In rural communities, mental health services are often limited. Throughout the COVID-19 pandemic, we saw many institutions create innovative solutions to longstanding issues, including access to telehealth. For rural communities, this is a big step in the right direction, as access to mental health services has not always been readily available, although the broadband access which determines the ability to connect to telehealth sessions remains a concern.

Following up on ACCT’s webinar Protecting the Mental Health of Rural Community College Students: Creative Innovations in Challenging Times, participants in a recent peer learning collaborative discussed their institutions’ mental health services, capacities, development, and implementation.

Differing Approaches to Services
At rural community colleges, many staff members wear multiple hats. Some institutions that have dedicated staff primarily supporting student mental health indicated that they are just beginning their journey of providing these services to students. One rural community college leader stated, “we know that we have to do this work if we believe in helping students be successful.”

However, not all rural community colleges have the capacity to have a dedicated staff member who primarily supports student mental health. At some, staff that work within student affairs are tasked with providing additional support to students seeking mental health services. Others have a threat assessment team which follows up directly with students when a staff or faculty member has concerns about a student.

Regardless of internal staff capacity, participants pointed to partnerships with local community organizations which provide mental health services. Others have begun leveraging telehealth services for their students. Still other institutions provide therapy animals, alcohol and substance abuse counselors/programs, and online programs/resources that students can access at all hours of the day or night to seek support. Participants suggested that institutions should establish memorandums of understanding (MOUs) with these providers and document how faculty and staff can refer students to them.

Getting Started
Each institution is at a different place in its journey to providing mental health services. Some indicated that they were just getting started, while others have already established wellness centers and are looking to add additional programs and supports. Many institutions stated that faculty and/or staff have been the primary drivers in developing these services. Communication and training are key to allowing faculty and staff to support students seeking mental health services. Faculty have more opportunities to interact with students, and therefore students feel more comfortable with them. Training faculty and making them aware of what mental health resources are available and how to direct students to them is paramount.

Rural community colleges also should bring students into the conversations early, as understanding their needs helps ensure that services are implemented intentionally. Once services are available, institutions should not only have just a dedicated team, but should also train other staff and faculty on how they can direct students to mental health services. Identifying the general resources, supports, and services available on campus and sharing them can go a long way to ensuring students are supported in their higher education journey.

Learn more at www.acct.org/page/strengthening-rural-community-colleges.

Sean Robins is ACCT policy associate leading the Strengthening Rural Community Colleges Initiative to convene rural community college leaders while providing technical support, assistance, and resources on federal policy and advocacy. This initiative builds on ACCT’s prior work through the Strengthening Rural Community Colleges report that engaged rural community college presidents and trustees to gather information about the challenges faced by these institutions.

Read more at NOW.ACCT.org