

3/3/2022 Agenda

- Welcome and Introductions – Michael Trangle, 10:00-10:30am
 - Respectful meeting guidelines
 - Approve today's agenda – January minutes will be routed via email next week for approval
 - Acknowledgement of loss of Dr. Robert Bosl, representative of family physicians
 - Announcements from appointed Council/Subcommittee members
- Ag and Rural Mental Health: Insights, Challenges, and Resources. Monica Kramer McConkey, LPC, Eyes on the Horizon LLC and Meg Moynihan, MS, MN Department of Agriculture – Cynthia Christensen, 10:30-11:30am
- Review of RFP Priority Areas – Abbie Franklin, 11:30-11:40am
- 2022 Governor & Legislature Report Planning – Michael Trangle, 11:40-12:20pm
- Workgroup updates – Lisa Hoogheem, 12:20-12:55pm
- Next steps and closing – Cici Hughes, 12:55-1:00pm

Respectful Meeting Guidelines

Verbal interruptions during the meeting are not allowed. Please utilize the chat function and “raise hand” feature to engage in the discussion. Appointed members of the Council and Subcommittee will be acknowledged to speak. Open and respectful dialogue is highly encouraged. Fighting words, obscene speech, and true threats are absolutely prohibited. Persons who engage in such prohibited conduct will be given a warning; if the conduct continues, the chat feature will be disabled and/or the person will be removed from the meeting. By remaining in the meeting by WebEx or phone, you are agreeing to follow these guidelines.



Exploring **Farm Stress & Mental Health**

State Advisory Council on Mental Health
March 3, 2022

Monica Kramer McConkey, LPC

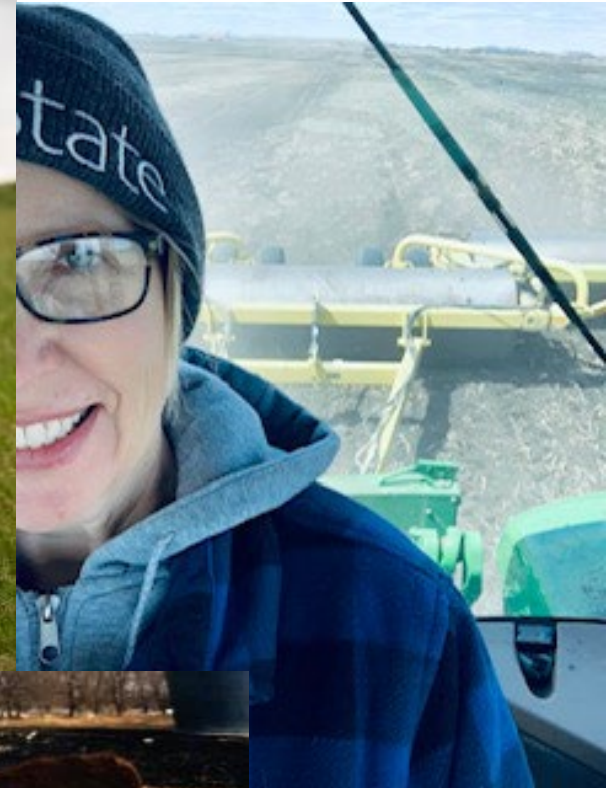
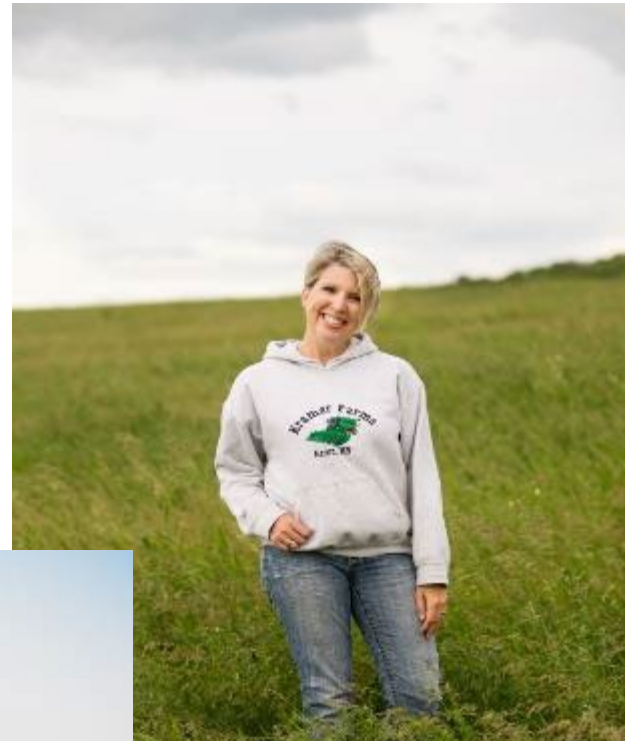


