

# MENTAL HEALTH CHALLENGES IN RURAL POPULATIONS

## Suicide Rates

In 2013-2015, the suicide rate was **55% higher** in rural areas (19.7 per 100,000 population) than in large urban areas (12.7 per 100,000 population).<sup>1</sup>



Rural people are more likely to report symptoms of psychological distress such as:<sup>2</sup>

- Burnout**
- Hopelessness**
- Loss of Self-Esteem**

## Barriers to Behavioral Health (BH) Care in Rural Areas<sup>1</sup>

### ACCESSIBILITY

Rural people should have the same access to BH services (e.g., emergency response, early identification and screening, diagnosis, treatment, and recovery) as those living in urban areas.

### AVAILABILITY

Mental Health services are scarce in rural areas due to underfunding of the BH safety net, low salaries, high caseloads, low reimbursement rates, and limited reimbursement for supporting services.

### ACCEPTABILITY

The relative lack of anonymity in rural communities discourages individuals from seeking care in specialty settings. Hence, integrating BH services into primary and acute care facilities is critical.

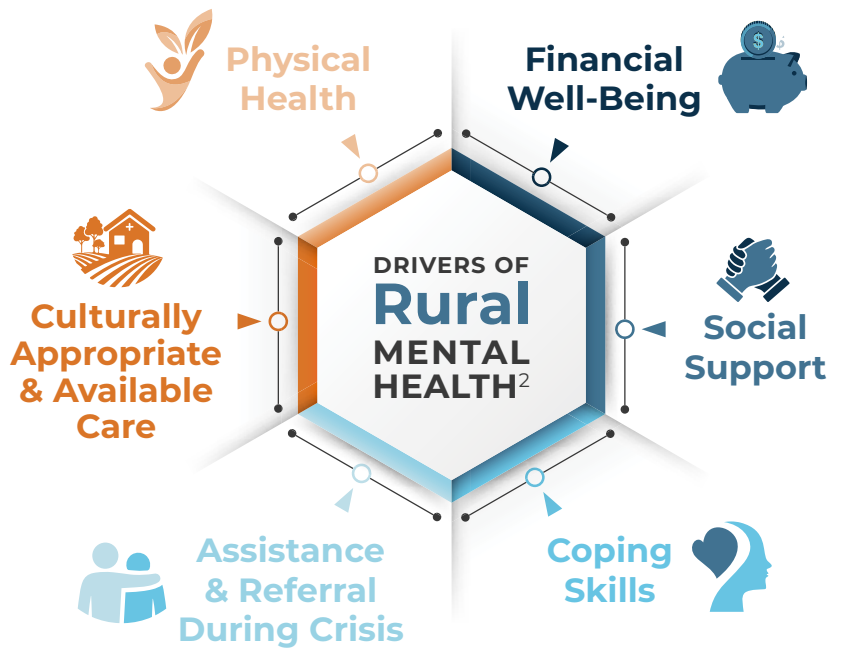
### AFFORDABILITY

Rural residents are more likely to be uninsured or underinsured, less likely to be insured through an employer, and more likely to receive Medicaid than are urban residents.

### STIGMA

Misconceptions, stereotypes, and prejudices regarding mental health—along with the relative lack of anonymity in rural communities—each present barriers for seeking care.

**If You Or Someone You Know Is In Crisis, Call Or Text 988.** The 988 dialing code for the Suicide & Crisis Lifeline is now available in the US for call (multiple languages), or text/chat (English only). You can also reach the Suicide Prevention Hotline/Lifeline at 1-800-273-TALK (8255) or text the Crisis Text Line: 741-741.



## Strategies for Success<sup>1</sup>

### PREVENTION

- Address the needs of high-risk populations and the general population.
- Target modifiable risks and protective factors.
- Adapt to the unique characteristics of each rural community.

### TREATMENT

- Integrate BH providers (i.e. social workers, psychologists, or counselors) into primary care and acute care settings to address less complex mental health challenges.
- Telehealth and other technologies may help connect rural patients with specialty providers.

### REGIONALIZATION OF SERVICES

- Local rural providers are dedicated to less complex BH patients.
- Specialty BH providers offer consultative support and access to intensive specialty services).

### PLAN FOR SUSTAINABILITY

- Sustainable system of care.
- Avoids unnecessary competition for specialty services that require a larger population base to be viable.

1. Gale, J., Janis, J., Coburn, A., & Rochford, H. (2019). (rep.). *Behavioral Health in Rural America: Challenges and Opportunities*. Rural Policy Research Institute. Retrieved April 2022, from <https://rupri.org/wp-content/uploads/Behavioral-Health-in-Rural-America-Challenges-and-Opportunities.pdf>.

2. Younker T, Radunovich HL. Farmer Mental Health Interventions: A Systematic Review. *International Journal of Environmental Research and Public Health*. 2022; 19(1):244. <https://doi.org/10.3390/ijerph19010244>