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The TWITR Project: A Model Rural Mental Health Program

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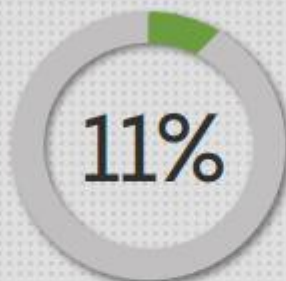
*F. Marie Hall Institute for
Rural and Community Health*



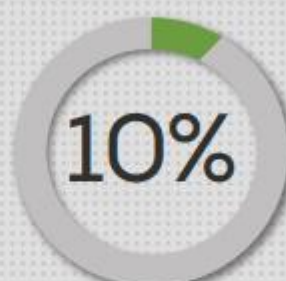
Fact: 1 in 5 children ages 13-18 have, or will have a serious mental illness.¹



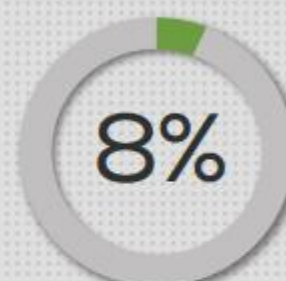
20% of youth ages 13-18 live with a mental health condition¹



11% of youth have a mood disorder¹



10% of youth have a behavior or conduct disorder¹



8% of youth have an anxiety disorder¹

Impact



50%

50% of all lifetime cases of mental illness begin by age 14 and 75% by age 24.¹



10 yrs

The average delay between onset of symptoms and intervention is 8-10 years.¹

50%



Approximately 50% of students age 14 and older with a mental illness drop out of high school.¹