Meg Moynihan, Sr. Advisor

mi DEPARTMENT OF
AGRICULTURE

THE FAMILY FARM

"More than a business, the family farm is a lifestyle, it is an ideal worth preserving"



Rural Mental Health Program

- Minnesota State Legislature funded - biennial
- Contract with Minnesota State Colleges and Universities/Central Lakes College
- Services covered in contract include:
 - Crisis Outreach Support
 - Provide outreach in locations convenient for farmers
 - Provide farmers with mental health outreach materials
 - Provide support for FBM educators
 - Provide mental health support to post-secondary instructors and ag students
 - Collaborate with local authorities for emergency contact and follow up
 - Be available for public presentations as requested by Ag Centers of Excellence, FBM, MDA
 - Provide collaboration with MDA



My work with farmers includes:

- ✓ Individual Farmers
- ✓ Farm Couples
- ✓ Multi-generation Family
- ✓ Farm Youth
- ✓ Farming Partners
- ✓ Ag Business Sector
- ✓ Farm Business Mgmt
- ✓ Rural BH and Healthcare Providers

The Agrarian Imperative

“To farmers, ‘the land is everything.’ Ownership of a family farm is the triumphant result of the struggles of multiple generations. Losing the family farm is the ultimate loss – bringing shame to the generation that has let down their forbearers and dashing the hopes for successors.”

BEHAVIORAL HEALTH ISSUES OF THE AGING AGRICULTURAL POPULATION. By: Michael R. Rosmann, Ph.D . A Conference on the Aging Farm Community: Using Current Health and Safety Status to Map Future Action. Indianapolis, IN Wednesday, March 7, 2007.

