



## ***School Mental Health in Rural Communities*** **Getting to Wide Scale Adoption of** **Comprehensive School Mental Health** ***Briefing Paper and Agenda***

### **The Basics:**

**When:** May 17, 2018

**Where:** 5600 Fishers Lane, Room 5N76, Rockville, Maryland

**Who:** **State, City and National** Rural School Mental Health champions and stakeholders including: state leaders, city leaders, national organizations, advocates, family and youth leaders, mental health and education leaders, technical assistance providers, federal partners, foundations, LEAs, and others.

### **School Mental Health (SMH) Planning Workgroup:**

- Ingrid Donato, SAMHSA/ Mental Health Promotion Branch
- Joyce Sebian, SAMHSA/ Mental Health Promotion Branch
- Andrea Alexander, SAMHSA/ Child Adolescent and Family Branch
- Trina Anglin, HRSA, Maternal and Child Health Bureau
- Nancy Lever, Center for School Mental Health- UMB
- Sharon Hoover, Center for School Mental Health- UMB
- Olga Price, Center for Health and Health Care in Schools (CHHCS) GW
- Linda Sheriff, Center for Health and Health Care in Schools (CHHCS) GW
- Nisha Sachdev, Bainum Family Foundation
- Noel Bravo, Bainum Family Foundation
- John Schlitt: School-Based Health Alliance

### **Consultants:**

Karen Francis, American Institutes for Research  
Sharon Hoover, Center for School Mental Health  
Nancy Lever, Center for School Mental Health

### **Meeting Overview:**

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.

### **What are the issues to be addressed?**

Children, youth and families in many rural areas are facing serious issues related to, the opioid epidemic and substance abuse, poverty, insufficient economic development, homelessness, as well as disparities in health and educational outcomes. There is no question as to the negative impact that these issues have on the overall health, mental health and well-being of children, youth and families in rural areas.

A significant consideration in many rural communities is the disproportionate share of children living in poverty. The incidence of poverty varies by region and is highest in Appalachian counties, throughout the Mississippi Delta and across the Southeast and in other pockets around the country.

<sup>1</sup> In addition to the geographic factors, a disproportionate share of children of color live in persistent high child poverty areas and are at a disproportionate risk for chronic diseases including mental and behavioral health disorders.<sup>2</sup>

Addressing these issues requires a comprehensive public health approach that identifies the social determinants as well as the risk and protective factors within a community to determine both prevention and intervention strategies that promote and sustain positive outcomes. A strength-based approach is essential to leverage the inherent assets of rural communities such as strong social supports and connections as they grapple with and address these issues. Factors such as small size and geography can foster interdependence and strong social supports and connections as well as pose challenges. Innovative strategies are emerging to build overcome challenges and build on strengths. For example, tele-behavioral health and other technologies are one example of creating access to behavioral health services and resource in rural schools and

## 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

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<sup>1</sup> Schaefer, Andrew P.; Mattingly, Marybeth J.; and Johnson, Kenneth M., "Child Poverty Higher and More Persistent in Rural America" (2016). *The Carsey School of Public Policy at the Scholars' Repository*. 266.

<sup>2</sup> Price, James H., et al., "Racial/Ethnic Disparities in Chronic Diseases of Youths and Access to Health Care in the United States" (2013). *BioMed Research International*, vol. 2013, 2013, pp. 1–12.



communities. Of course, as with any innovation the development and implementation of tele-behavioral health services also bring forth new challenges and opportunities and require infrastructure and resources.

### **Thinking about the role of schools in rural areas**

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 an even more 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.

Comprehensive school mental health systems increase access and availability of mental health treatment services, improve education outcomes and foster a supportive and safe environment for all students. Schools are a natural place in the community to support young people and when needed, to provide mental health services. Many schools in rural areas are working to implement comprehensive school mental health systems to address identified needs. These schools do however experience challenges such as attracting and retaining qualified school personnel, low and insufficient funding among others that require some special considerations to build and sustain capacity to provide comprehensive mental health services.

This then begs the following questions:

1. How can they best support and respond to the mental and behavioral health needs of children, youth and families in rural communities?
2. 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?

