



Training Rural Mental Health Providers

Minnesota Consortium for Advanced Rural Psychology Training

Mental Health in Rural America

- An estimated 2/3 of rural residents with mental illness receive no care at all
- Less than 10% of the 2200 rural hospitals across the nation offer mental health services
- 80 of 87 Minnesota counties are mental health shortage areas
- 75% of federally designated Mental Health Professional Shortage Areas are rural
- Rural areas lack all forms of healthcare providers. But, the shortage of mental health professionals in rural areas outstrips that for medical or dental health. In the 3075 counties in the United States, 55% (all rural) have no practicing psychologist, psychiatrist, or social worker (Bureau of Primary Health Care, 1999).

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Mental Health in Rural America

- Transportation is a serious obstacle to obtaining mental health services in rural communities (*Bierman, 1997*)
- Most rural residents face "triple jeopardy": They are poor, uninsured (20% of rural residents have no health insurance), and live in isolated area (*Fingerhut & Gunderson, 1995*)
- Rural residents face challenges with "accessibility," "availability," and "acceptability" of mental health services.

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Mental Health in Rural America

- Over the past 20 years, rural suicide rates have surpassed urban suicide rates (*Fingerhut & Gunderson, 1995*)
- Compared to urban communities, rural communities:...have scarcer resources, higher rates of poverty, lack of access to employment, limited insurance coverage, lack of formal higher education, higher illiteracy, higher rates of disability, and less adequate health care (*Murray & Keller, 1991*)
- This trend appears to be continuing
 - 11.6 fatal suicides per 100,000 rural vs. 8.1 per 100,000 urban
 - (*Minnesota Department of Health, 2005*)

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Challenges In Addressing the Needs

Underserved by mental health services

Geographic distance and access to care

Recruiting and retaining providers

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Difficulty Recruiting Providers

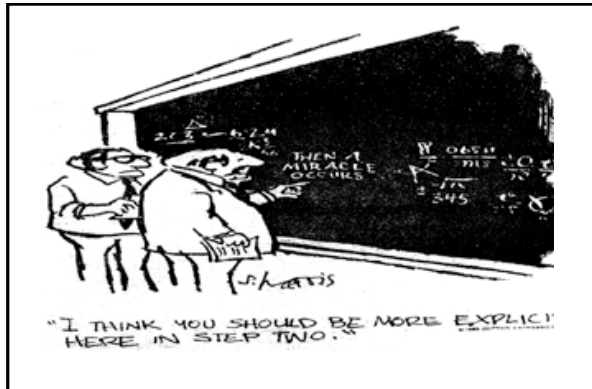
- Unique demands of rural practice
 - Professional isolation
 - Few community resources
 - Demands multidisciplinary networking
 - Need for generalist practice in a world of specialization
 - Poor reimbursement from government programs (Medicare, Medicaid)
 - Ethical boundary issues
 - Competency issues ("Is something better than nothing?")
 - *Minimal training regarding these issues in grad school.*

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Wishes Can Come True...

- Region provides wide variety of training experiences- Vulnerabilities can become strengths!
- Pulled together area agencies expressing
 - Same desires
 - Same challenges
 - Desire to participate in innovative training program
- MCARPT was born!

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Moving Forward

- Conversations with Minnesota Office of Rural Health and Primary Care in 2002 (ORHPC)
- Formalized consortium of agencies (501c3)
- Applied for State of Minnesota Planning Grant: \$23,000 ("Be careful what you wish for")
- Wrote curriculum based on acquisition of competencies for rural practice.

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The Participants

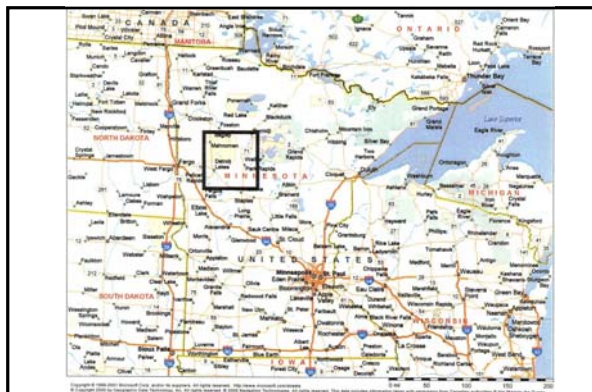
- **MeritCare Clinic Detroit Lakes:** Primary care family medicine clinic with 14 multidisciplinary medical providers
- **MeritCare Clinic Perham:** Primary care family medicine clinic with 12 multidisciplinary medical providers
- **Perham Hospital and Nursing Home/ Golden Living Center:** 25 bed critical access hospital attached to 96 bed skilled nursing facility; Extended care facility housing clients with difficult behavioral issues.
- **Lakeland Mental Health Center:** Community mental health center offering traditional outpatient mental health services along with day treatment, crisis intervention, and community support services