The Agrarian Imperative

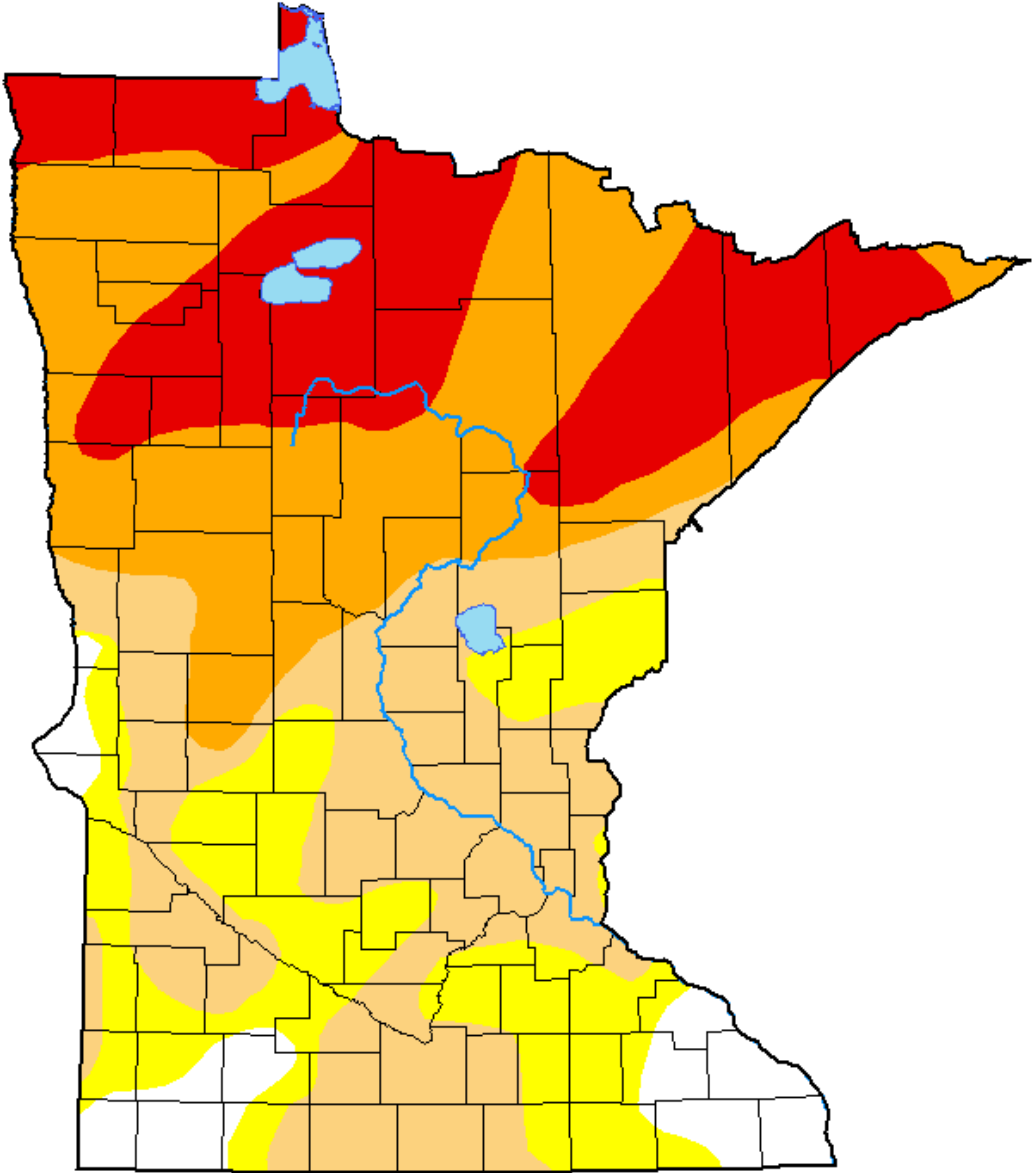
“...impels farmers to hang onto their land at all costs. The agrarian imperative instills farmers to work incredibly hard, to endure unusual pain and hardship, and to take uncommon risks.”

Rosmann MR. The agrarian imperative. *J Agromedicine*. 2010;15(2):71-75. doi:10.1080/10599241003630585