70%



70% of youth in state and local juvenile justice systems have a mental illness.¹

Suicide



3rd

Suicide is the 3rd leading cause of death in youth ages 10 - 24.¹

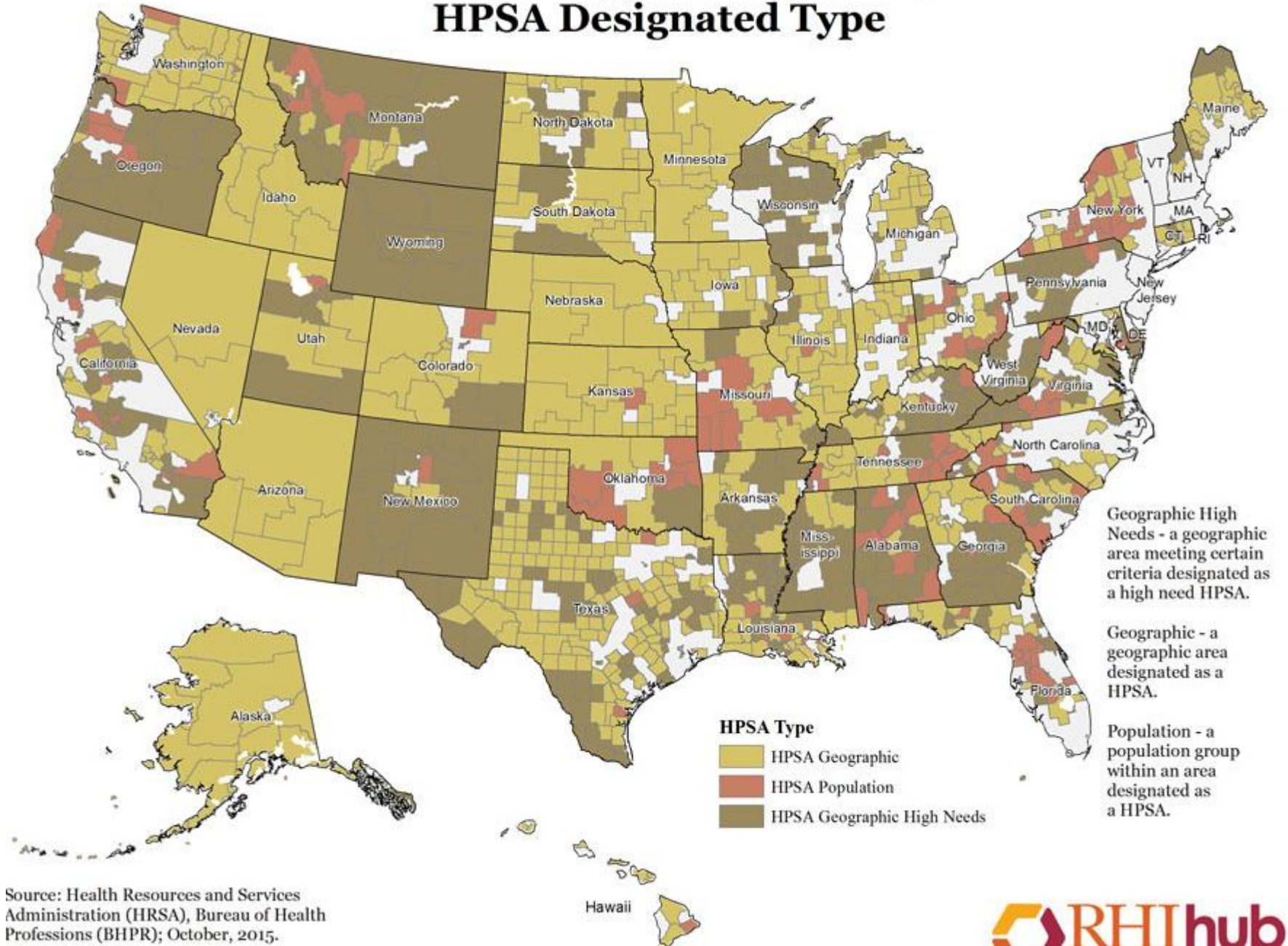


90%

90% of those who died by suicide had an underlying mental illness.¹