### **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.



## Meeting Agenda

<p><b>8:00-8:30 am</b> <b>8:30-9:00 a.m.</b></p>	<p><b>Arrival and Check in through Security desk. Bring government issued ID. Registration</b></p>
<p><b>9:00 - 9:15 a.m.</b></p>	<p><b>Welcome and Introductions</b></p> <p><b>Overview of the Day and Meeting Objectives</b></p>
<p><b>9:15-10:30 a.m.</b></p>	<p><b>What is the State of Rural America? –<i>Karen Francis – American Institutes for Research</i></b></p> <ul style="list-style-type: none"> <li>• Changing demographics in rural communities</li> <li>• Unique challenges in four distinct types of rural communities</li> <li>• Gains and persistent disparities in rural communities</li> <li>• Implications for rural behavioral health policy and programming.</li> </ul> <p><b>Accelerating the wide scale adoption of comprehensive School Mental Health Systems- building on the Momentum Underway: <i>Sharon Hoover, University of MD, Center for School Mental Health</i></b></p> <p><b>Special Considerations for School Mental Health in Rural Communities: <i>Kurt Michael, Appalachian State University</i></b></p> <p style="text-align: center;"><i>Discussion</i></p>
<p><b>10:30-10:45 a.m.</b></p>	<p><b>Break</b></p>
<p><b>10:45-12:15</b></p>	<p><b>Panel: Addressing the Challenges and Opportunities within Rural Schools and Communities: Moderator: Nancy Lever, University of Maryland, Center for School Mental Health</b></p> <p><b>West VA:</b> Perry Blankenship, Project Aware West VA, Facilitator/ McDowell County Schools and Pastor Fincastle First Church of God, Volunteer Chaplain (Princeton Hospital)</p> <p><b>New York:</b> Dr. Chris Kjolhedehris, HRSA Tele-behavioral Health grantee, Bassett Hospital System: Meeting the needs of students in rural upstate NY through Tele-behavioral Health services within School Based Health Centers</p> <p><b>Kansas:</b> Allison Harder, HRSA, SMH COIIN site, Emporia, Kansas</p> <p><b>Wisconsin:</b> Gretta Bancarte, Ashland, and Crystal Holmes Adams Friendship, Project AWARE Wisconsin, Program Directors</p> <p style="text-align: center;"><i>Discussion</i></p>



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12:15-1:00 pm	Lunch
1:00 pm-1:30 pm	<p><b>Insights from the Lens of an Epidemiologist in a Rural State: Indicators of Child Adverse Experiences &amp; Protective Factors: Urban, Rural &amp; Vermont:</b> Laurin Kasehagen, MA, PhD, Senior Epidemiologist / Centers for Disease Control and Prevention assignee to Vermont Departments of Health &amp; Mental Health</p> <p><i>Discussion</i></p>
1:30 pm-2:30 pm	<p><b>Nominal Group Process: Nancy Lever, Sharon Hoover, Brittany Parham</b></p> <p><b>Breakout Groups #1:</b> <i>Goal: Develop local, state, and national/federal strategies to advance rural school mental health.</i></p> <ul style="list-style-type: none"><li>• <i>What LOCAL strategies, including practices and policies, are most essential to advance rural school mental health?</i></li><li>• <i>What STATE strategies, including practices and policies, are most essential to advance rural school mental health?</i></li><li>• <i>What NATIONAL/FEDERAL strategies, including practices and policies, are most essential to advance rural school mental health?</i></li></ul> <p><b>Breakout Session #1 Report</b></p>
2:30 –2:45 pm	Break (and tallying of prioritized strategies)
2:45-3:45 pm	<p><b>Action Planning for Local, State, and National/Federal Rural School Mental Health Strategies: Nancy Lever, Sharon Hoover, Brittany Parham</b></p> <p><b>Breakout Session #2:</b> <i>Goal: Select 3-5 prioritized strategies for each level (local, state, national/federal) and identify resources, individuals/organizations, and best practices and policies to support their implementation.</i></p> <p><b>Breakout Session #2 Report</b></p>
3:45-4:30 pm	<p><b>Identify areas of agreement and potential strategies for the field</b> <b>Facilitated by Joyce Sebian, SAMHSA</b></p> <p><b>Next steps and Wrap-up</b></p>