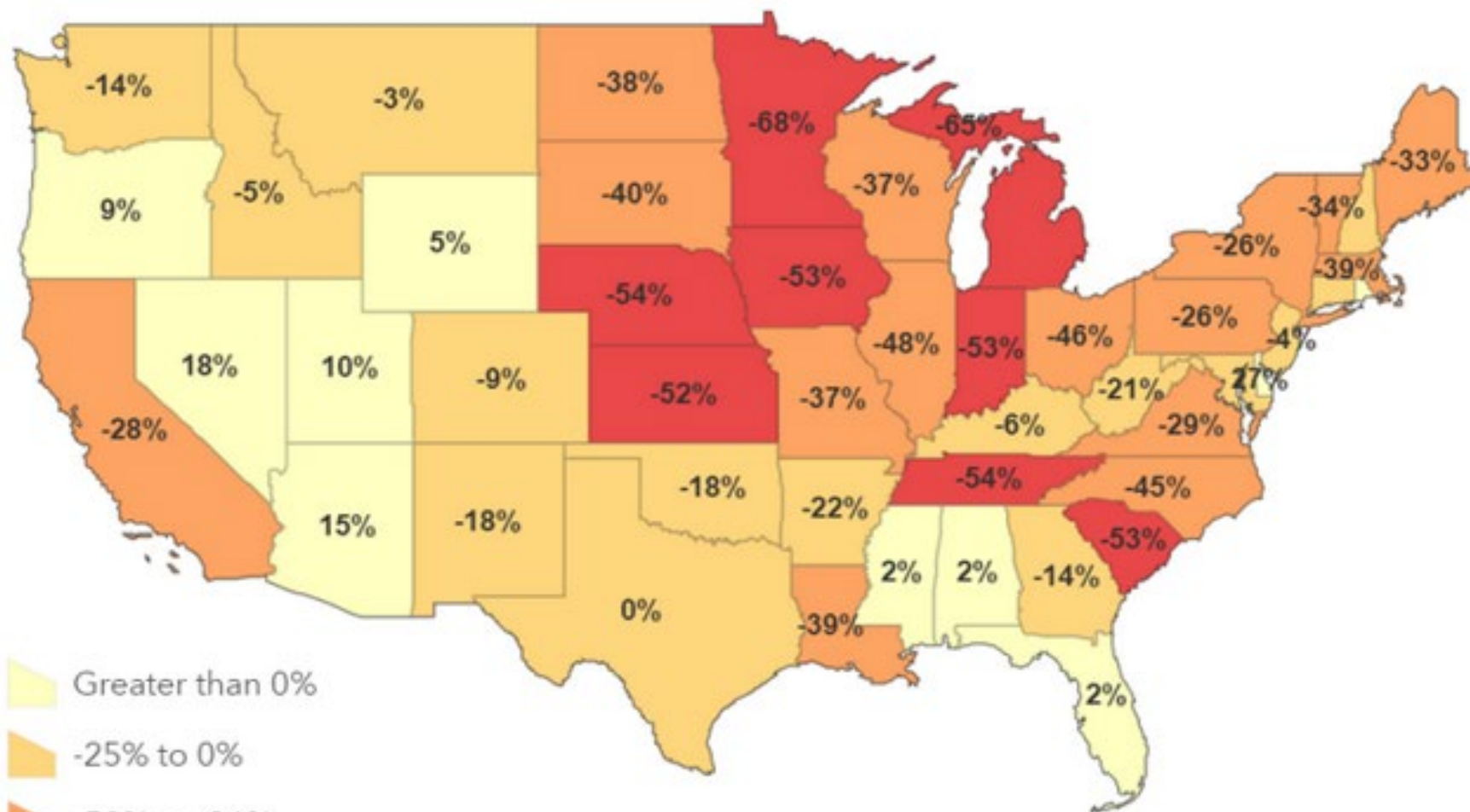
Ranching and Farming Stressors

- Uncontrollable factors
 - Weather/disaster
 - Commodity Markets
 - Uncertainty

Drought map of Minnesota



Changes in State-Level Net Farm Income (Avg. of 2018-2019 versus Avg. 2011-2013)



ag economic
insights

Ranching and Farming Stressors

- Uncontrollable factors
 - Weather/disaster
 - Commodity Markets
 - Uncertainty
- Illness/injury
- Isolation
- Competition
- Increased need for competency
- Irregular/uncertain income
- Transition/Succession
- Long/solitary work hrs
- Barriers to help
 - Lack of services
 - Attitudes & perceptions
 - Health Insurance

