The idea for this Handbook emerged from a series of conversations that took place in the fall of 2012. JP and I had been deeply involved in the development of school mental health (SMH) initiatives in rural Appalachia for several years. In search of guidance tailored for our remote settings, we consulted the empirical literature on schools, children’s mental health, community psychology, implementation science, outcome assessment, school administration, and policy to practice outlets. We also searched for more comprehensive resources in school mental health, child and adolescent behavioral health care, school social work, counseling, nursing, and school psychology. There were certainly some excellent resources already available, including the second edition of the Handbook of School Mental Health (Springer), yet the issue of rural SMH was not addressed specifically. The closest approximation found were two single chapters in edited books or handbooks, including a chapter in Rural Mental Health: Issues, Policies, and Best Practices (Waguespack, Broussard, & Guilfou, 2012) and another single chapter in the Handbook of Culturally Responsive School Mental Health: Advancing Research, Training, Practice, and Policy (Owens, Watabe, & Michael, 2013).

Though these works are outstanding, it became clear to us that the body of literature on rural issues in SMH was otherwise scant, disjointed, unorganized, and less than user-friendly. Around the same time and coincidentally, Springer Associate Editor, Garth Haller, contacted me to inquire if I had any book ideas. JP and I agreed to meet Garth and his colleague, Senior Editor Judy Jones, in Seattle at the Annual National Association of School Psychologists (NASP) Convention to discuss the idea further. As the conversation deepened, we felt optimistic that there was a sufficient need to assemble an inaugural Handbook of Rural School Mental Health. Although it certainly took longer than expected, we are thrilled with the final product.

When we started to organize the content of this book, we approached it as something of a thought experiment. We asked ourselves, “If we could go back in time to when we started this work, what would we want to know to avoid some of the mistakes we made and handle some of the problems we encountered early on?” We quickly realized that this book needed to move well beyond the nuts and bolts of clinical practice in school settings and address the additional issues of development, implementation, process, policy, sustainability, and evaluation. A successful rural SMH program takes a proverbial village, and we decided that we needed a book that spoke to the need of having all parties come together with respect to their unique perspec-
tives and contributions to create effective programs in the service of students. Therefore, the *Handbook of Rural School Mental Health* addresses the concerns of a diverse array of stakeholders involved in all aspects of the functioning of SMH programs in remote and rural settings. And because we hoped that the book would be valuable to researchers, practitioners, policymakers, educators, and advocates alike, as editors we strove to avoid highly technical and abstract models and instead promote the use of illustrative examples to bring important issues and concepts to life for the reader. We also attempted to encourage chapter authors to create bridges between concepts familiar to mental health service providers and those used in education. While we cannot claim that this volume is a universal blueprint for creating, sustaining, and improving SMH programs in rural areas—indeed, we would argue that such an endeavor would be impossible—we do hope that the book provides a thorough treatment of the major issues that rural SMH programs are likely to face.

In addition to this preface, Mark Weist thoughtfully sets the tone for the *Handbook* by providing his expert perspective on the field of school mental health, along with an attempt to persuade the reader of the rationale for a specific resource for stakeholders in rural schools. The contents of the Handbook are separated into four parts: (1) *Development of Rural School Mental Health Initiatives: Rationale, Policies, Ethics, and Competencies*; (2) *Clinical and Cultural Conditions in Rural School Settings*; (3) *Addressing Challenges in Delivering Rural School Mental Health Services*; and (4) *Implementing, Evaluating, and Sustaining Rural School Mental Health Programs*.