Health Professional Shortage Areas (HPSA) - Mental Health

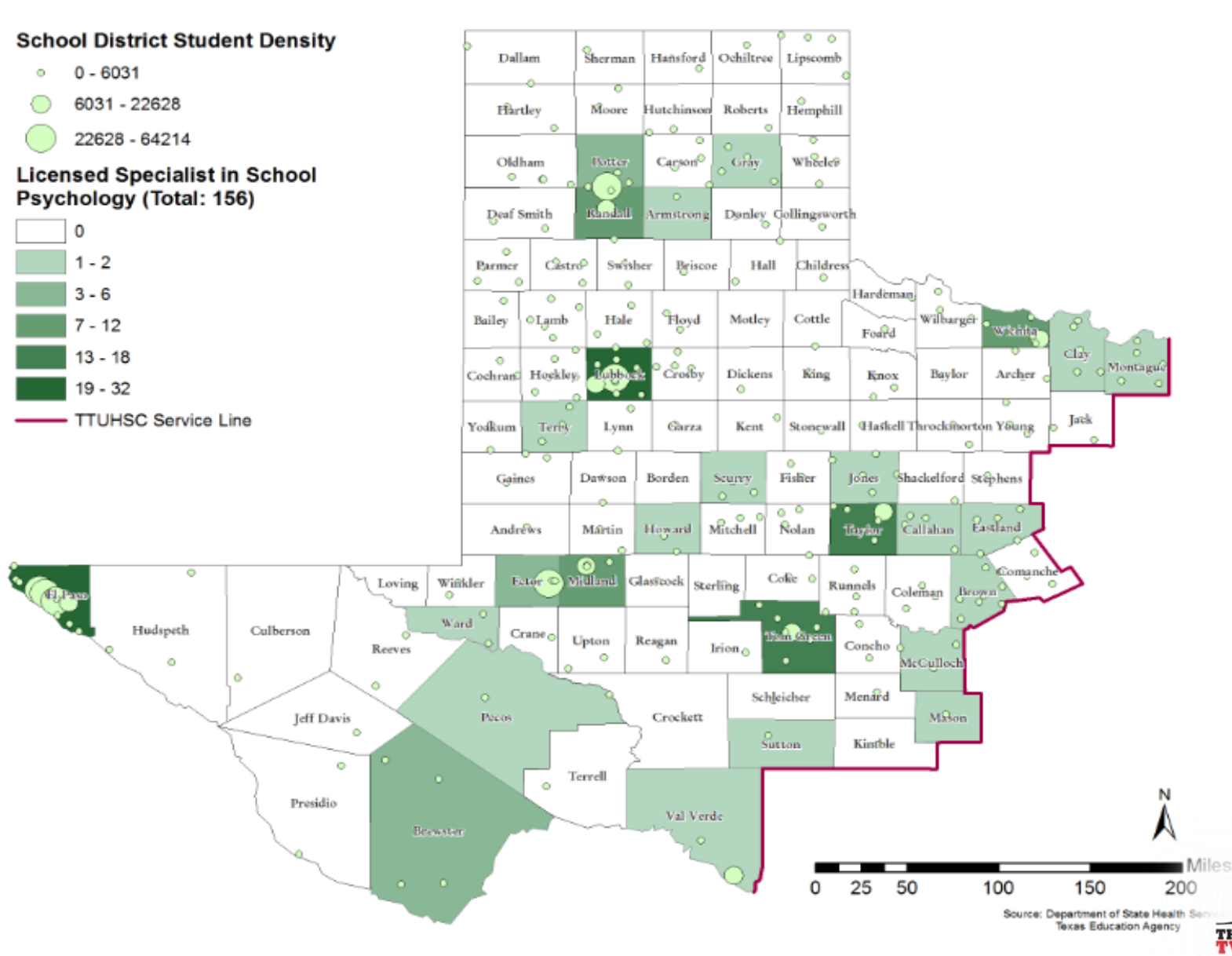
HPSA Designated Type



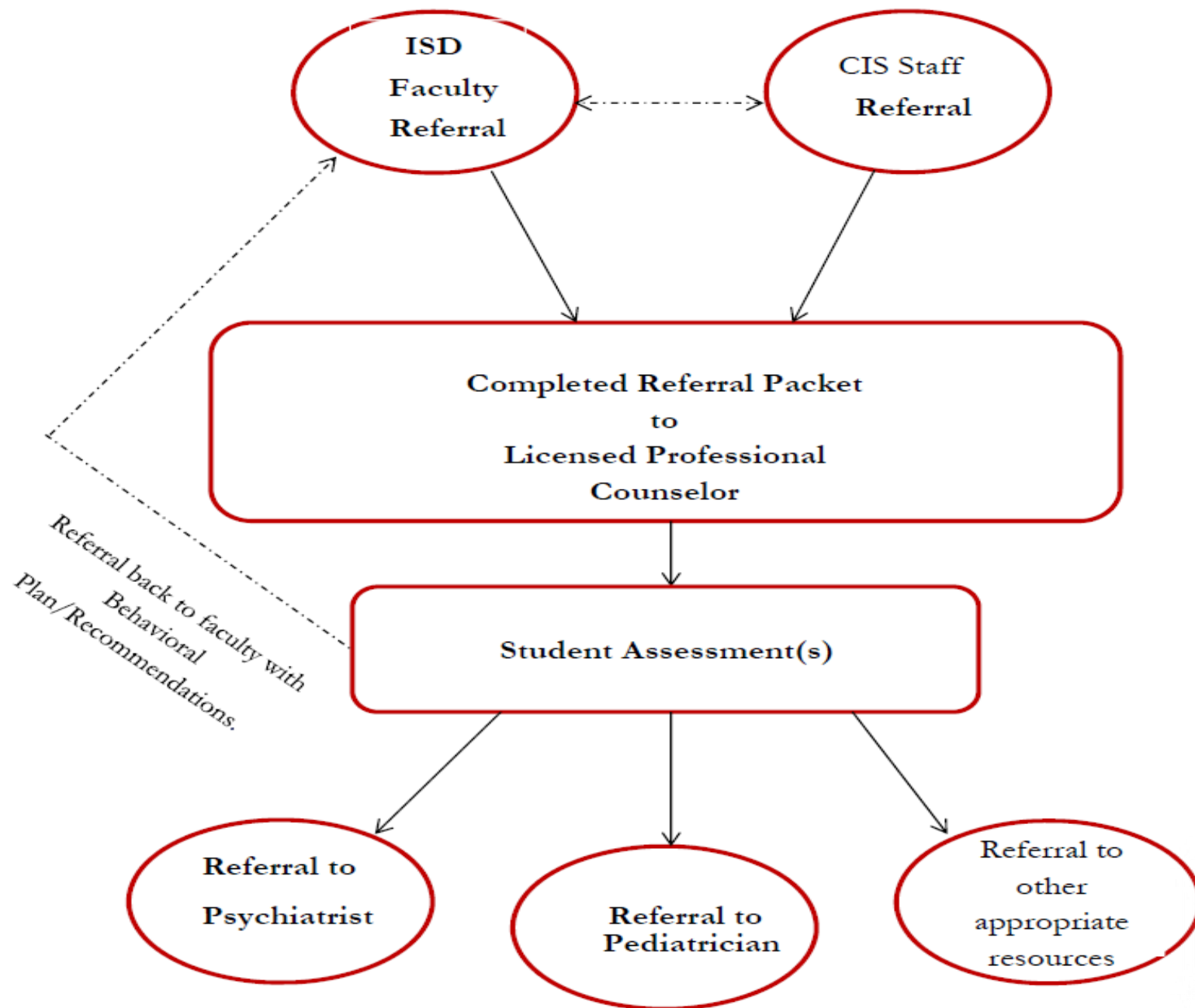
Source: Health Resources and Services Administration (HRSA), Bureau of Health Professions (BHP); October, 2015.