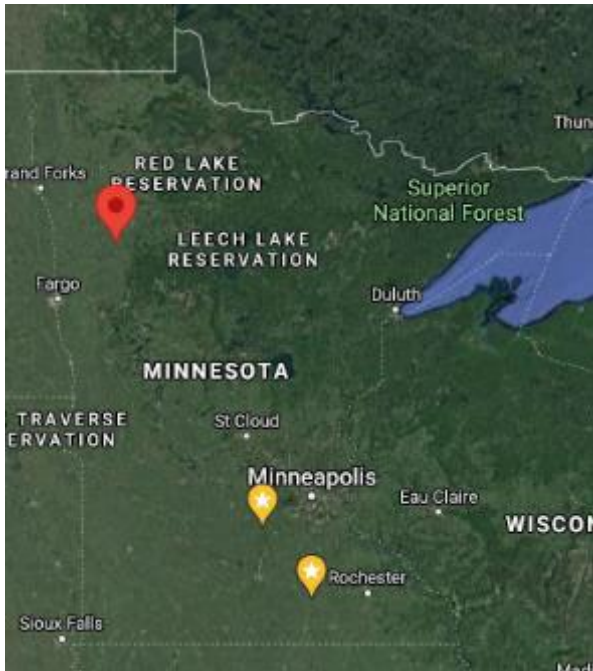
Warning Signs



- Isolation
- Mood Changes
- Abrupt Sales
- Disrepair
- Injury and Illness
- Altered Sleep Patterns
- Increased Substance Use
- Lack of Motivation
- Unpaid Bills
- Hopelessness
- Family Exhibiting Stress

“It’s OK not to be OK”

Retired Beja  MN farmer
Doug Kramer & daughter
Monica in the Red River Farm
Network Studio



2021 Eyes on the Horizon Consulting, LLC

Monica Kramer McConkey

218-280-7785

monicamariekm@yahoo.com



@eyesonthehorizonconsulting



@McconkeyMonica



monicamcconkey

www.eyesonthehorizon.org





Our approach: engagement, collaboration

Coping with Farm & Rural Stress

- Free print copies: 651-201-6012
- Printable PDF online
- Web site with hyperlinks

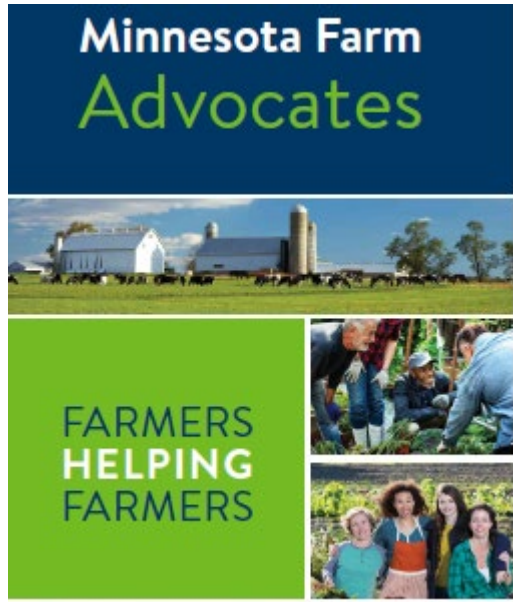
www.minnesotafarmstress.com

- Farm stress listserv

COPING WITH
FARM & RURAL
STRESS
IN MINNESOTA



Legacy Programs



1984



2013

phone, text, email (24/7)
mnfarmstress.com

Farm Mental
Health
Counselors



2002

Mobile Crisis Teams

Intensive, local, face-to-face short-term mental health services. During a crisis, can help people return to their baseline level of functioning.

mn DEPARTMENT OF
HUMAN SERVICES

<https://mn.gov/dhs/crisis>



CELL: **27 47 47

Minnesota Farmer-Lender Mediation

Mediation uses a neutral facilitator to help resolve disputes:

- Mandatory (in MN) opportunity to renegotiate, restructure, or resolve farm debt
- USDA program determinations
- Farm succession/transition
- Neighbor disputes
- Etc.



218-935-5785

z.umn.edu/mediation

Farmers Legal Action Group (FLAG)

- Nonprofit law center
- Roots in the 1980s farm crisis
- Legal services and support for family farmers and their communities to help keep family farmers on the land.