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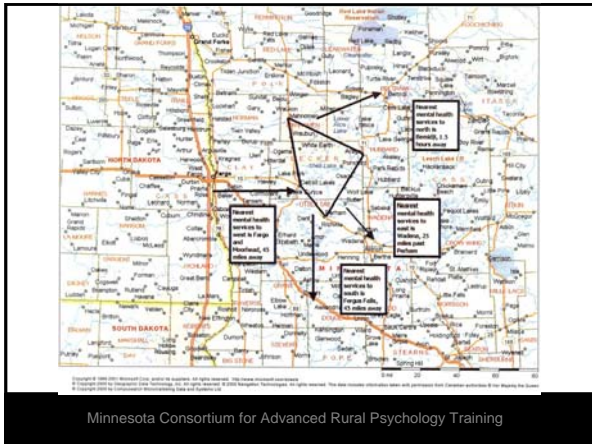
The Participants

- **Lakes Crisis and Resource Center:** Local crisis center serving victims of domestic violence and other forms of trauma
- **Becker County Social Services, Juvenile Probation and Public Health:** County social service and public health agency providing a full spectrum of social, financial, protective, health, and support services
- **Detroit Lakes School District (ISD #22):** High school, middle school, and three elementary schools form the district
- **White Earth Health Services:** Multidisciplinary Federal healthcare clinic, run by Indian Health Services, serving the White Earth Band of Ojibwe
- **Pine Point School:** Elementary school on WE reservation (Ponsford)

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Curriculum/Objectives

Core competencies within partner agencies

- Generalist practice
- Linking services

Literature competencies

- Weekly article review and discussion
- Apply to practical situations

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Curriculum/Objectives

Activities and Rotations

- Providing needed services in remote areas
- Experiential learning

Objective documentation of competency

- Supervisor feedback
- Supervisee feedback

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Benefit to Rural Communities

- Financially: \$788,666 in services provided between 10/1/2007 to 6/30/09
- In 2007-08 training year, MCARPT provided:
 - 306 hours of diagnostic assessment
 - 432 hours of psychological testing
 - 716 hours of individual and group psychotherapy
 - 2824 total hours of direct and indirect clinical services to 219 different consumers
- In 2008/09 training year (through June 30, 2009)
 - 253 hours of diagnostic assessment
 - 105 hours of psychological testing
 - 430 hours of individual psychotherapy
 - 1927 hours of direct and indirect clinical services to 211 different consumers
- Greater cohesion between agencies

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Ongoing Considerations

- Maintaining healthy interagency relationships
 - ("Can't we all just get along?")
- Agency mission and goals change....dropping in and out of the consortium.
- Augmenting and enhancing vs. supplanting existing services
 - (i.e. "no slave labor")
 - Retaining sufficient supervisor diversity and numbers
- Seeking sustainability: Grants, donations, United Way, congressional earmark,
- Community logistics and acceptance
- Maintaining the mission vs. financial survival
 - --> approximately \$55,000/year/trainee

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Benefits to Trainees

- Interdisciplinary and interagency collaboration
- Effective use of community resources
- Experience in a wide variety of settings
 - Different systems of care
 - Different treatment modalities
 - Different patient populations
 - Training in generalist practice, ethical decision making, and nuances of rural practice

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Benefits to Trainees

- Integration into community
- Inform career decisions: "Is rural what I want?"
- Flexibility in practice
- Mentoring and supervision (quarterly feedback)
- Preparation for licensure

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Perspectives

"I feel the most positive aspect of the program, above and beyond the outstanding training, is its ability to foster a strong sense of community. Placement in various agencies throughout the community affords the opportunity to develop relationships with many different individuals who also live and work within the community. It doesn't take long before you walk down the street and run into colleagues and coworkers. Through these contacts, working relationships quickly turn into friendships, and when this happens the community quickly begins to feel like home."

*-Brian Gatheridge, Ph.D, LP
Former MCARPT Resident*

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Perspectives

- "Tell me the landscape where you live, and I will tell you who you are."
-Jose Ortega y Gasset
- "If you want to build a ship, don't drum up people to collect wood, and don't assign them tasks and work, but rather teach them to long for the endless immensity of the sea."
*-Antoine De Saint-Exupery
1900-1944*

Minnesota Consortium for Advanced Rural Psychology Training

Minnesota Consortium for Advanced Rural Psychology Training (MCARPT)

Clinical Director: Jeffrey Leichter, Ph.D., L.P. jleichter@mcarrpt.org
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website: www.mcarpt.org

2009-10 Psychology Residents
Nicholas Leonard Ph.D.: University of Minnesota
Desiree Jagow-France Ph.D.: University of North Dakota

2008-09 Psychology Resident:
Jon Alligada Psy.D.: Graduate of Argosy University, Minneapolis
Abby Stanislaw Psy.D.: Graduate of Argosy University, Minneapolis

2007-2008 Psychology Residents:
Brian Gatheridge, Ph.D., L.P.
Graduate of Washington State University
Currently employed by MeritCare Health System, Detroit Lakes, MN.

Kimberly Haala, Ph.D., L.P.
Graduate of Oklahoma State University
Currently employed by Mankato Clinic, Mankato, MN

2006-2007 Psychology Resident:
Susan Weinel Psy.D., L.P.
Graduate of Argosy University, Minneapolis
Currently employed by Mayo Health System, Albert Lea, MN