In *Part I*, the broad perspectives of national and international school mental health experts, educators, and community mental health leaders are included. The topics range from the initial development and implementation of school mental health programs, the reasons why SMH should be considered, and how implementation can proceed in an empirically informed manner. Sharon A. Hoover and Ashley Mayworm begin the part with *The Benefits of School Mental Health*. They discuss the unique position of SMH programs to facilitate access to care in vulnerable rural settings, address stigma as a barrier to care, provide opportunities for early identification and intervention for mental and behavioral health concerns, facilitate a full continuum of services within the school, and provide care in a young person’s natural environment. Hoover and Mayworm make a convincing case for implementation of school mental health programs by highlighting mental and behavioral health outcomes from school mental health interventions. Next, E. Rebekah Siceloff, Christian Barnes-Young, Cameron Massey, Mitch Yell, and Mark Weist describe the process of developing effective policy supports for rural school mental health programs in the chapter *Building Policy Support for School Mental Health in Rural Settings*. Siceloff, Barnes-Young, Massey, Yell, and Weist chronicle important policy considerations and challenges, namely sustainability and funding, to implementing school mental health programs unique to rural settings. They end the chapter with a case study detailing school mental health in South Carolina and the innovative strategies employed to address the challenge of sustainability.
The next two chapters consider practitioner-related aspects of developing rural school mental health programs. Michael Sulkowski considers ethical issues commonly encountered by school mental health practitioners relevant to tight-knit rural communities where mental health providers are scarce and provides a guide for laws that affect school mental health in the chapter Legal and Ethical Issues Related to Rural School Mental Health. Sulkowski’s guide to navigating legal and ethical issues in rural SMH practice provides valuable information to inform program policies and procedures. In General and Specific Competencies for School Mental Health in Rural Settings, Dawn Anderson-Butcher, Jill Hoffman, David Rochman, and Michael Fuller describe the competencies and skills necessary for practitioners in rural school mental health programs. This chapter is especially helpful in developing relevant training competencies for rural school mental health practitioners, considering how being a well-trained mental health service provider translates into the rural school context, and understanding what areas of need are unique to rural school mental health settings.

The final two chapters address the development of school mental health initiatives through consideration of issues related to teachers and school mental health in rural communities. Susan Rodger, Kathy Hibbert, and Michelle Gilpin address the critically important relationship between teachers and school mental health programs in the chapter Preservice Teacher Education for School Mental Health in a Rural Community. Rodger, Hibbert, and Gilpin describe important aspects of teacher preservice education that may contribute to rural school mental health and is a helpful resource for a rural school mental health practitioner’s understanding of school and teacher functioning. Further addressing school mental health’s relevance to rural teachers, Timothy Carey concludes this part with Why Would Teachers Care? The Value of Rural School Mental Health from an Educator’s Standpoint. Carey attends to educators’ values, pointing to the benefits of an increased focus on mental health in rural schools that may improve school functioning for students and teachers.

Part II focuses on supporting SMH practitioners by summarizing the current state of research on assessment and treatment practices for problems commonly seen in school settings and providing practical guidelines for utilizing evidence-based practices in their own programs. This part begins with a piece written by Alex Kirk, Rafaella Sale, and Eric Youngstrom titled, Rural America and Evidence-Based Assessment: The Potential for a Happy Marriage. Kirk, Sale, and Youngstrom make a case for contextualizing broadly evidence-based assessment in rural schools as a strategy for reducing costs and improving the efficiency of SMH programs. It is an excellent read for those interested in merging empirically based assessment practices into real world settings. Following this chapter, authors Alex Holdaway, Verenea Serrano, and Julie Sarno Owens outline how best to identify and treat ADHD in rural settings in their chapter titled Effective Assessment and Intervention for Children with ADHD in Rural Elementary School Settings. We felt fortunate to have received this contribution, given that the authors (and notably Dr. Owens) have established exceptional reputations for developing and testing ADHD interventions in the lab and successfully adapting them for use in community settings.
The next three chapters discuss considerations for preventing suicide and treating anxiety and depression in rural settings. First, Marisa Schorr, Whitney Van Sant, and JP Jameson make the case for schools as a logical starting point for suicide prevention interventions in rural communities in the chapter *Preventing Suicide Among Students in Rural Schools*. Schorr, Van Sant, and Jameson discuss salient suicide risk factors in rural communities and provide an overview of school-based suicide prevention programs, highlighting the characteristics of such programs that are adaptable for rural schools. This section is an excellent starting point for implementing rural school-based suicide prevention and postvention practices and considering strategies for overcoming barriers to implementation. In the chapter *The Identification and Treatment of Anxiety Among Children in Rural Settings*, Sophie Schneider, Suzanne Davies, and Heidi Lyneham provide convincing evidence in support of telehealth as a useful anxiety treatment strategy that can increase the accessibility of mental health treatment in rural communities. Schneider, Davies, and Lyneham provide a thoughtful analysis of anxiety assessment and treatment strategies along with relevant adaptations and challenges for rural contexts. Carissa Orlando, Abby Albright Bode, and Kurt Michael outline depression treatment challenges in rural settings and set up school mental health programs as an innovative approach to addressing these challenges in the chapter *Depression and Rural School Mental Health: Best Practices*. By providing helpful examples of school mental health programs treating depression, Orlando, Albright Bode, and Michael provide a framework for evidence-based assessment and treatment of depression and useful adaptations for treating depression within rural schools.