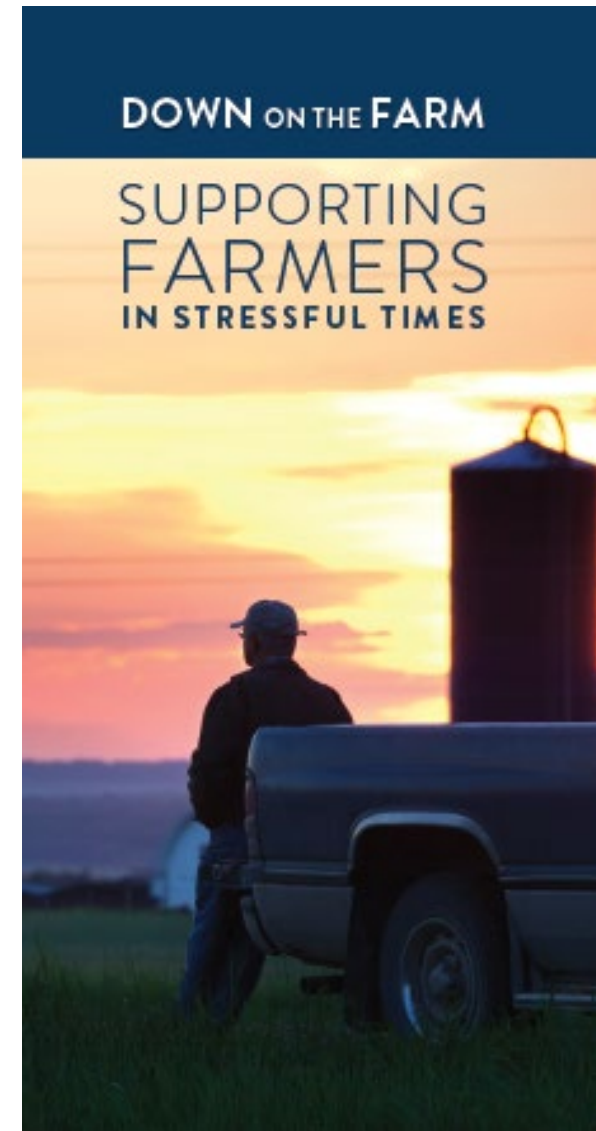
877-860-4349
www.flaginc.org

Foundational Workshops 2018

- Targeted ag advisors, businesspeople
- 6 locations (statewide)
- 500+ attended

→ ***Download free DIY kit***
www.mnfarmstress.com

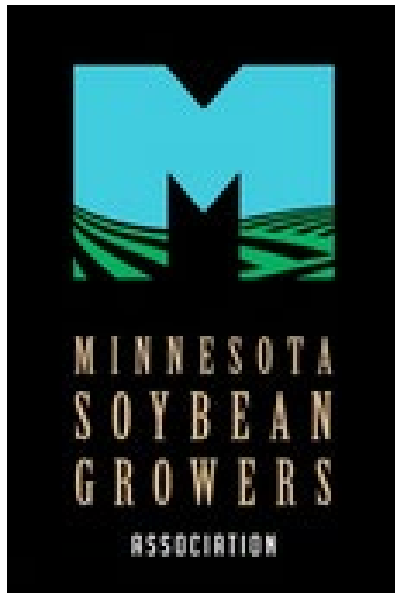
- PowerPoint + teaching guide
- Customizable, free, no license or certification required



Partnerships



Minnesota
Farmers
Union



- TransFARMation (65k – web alone)
- Navigating Conflict & Difficult Conversations in Agriculture (245, 226)
- Supporting Farm Youth in Stress (90, 220)
- safeTALK: Preventing Suicide in Agricultural Communities (233)
- Suicide Bereavement in Farm Country (252, 21 states)
- MN Dept of Health Farm Suicide Data Study



Bend, Don't Break – USDA-NIFA Farm Stress Award

1. Expand and enhance existing MDA programs and services
2. 11 Subawards, engaging diverse array of partners



BDB Projects



Marriage & personal growth retreats



Farm Transition/
Succession



TransFARMation expansion

Culturally-appropriate support for Indigenous, ethnically diverse, & urban food producers