Note: Alaska and Hawaii not shown to scale

Mental Health Needs in Rural Schools



How TWITR Works



Location of Schools

Telemedicine Wellness Intervention Triage & Referral Project ("TWITR Project") Participating Sites

2013

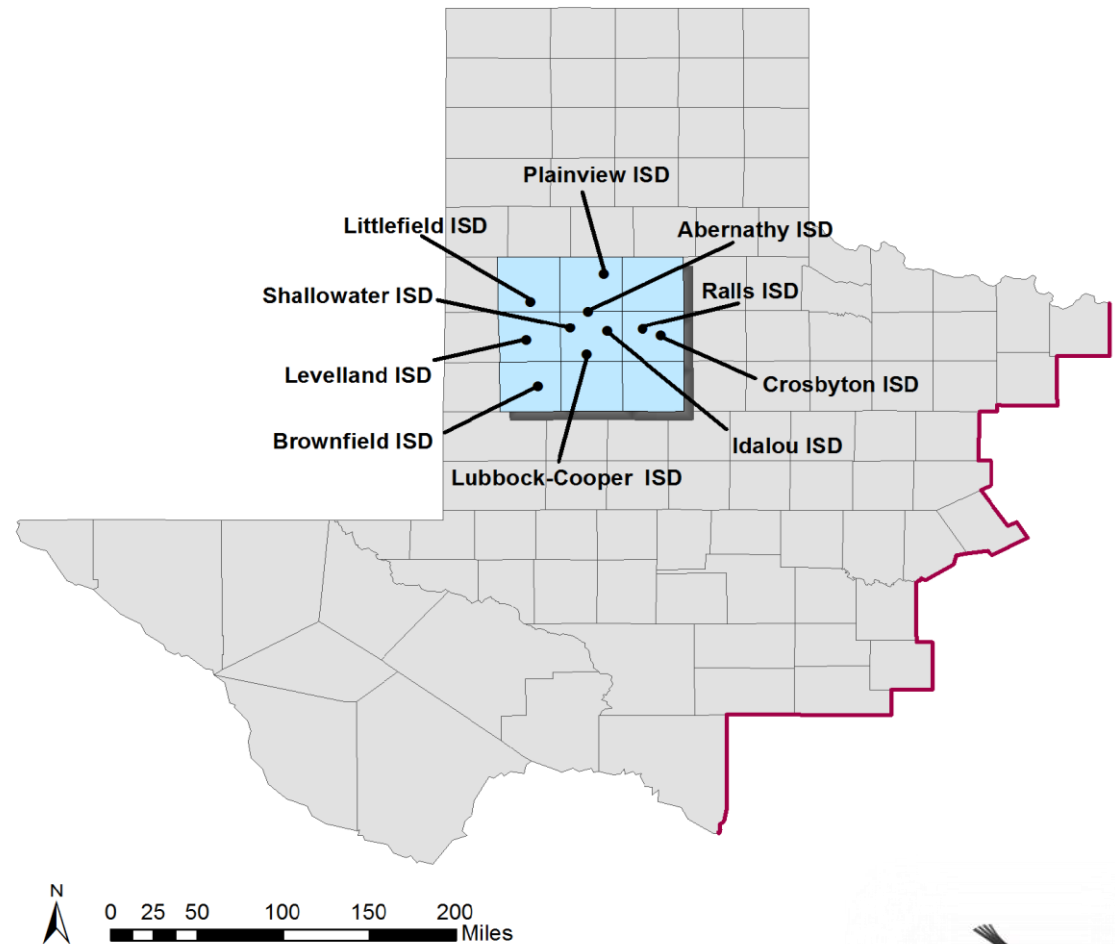
- Plainview
- Crosbyton
- Idalou
- Ralls
- Shallowater
- Abernathy

2014 (added)

- Littlefield
- Brownfield

2015 (added)

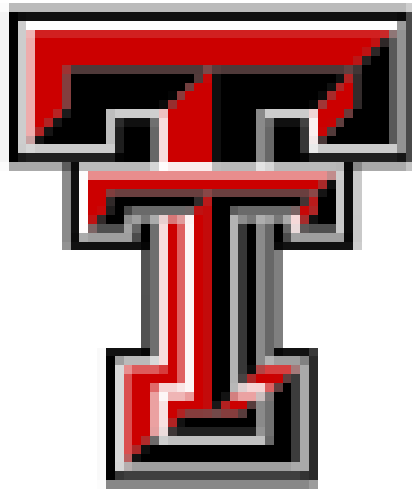
- Lubbock Cooper
- Levelland



TWITR Outcomes

- Number of School Staff Trained = ~1,610
- Number of students impacted = ~21,174
- Number of referrals = 305
- Number screened = 114
- Number triaged = 108 (all by telemedicine)
- Number removed from school = 16
- Other outcomes = reduction in truancy (17%), reduction in student discipline referrals (25%), increase in student overall GPA (3.6%).





A
Double
Thanks
to
You