The following three chapters discuss treatment considerations for other clinical concerns in rural schools. Kristyn Zajac, Arthur Andrews, and Ashli Sheidow provide information about the manifestation of adolescent substance use and conduct problems in rural settings and how limited access to treatment can exacerbate substance and conduct-related concerns in the chapter *Conduct Disorders and Substance Abuse in Rural School Settings*. Zajac, Andrews, and Sheidow provide a compelling case for implementing evidence-based treatments for substance use and conduct problems within the school setting as a potential solution for limited access to mental health treatment while providing thoughtful considerations for future program development. Then, Rafaella Sale, Alex Kirk, and Eric Youngstrom discuss the school as the optimal setting for making gains in early detection and intervention for pediatric bipolar disorder in rural communities in the chapter *What Lies Beneath: Pediatric Bipolar Disorder in the Context of the Rural School*. Sale, Kirk, and Youngstrom advocate for a collaborative approach between educators and mental health professionals in early identification of pediatric bipolar disorder as it presents in the classroom to aid early intervention, which further emphasizes the importance of school mental health programs for rural communities. Last, in the chapter *Supporting Students with Autism Spectrum Disorder in Rural Schools*, Cynthia Anderson, Ryan Martin, and Rocky Haynes provide a framework for supporting students with autism, emphasizing avenues for appropriate assessment, intervention, and monitoring of intervention within schools with scarce resources. Anderson, Martin, and Haynes pay
particular attention to evidence-based interventions that are feasible within the school setting, making this chapter especially useful for educators and mental health professionals interested in increasing school supports for students with autism.

Part II concludes with Robin Kowalski, Gary W. Giumetti, and Susan P. Limber discussing the gap in the literature examining bullying and cyberbullying in rural settings to the detriment of our understanding of these experiences for rural adolescents in the chapter Bullying and Cyberbullying Among Rural Youth. Pointing to the differences between rural and urban settings, Kowalski, Giumetti, and Limber discuss the implications for prevention and intervention based on what is known about bullying and cyberbullying among both rural and urban adolescents, and provide guidance for future research endeavors in this understudied area.

Part III addresses common barriers to SMH service delivery in rural areas (e.g., stigma and suspicion of mental health services, mental health service provider shortages, building integrated care systems with limited resources) by presenting innovative practice models that have demonstrated and documented success in rural schools. Beginning this section, Scotty Hargrove, Lisa Curtin, and Brittany Kirschner discuss barriers related to the stereotypes of rural settings themselves that have affected policies related to mental health care and advocate for policy that reflects a greater understanding of diversity in rural settings in the chapter Ruralism and Regionalism: Myths and Misgivings Regarding the Homogeneity of Rural Populations. Hargrove, Curtin, and Kirschner describe the rationale for policy support for school mental health programs as a viable method for context-specific provision of mental health care common to all rural communities.