More & better legal counsel for producers



Suicide Prevention for Faith Leaders Conference



safeTALK train-the-trainer

Psych Autopsies (Farm Suicide)



“Ambiguous Loss” T4T

4-H leader training

Stress management & safety for youth



Men's Sheds: "Shoulder to Shoulder"

- Activity clubs for senior guys
- #1 Australia 1989. Now 2,800+ worldwide
- Boost self efficacy, self-determination, self-esteem
- ↓loneliness/isolation; ↑health outcomes



What questions do you have for us?

Meg Moynihan, 651-201-6166

meg.moynihan@state.mn.us

Monica Kramer McConkey, 218-280-7785

monicamariekm@yahoo.com

Request For Proposal (RFP) Involvement Process

- Reason for RFP Process Involvement Plan:
 - [Minnesota Statute 245.697](#) assigns the following duties to the State Advisory Council on Mental Health:
 - advise the governor and heads of state departments and agencies about policy, programs, and services affecting people with mental illness
 - review and comment on all grants dealing with mental health and on the development and implementation of state and local mental health plans

Current RFPs for Review

- Thank you for all who reviewed and provided feedback on the Assertive Community Treatment (ACT) and Intensive Rehabilitative Mental Health Services (IRMHS – Youth ACT) RFP
- Met with the program area to provide feedback, learned process was confusing to BHD staff.
- Abbie is working with BHD to provide more context to why this process is in place and streamline it internally at BHD
- More information coming this month from Gary Travis re: the HSASMI (Housing Supports for Adults with Serious Mental Illness) grants

Review Mental Health Priority Areas for RFPs, 1

- Family Systems Workgroup Priority Area:
 - Children's mental health continuum of services. Right now we are very short on Mental health beds for children in both hospital and residential treatment. The community based programs are also dwindling due to staffing and financial stability. We are currently in a state of crisis for children's mental health services.
- Proposed Deliverables:
 - Review licensing rules that are holding back development of new services take a more consultative approach to helping programs comply and expand services.
 - Review funding to children's mental health services to ensure sustainability of the current services/programs so we don't lose more.

Review Mental Health Priority Areas for RFPs, 2

- Mental Health and Schools Workgroup Priority Area:
 - The mental health needs of children is a priority. We are seeing an increasing number of students preschool to seniors, whose education and life are being impacted by mental illness. The biggest driver of this is the increasing amount of trauma our students are experiencing as well as the unstable world we live in right now. The desired outcome would be to provide services early to ensure that our students can be productive and happy adults.
- Proposed Deliverables:
 - Instruction in schools regarding trauma
 - Increase in dollars to secure more staff to assist children with mental health needs
 - Increase funding to provide space and supplies needed for instruction and support of these students

Review Mental Health Priority Areas for RFPs, 3

- Recovery Supports Workgroup Priority Area:
 - Pre RFP, there is little input from the actual people who utilize the services. Who knows better than those consumers who see the gaps first hand. Bringing the consumer voice is essential and having consumers on every decision before they are decided internally is the only correct way to receive that perspective
- Proposed Deliverables:
 - Ensure consumers from diverse areas of Minnesota including rural, BIPOC and LGBTQ+ community members voices are heard in the grant making process

Review Mental Health Priority Areas for RFPs, 4

- Local Advisory Council
 - We would like DHS to do an RFP for an organization to support the Local Advisory Council (LAC) Workgroup. The Council is charged with supporting the work of LACs throughout the state. We need additional support in order to assess the status of LACs and develop a plan for how the Council can provide ongoing support for LACs.
- Proposed Deliverables:
 - Assess the status of LACs in Minnesota
 - Determine needs for supporting LACs
 - Assist LAC Workgroup with developing a strategic workplan to support LACs throughout the state
 - Coordinate the efforts of the LAC workgroup to provide ongoing support to LACs.

