Welcome!

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• The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).
School Mental Health (SMH) Planning Workgroup:
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- Karen Francis, American Institutes for Research
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The School Mental Health in Rural Communities: Getting to Wide Scale Adoption of Comprehensive School Mental Health convening will result in the development of local, state and national/federal strategies and products to build upon the strengths of rural communities and address opportunities and challenges they are facing.
• The strategies developed by this convening will link to ongoing work in the field and from the work of the Expert Panel for School Mental Health meeting that took place on September 7, 2017.

• This work is led by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Health Resources and Services Administration (HRSA) in partnership with the School Mental Health Workgroup as well as a broad network of school mental health leaders and national organizations.
Meeting Objectives

- Local, state and national rural behavioral health leaders will convene to accomplish the following objectives:
- Examine unique distinctions within rural communities, opportunities and challenges;
- Learn about ongoing national, state and local efforts/strategies to expand the adoption of comprehensive school mental health and the unique considerations for rural schools/communities;
- Determine gaps and areas of opportunity to advance the implementation comprehensive school mental systems in rural communities; and,
- Discuss and prioritize strategies and identify opportunities to align comprehensive school mental health systems in rural areas over the next five years.
Schools across the nation integrate comprehensive school mental health systems as a common practice.

The point at which a series of small changes or incidents becomes significant enough to cause a larger, more important change.

1) Early Adopters of School Mental Health - benefits shared and spread

2) Next group of adopters and a later group come on board - moving towards a majority of schools adopting School Mental Health systems - spread continues as more schools and society adopts SMH

Late comers adopt SMH system

New Norm- wide scale adoption of School MH

SAMHSA Substance Abuse and Mental Health Services Administration
Issues of focus in Rural Communities

• Opioid epidemic and other substance abuse issues
• Disparities in health and education outcomes
• Poverty and low economic development
• Homelessness
• High rate of suicide
• Lack of access to health and behavioral health services and supports
• Trauma
• Workforce shortages – unemployment and underemployment
• Schools in many rural communities are in a unique position to take on the role to promote positive mental health and well-being and mitigate risk factors that can lead to mental and behavioral health challenges.

• Schools in rural communities have a central role. They often serve as a trusted place for an array of community gatherings and events. In rural settings where stigma may be a concern, schools can provide increased privacy and access for young people needing mental health services.
• How can they best support and respond to the mental and behavioral health needs of children, youth and families in rural communities?

• What is the role of schools, school mental health systems, community partners, families and youth in responding to the mental and behavioral health needs of children, youth and families in rural communities?
Let’s get to work!

Schools across the nation integrate quality comprehensive school mental health systems as a common practice.