The next two chapters examine family-related variables as both assets to overcoming barriers related to rural settings and as barriers themselves. Shannon Holmes, Amanda Witte, and Susan Sheridan consider the unique strengths of rural parents and teachers encompassed in Conjoint Behavioral Consultation as one method for overcoming barriers to mental health treatment in rural communities in the chapter Conjoint Behavioral Consultation in Rural Schools. Holmes, Witte, and Sheridan further strengthen their argument for Conjoint Behavioral Consultation as a viable approach for providing acceptable school mental health treatment in rural settings by detailing the results of a randomized controlled trial examining the efficacy of this approach in rural communities. Then, Lisa Curtin, Cameron Massey, and Sue Keefe describe patterns of intergenerational mental health variables in rural communities and how such variables are integral to the understanding of rural students’ mental health concerns in their chapter Intergenerational Patterns of Mental Illness in Rural Settings and Their Relevance for School Mental Health. By examining the importance of family-related mental health variables to the provision of school mental health services and describing the operation of a school mental health program oriented to these contextual issues, Curtin, Massey, and Keefe provide compelling suggestions for working with both students and their families in rural school mental health programs.
Jeannie Golden, Dorothy Dator, Katherine Gitto, and Christelle Garza conclude this part with the chapter *Contributions of Applied Behavior Analysis to School-Based Mental Health Services*. Golden, Dator, Gitto, and Garza describe the versatile nature and wide applicability of Applied Behavior Analysis (ABA) as a method for increasing widespread access to skill provision at home and in schools for parents, students, and educators in rural schools. Golden, Dator, Gitto, and Garza critically examine the ability of ABA to address many barriers to school mental health care and where ABA may fall short, the authors provide further evidence for the importance of collaboration between parents, educators, and clinicians in overcoming barriers to school-based mental health services.

*Part IV* focuses on methods for evaluating SMH programs and sustaining successful programs over time. The intended audience for the Handbook is researchers, practitioners, and administrators who would benefit from a comprehensive source of information to further benefit service recipients, trainees, and policy makers. Moreover, the Handbook is essential reading for those who endeavor to develop a rural SMH program. Jackie Belhumeur, Erin Butts, Kurt Michael, Steve Zieglosky, Dale DeCoteau, Dale Four Bear, Courage Crawford, Roxanne Gourneau, Ernie Bighorn, Kenneth Ryan, and Linda Farmer begin this part with the chapter *Adapting Crisis Intervention Protocols: Rural and Tribal Voices from Montana*. Belhumeur, Butts, Michael, Zieglosky, DeCoteau, Four Bear, Crawford, Gourneau, Bighorn, Ryan, and Farmer describe efforts to involve rural community agencies and tribal organizations to develop effective crisis intervention protocols in Montana public schools. Moreover, the authors emphasize the importance of youth voice and local champions as central features of effective health promotion and suicide prevention programs. This chapter makes a thoughtful case for facilitating active community engagement in school-based mental health services in rural communities.

The next three chapters examine issues of school mental health program evaluation, implementation, and continued improvement in rural settings. First, Brandon Schultz, Anne Dawson, Clifton Mixon, Craig Spiel, and Steve Evans provide an expert discussion of the challenges associated with rural school mental health program evaluation in the chapter *Evaluating Rural School Mental Health Programs*. With a focus on specific evaluation concerns, Schultz, Dawson, Mixon, Spiel, and Evans detail the benefits of a fundamental change to program evaluation by school mental health professionals. Next, Barbara Sims and Brenda Melcher provide a valuable framework for implementation in the chapter *Active Implementation Frameworks: Their Importance to Implementing and Sustaining Effective Mental Health Programs in Rural Schools*. This handbook benefits from the helpful guide Sims and Melcher provide that is relevant to both educators and clinicians interested in implementing practical and effective school mental health programs in rural settings. Melissa Maras, Paul Flaspohler, Marissa Smith-Millman, and Lindsay Oram conclude this part by discussing the need for innovative frameworks for planning, implementing, and evaluating improvement in effective and efficient rural school mental health programs in the chapter *Planning, Implementing, and Improving Rural School Mental Health Programs*. 
Health Programs. Maras, Flaspohler, Smith-Millman, and Oram anchor the entire Handbook by describing the process of improving school mental health programs as essential to program sustainability and provide an excellent and innovative suggestion for building the capacity for effective, practical, and sustainable rural school mental health programs.

We were truly honored and blessed to receive so many exemplary contributions from the entire group of 73 esteemed authors. Editing this volume has certainly expanded the breadth and depth of our knowledge, and we have taken many lessons from these chapters that have helped us improve our own programs. We hope that the Handbook of Rural School Mental Health is as informative to your work, regardless of your role in providing or supporting access to mental health in the schools.

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References


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