Review Mental Health Priority Areas for RFPs, 5

- Integrated Care & Access Workgroup Priority Areas:
 - Increased access to mental health care in multiple locations (schools, primary care, correctional settings, law enforcement, leverage technology). We are interested in all funding that could increase and improve access to mental health services statewide.
- Proposed Deliverables:
 - Mandate that health plans (public and private) routinely measure and publicize the average number of days it takes for a new patient to be seen by a psychotherapist (subcategorized by child/adolescent (less than 18 years of age) or adult (18 years and older)).
 - Use identical methodology to measure initial access to prescribers (psychiatrists, NPs, PAs, CNS').
 - Mandate that health plans annually perform and publicly share a statistically secret shopper survey focusing on such access. This will improve access.

Review Mental Health Priority Areas for RFPs, 6

- Integrated Care & Access Workgroup Priority Areas:
 - Parity: We want to make sure that mental health care and funding fall within the parity language established in Minnesota and nationally.
- Proposed Deliverables:
 - Coverage and wait times for mental health care are at par with physical medical care.

Review Mental Health Priority Areas for RFPs, 7

- Integrated Care & Access Workgroup Priority Area:
 - Health systems reduce the mental health silos and embed mental health care into all health care.
- Proposed Deliverables:
 - Encourage the integration of mental health care in all of healthcare, having mental health specialists being a part of all primary care teams.

Legislative Report Process Development

- Timeline:
 - January-March 2022: Workgroups draft recommendations
 - 4/7/2022 Council and Subcommittee members approve final recommendations
 - April-May 2022 wordsmith and make the report “pretty” and usable
 - To the printer 6/1/2022
 - Report due to Governor 10/15/2022
 - Report due to chairs of policy committees 11/15/2022

Needs for legislative recommendations

- Clear problem statement with evidence
 - If DHS data is needed, notify Abbie at mhadvisory.council.dhs@state.mn.us to submit the data request
- Actionable recommendations that address identified needs
 - Recommendations should identify the requested action and who is responsible (Governor, Legislature, DHS, MDE, MDH, etc.)
- Complete the Report Recommendations Template in your workgroups
 - Answer all of the questions in detail
 - Fill out the Implementation Action Plan

Considerations when drafting recommendations

- The following should be considered when developing recommendations:
 - Does the recommendation clearly address racial equity in mental health?
 - Does the recommendation address current social, cultural, whole family and person-centered needs?
 - Is the recommendation clearly defined with understandable background information and expected outcomes?
 - Does the recommendation contain enough detail to be clearly understood by someone not in the mental health field/education/corrections/etc.?
 - Is the recommendation feasible at this time?
 - Are all acronyms clearly defined?

Review of proposed recommendations

- Televideo – Claudia
- Collaborative Care Management Codes – Michael
- Medicaid Reimbursement – Lisa
- Per pupil allocation for specialized instructional support personnel – Lisa
- Workforce diversity proposal – Lisa

Workgroup Reports

- Mental Health Awareness at the State Fair – need artist to design t-shirt
- Outreach to Cultural Diversity
- Mental Health & Schools
- Mental Health & Juvenile Justice
- Local Advisory Council
- Integrated Care and Access
- Family Systems Prevention, Intervention, & Supports
- Recovery Supports

Closing & Next Steps

- Next Meeting 4/7/2022, 10am-1pm:
 - Ideas?
 - Legislative Report Work
- Submit your workgroup meeting notes to mhadvisory.council.dhs@state.mn.us by end of day 3/15/2022
- Submit meeting invoices to mhadvisory.council.dhs@state.mn.us as soon as possible; remember you can submit invoices for workgroup meetings
 - If unable to sign invoice, include the following in body of email:
 - I hereby certify that the services and/or expenses listed on my invoice have been rendered or incurred, are correct and just and that payment has not already been received.
 - Please reach out to Abbie if you have questions about invoices
 - All invoices must be submitted electronically – cannot process invoices mailed/faxed to the office