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Executive Summary

Access to Mental Health Services in Rural Pennsylvania

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Key Findings

- The most common barriers to supplying mental health services in rural Pennsylvania were shortages of professionals, issues with professional qualifications and credentialing, fragmented levels of care, flaws in interagency collaboration, and funding and insurance challenges.
- Six core challenges in accessing mental health services faced by rural residents, especially youth and the elderly, were: (1) transportation issues, (2) health insurance as an access issue, (3) stigma and mental health acceptance, (4) distance and travel time and conflicting work hours, (5) family engagement and the role of family, and (6) telehealth, internet access, and technology issues.
- Older rural residents had more mental health care needs than their urban counterparts.
- In the resident survey sample, about 35 percent of parents said their children had, at some point, been diagnosed with a mental health disorder by a health professional.
- In the resident survey sample, 45 percent of parents said their children had a history of mental health treatment, and about 46 percent said their children had seen a mental health professional within a year.
- Survey respondents with more unmet mental health needs were typically male, not married, and had lower educational attainment levels.

Key Policy Considerations

- Address transportation barriers related to long travel distances, affordability, and the Medical Assistance Transportation Program (MATP).
- Attract qualified mental health professionals to rural areas and facilitate staff credentialing and education to ensure availability of providers.
- Promote the de-stigmatization of mental health through education, prevention, and normalization.
- Expand and fund telehealth, case management services, and in-home and mobile therapy to address rural service access barriers.
- Amplify the role of schools in addressing youth mental health and expand school-based therapy.
- Integrate physical and behavioral health for prevention and early intervention purposes.
- Improve and strengthen interagency collaboration for streamlined communication and resources sharing.
- Bridge gaps in the levels of care to access appropriate services based on mental health needs.
- Address budgetary concerns for mental health prevention and service delivery.
- Ease state regulations around licensure, consumer rights, and age-specific requirements.

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Research Background

This research assessed the demand for mental health services in rural Pennsylvania with a focus on youth and the elderly.

It identified challenges these populations face in accessing mental health care to provide options for improving and expanding mental health care services for underserved rural Pennsylvanians.

The research team conducted secondary data analysis, surveys of rural residents, focus groups with mental health service providers and health insurance providers, and in-depth, individual interviews with mental health service recipients.

Specifically, the team analyzed state-level data from the 2017 and 2019 Pennsylvania Youth Surveys (PAYS) and the 2017 Behavioral Risk Factor Surveillance System (BRFSS) to assess the needs of mental health services among youth and the elderly in rural areas.

The team collected online and in-person surveys with rural residents to examine mental health status, mental health literacy, service use, and any challenges accessing mental health services including stigma, transportation, insurance, and more. The final sample size of the resident survey was 307.

Among respondents, there were 190 parents of youth and 117 older adults. The team conducted 25 online focus groups with mental health service providers (n=119) and six online focus groups with insurance providers (n=28).

In addition, the team conducted 15 in-depth, individual interviews with mental health service recipients (n=15) to explore barriers to accessing mental health services in rural areas and to identify policy recommendations.

Research Findings

This study yielded several significant findings. The secondary data analysis of 2017 BRFSS data revealed that older rural residents had more mental health care needs than their urban counterparts. Older rural adults showed higher frequency of mental distress, lack of affordable services, and lack of family doctors when compared to their urban peers.

The research found no statistically significant results among school-aged children when examining variables related to mental health in the 2017 and 2019 PAYS data sets.

The resident survey results revealed that parents of youth in rural areas have substantially high mental health care needs for their children.

More than a third of the parents (35 percent) reported their children had, at one point, been diagnosed with a mental health disorder by a health professional. Slightly more than 45 percent of parents said their children had a history of mental health treatment. Furthermore, 46 percent said their children had seen a mental health professional within a year.

Still, about 18 percent of respondents (34 people) reported that there was a time in the past 12 months when at least one of their children needed mental health care but could not or did not get it.

Most parents selected a solution to improve access to mental health care in rural areas as "increasing the number of mental health service providers," followed by "mental health promotion programs in schools," "public education campaigns about mental health awareness in general," "communitybased population health promotion programs (to teach life skills, coping, etc.)," "mental health service providers practicing in hospitals," and other options.

Visit www.rural.pa.gov for the full report, Access to Mental Health Services in Rural Pennsylvnaia.

Regarding the level of resource-oriented mental health literacy, 59 percent of parents reported that they know where to go to receive mental health services. However, less than half of parents agreed that they know how to contact a mental health clinic in their area. Also, only about 55 percent of parents knew where to get useful information about mental illness.

Although not at the same level as youth, older adults also revealed mental health care needs in rural areas. About 17 percent reported that they had been diagnosed with a mental health disorder by a health professional, and 25 percent reported that they have a history of mental health treatment. About 7 percent of respondents (nine people) reported that there was a time in the past 12 months when they needed mental health care, such as medications and/or counseling, but could not or did not get it.

For solutions to improving access to mental health care in rural areas, older respondents selected a top preventive option of "Community-based population health promotion programs to teach life skills, coping, etc." These were followed by transportation services, mental health promotion programs in schools, an increase in the number of mental health service providers, and other suggestions. Regarding the level of resourceoriented mental health literacy, 70 percent of respondents reported that they know how to get the number of a suicide prevention hotline.

However, only about half reported that they know how to contact a mental health clinic in their area. Based on the qualitative data analysis, themes were identified surrounding the supply and delivery of mental health services, challenges and barriers associated with accessing mental health services, and possible strategies to improve and expand mental health services. Five key themes emerged based on the conversations with service providers and insurance company representatives that relate to the supply of mental health services in rural Pennsylvania:

(1) availability of providers and shortage of professionals,

(2) staffing and organizational issues, such as education and credentialing,

3) intensity of and levels of care,

(4) interagency collaboration, and

(5) funding and insurance challenges.

There was agreement among service providers and insurers that a major barrier for delivering mental health services to rural clients is shortage of qualified professionals and finding clinicians that have the appropriate level of credentialing approved by insurance companies for the types of services provided.

Six themes emerged based on the conversations with service providers and insurance company representatives as well as interviews with service users that concerned challenges in accessing mental health services faced by rural residents, especially youth and the elderly:

(1) transportation issues,

(2) health insurance as an access issue,

(3) stigma and mental health acceptance,

(4) distance and travel time and conflicting work hours,

(5) family engagement and the role of family, and

(6) telehealth, internet access, and technology issues.

Participants across all focus groups consistently brought up transportation as the single biggest barrier playing a large role in accessing mental health services in rural areas. Both focus group and interview participants also reported insurance as another primary challenge in accessing mental health services in rural Pennsylvania.

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1P0122 – 300