national survey data. The report finds that 21% of individuals surveyed were experiencing mental illness; over half of these respondents indicated that they were not receiving any mental health treatment. Of the 15% who reported experiencing substance abuse, over 93% of that group did not receive treatment – a glaring statistic that speaks not only to potential barriers that may deter people from seeking treatment but also to the relative scarcity of mental healthcare providers. These data accord with the Substance Abuse and Mental Health Services Administration (SAMHSA) [National Survey on Drug Use for 2022](#) released in mid-November of this year, which found that 48.7 million people 12 years of age or older (17.3%) in the USA had a substance use disorder in the past year, including alcohol use disorder (29.5 million) and drug use disorders (27.2 million). Notably, the survey indicates that adolescents with substance use disorders (1.8 million) may be even less likely to receive the care that they need, with only about 0.5% seeking treatment.

Mental health provider shortage gaps exist for over one third of the US population, and there are only an estimated 305 mental healthcare providers per 100,000 people.

As emergency department data demonstrate, in the USA, there is an overreliance on emergency departments as a stop-gap measure for acute mental health treatment, especially for substance use disorders, where routine care is absent. Disparities in rates for mental health-related emergency department visits are also pronounced for people from minority ethnic and racial groups, with the highest rates for non-Hispanic Black adults. For pediatric mental health-related visits to emergency departments, there is evidence to suggest that rates increased during the pandemic and have been

rising steadily for at least a decade, indicative of an even more dire access to specialist workforce reality. It is clear, however, that these trends in mental health are not likely to abate without evidence-based treatment advances and systemic changes to healthcare access.

Unpacking the landscape of the USA here serves to illustrate the abundance of lines of inquiry, methods, subpopulations, mental health conditions, multidisciplinary stakeholders, training and more that are necessary components in the service of improving mental health. From a mental health research

perspective, it is our hope to provide a forum for greater interconnectedness of existing disciplines, including epidemiology, health economics and sociology, alongside neuroscience, psychiatry and psychology. 2023 may have prompted more questions, but looking forward, we see tremendous opportunity to partner with you to close some of the knowledge gaps and make 2024 a milestone year for mental health.

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