

**Barriers to Resources for individuals with Severe Mental Illness in Rural Kentucky**

**Availability**

* Chronic shortages of mental health professionals exist in Kentucky’s rural areas and mental health providers are more likely to practice in urban centers because of better salaries and benefits.

**Acceptability**

* Pull yourself by the bootstraps” mentality…The stigma of needing or receiving mental healthcare and fewer choices of trained professionals who work in rural areas create a huge barrier to care.

**Desire to Receive Care**

* Desire is a more in depth issue than ***Acceptability.*** Desire can relate to the *‘culture’* or ‘*perception.’* The challenge is to overcome the stigma of what it means to have a mental illness (societal problem) and can lead to shame or embarrassment for the individual and their family for generations.

**Lack of Anonymity When Seeking Treatment**

* Anonymity and privacy are particularly challenging in rural communities. A provider may be a friend or associate, which also may make an individual reluctant to reach out for help because of the lack of anonymity. Individuals may fear being seen walking into a mental health clinic and this fear may deter them from seeking help.

**Isolation**

* Living in rural and remote areas often means people can feel socially isolated. This can contribute to stress, anxiety and depression which can have a detrimental effect on people's mental health and wellbeing. Those in rural areas seem to be *less likely* to seek help in comparison to their urban counterparts, where more resources are available to them.

**Health Disparities Key Findings**

 The Appalachian Region Health Commission studied 41 health indicators and of those, 31 was worse than the performance in the United States as a whole. The analysis included 7 of the 10 leading causes of death in the United States: heart disease, cancer, chronic obstructive pulmonary disease (COPD), injury, stroke, diabetes, and **suicide—and the Appalachian Region had higher mortality rates than the nation for each.**

* The Appalachian Region’s number of physically unhealthy days, mentally unhealthy days, and prevalence of depression are all higher than the national averages for these measures.
* Obesity, smoking, and physical inactivity—risk factors for a number of health outcomes—are all higher in Appalachia than in the nation overall.
* The Region also has lower supplies of healthcare professionals when compared with the United States as a whole, including primary care physicians, mental health providers, specialty physicians, and dentists.
* Lower household incomes and higher poverty rates—both social determinants of health—reflect worse living conditions in the Region than in the nation as a whole.

**Transportation**

* In rural settings, not all individuals have access to reliable transportation to healthcare and this problem specifically impacts the most vulnerable, including low-income communities and disabled individuals. Rural community members are more likely than urban residents to rely on automobiles as a means of transportation, meaning rural residents without automobiles are more isolated from proper treatment. There are fewer mental health providers than primary care providers in network plans, meaning community members have to travel farther for mental healthcare. Mental healthcare services may be farther distances for rural residents, and without access to transportation, care may be inaccessible.

**Resources**

* **Barriers to Mental Health Treatment in Rural Older Adults**

Provides an overview of the perceived barriers to mental health treatment for older adults in rural communities.

Author(s): Brenes, G.A., Danhauer, S.C., Lyles, M.F., Hogan, P.E., & Miller, M.E.

Citation: American Journal of Geriatric Psychiatry, 23(11), 1172-1178

Date: 11/2015

* **Behavioral Health Service Delivery for Vulnerable Populations**

Discusses the behavioral health workforce shortage in rural areas and potential solutions.

Author(s): Buche, J., Beck, A., Page, C., Singer, P., Casemore, B., et al.

Organization(s): University of Michigan School of Public Health Behavioral Health Workforce Research Center

Date: 11/2016

* **Growing Older: Providing Integrated Care for an Aging Population**

Offers strategies for providers to provide integrated care to older adults with mental health and substance use disorders.

Organization(s): Center for Integrated Health Solutions

Date: 10/2016