



ARKANSAS RURAL HEALTH PARTNERSHIP

AUGUST 2024

Living Free: Mental Wellness

ARHP initiatives to support the mind, soul, and body

THE FACTS

HEALTH DISPARITIES & MENTAL HEALTH

Individuals in the 26-county service area experience numerous factors that contribute to poor mental health, including high rates of poverty, unemployment, outward migration, chronic disease, and substance use. Access to healthy food and exercise opportunities are also often limited. **Nearly 1 in 4 residents experience frequent mental distress.**¹

ACCESS TO HEALTHCARE

The rural region is designated as a health professional shortage area², with one mental health provider for every 1,320 residents (on average).¹ In 2022, Arkansas ranked # 40 in the U.S. for access to mental health care.³ It is estimated that more than one in five U.S. adults live with a mental illness.⁴

COVID-19 & BEYOND

The COVID-19 pandemic increased mental health and wellbeing concerns across the globe as individuals were negatively impacted by social isolation, loneliness, job loss, financial instability, illness, and grief.⁵



How do we turn the tide of the current mental health crisis?

Almost five years before the COVID-19 pandemic brought mental health to the national spotlight, the rumblings of growing concern could be heard across rural South Arkansas. More and more emergency room beds were being filled by individuals in a mental health crisis. Nurses would spend hours and sometimes days, trying unsuccessfully to find an available inpatient psychiatric hospital bed. It was not unheard of for a patient to languish in the emergency room for 18 days or longer. At the same time, emergency medical services (EMS) slowed and eventually stopped their transportation of patients in crisis due to risk. This was a critical loss for patients needing transport out of the

region or even state for mental health stabilization, as much of the area has no public or private transportation. ARHP member hospital leaders all deemed mental health as an urgent and immediate concern.

Early Intervention through Screening. Early efforts to address mental health in the region began with standardizing mental health and substance use screening within the primary care setting. ARHP worked alongside ARHP hospital-affiliated clinics to assist in the adoption of SBIRT and PHQ-9, universal screening tools for depression and substance use. Staff were trained in how to provide linkage to care for those needing counseling and/or further treatment options.

SOURCES: 1: University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2024. • 2: HRSA, Find Shortage Areas. data.hrsa.gov/tools/shortage-area. Accessed July 30, 2023. • 3: Mental Health America. *Ranking the States 2022*. https://mhanational.org/issues/2022/ranking-states#prevalence_mi • 4: National Institute of Mental Health. *Health Statistics: Mental Illness*. <https://www.nimh.nih.gov/health/statistics/mental-illness> • 5: Panchal, N., Saunders, H., Rudowitz, R., and Cox, C. *The Implications of COVID-19 for Mental Health and Substance Use*. KFF. March 20, 2023

MOBILIZING A MENTAL HEALTH SUPPORT NETWORK ACROSS RURAL ARKANSAS

Access to Resources.

Each year, ARHP updates the ARHP Health & Health-Social Resource Directory which includes a county-specific listing of all healthcare services available throughout the 26-county region. The exhaustive directory includes mental and behavioral health resources and is available in print and online versions. Visit arruralhealth.org for the 2024 Directory.

ARHP staff also widely distribute national resources for individuals experiencing mental health concerns at community outreach and training events.

Mental Health First Aid (MHFA) Training.

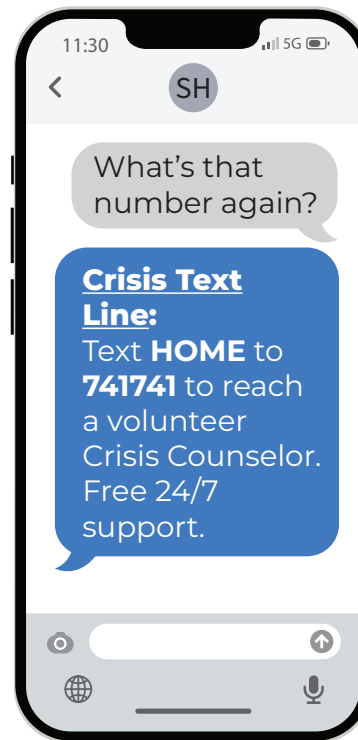
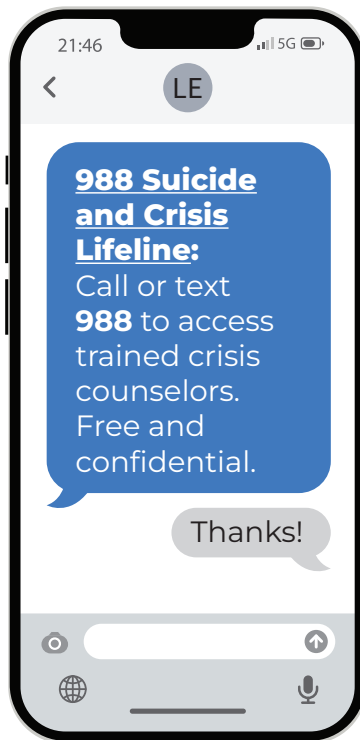
Due to a general lack of knowledge in the community about how to recognize and respond to mental health concerns, ARHP launched Mental Health First Aid (MHFA) Training (2018). The evidence-based model is an 8-hour training that empowers individuals from varying ages and backgrounds to identify and properly respond to signs and symptoms of mental health and substance use concerns. Upon completion of the course, individuals receive a three-year certificate and are fully equipped to assist friends, family members, and coworkers to access needed mental health resources when needed. ARHP currently offers the following MHFA training: 1) Adult, 2) Youth, 3) Healthcare Professionals, and 4) First Responders. ARHP is also one of a select few organizations in the country to



be trained in the pilot Teen MHFA through Lady Gaga's Born This Way Foundation (2019 grantee). To date, ARHP has trained over 3,500 individuals in MHFA across the state.

Question, Persuade, Refer (QPR) Suicide Prevention Training.

As the COVID-19 pandemic heightened awareness of mental health needs, local high schools and colleges began asking ARHP to provide evidence-based mental health training. At the same time, many schools could not dedicate 8 hours to the training. In October 2022, ARHP launched evidence-based QPR training as a shorter training option for students and faculty. The one-hour suicide prevention training is available online and distributed by ARHP staff via QR code. To date, 2,705 individuals have completed this critical training.



Thrive Together: Peer-to-Peer Mental Health Program:

Thrive Together is a pilot program (July-December 2024) that aims to create a safe and supportive space for female high school students to discuss mental health, learn coping strategies, and receive peer support. Participants engage in one-on-one and group discussions, receive support and encouragement, and benefit from a sense of community among their peers. Students find a safe space to discuss anything on their minds with our trained mentors, while learning to face today's challenges.

Visit arruralhealth.org for more information.