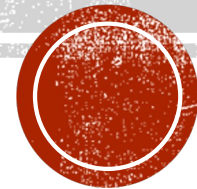


LISTENING TO THE COMMUNITY VIA THE DELPHI METHOD

Dr. Steve F. Bain, LPC-S, NCC, Professor

Dr. Kristopher Garza, LPC-S, NCC, Associate Professor



**TEXAS A&M
UNIVERSITY
KINGSVILLE**

OVERVIEW OF RESEARCH RELATED TO RURAL COMMUNITIES AND THEIR MENTAL HEALTH NEEDS

- Mental health and mental disorders were the fourth most often identified rural health priority.
- In rural counties with populations 2,500 to 20,000, over 75% lacked a psychiatrist and 95% lacked a child psychiatrist.
- Depression, substance abuse, domestic violence, incest, and child abuse are at higher levels in rural areas than in urban areas.
- Access to mental health care and concerns for suicide, stress, depression, and anxiety disorders were identified as major rural health concerns among state offices of rural health.



OVERVIEW OF RESEARCH RELATED TO RURAL COMMUNITIES AND THEIR MENTAL HEALTH NEEDS

- Mental health care availability is an issue for rural people in South Texas, the United States, and across the globe.
- In 2017, the Texas House Select Committee on Mental Health members wrote that mental health “is absolutely one of the most critical areas of concern” facing the state.
- A report compiled by the Kaiser Family Foundation says Texas does a “woeful job of serving our citizens with mental health problems”.



OVERVIEW OF RESEARCH RELATED TO RURAL COMMUNITIES AND THEIR MENTAL HEALTH NEEDS

- More than 4.3 million Texans, including 1.2 million children, live with some form of mental health disorder and Texas now ranks 51st in per capita funding for mental health services, behind even Washington, D.C.

Gately, P. J. (2017). *Texas mental health system fails to address real problems*. National Alliance on Mental Health.
Retrieved from <https://namitexas.org/texas-mental-health-system-fails-address-real-problems/>

- Globally, 30% of countries do not have mental health programs, whereas 40% do not have mental health policies to inform service delivery.
- Each rural community must be seen as socially and culturally distinct with unique challenges related to mental health.

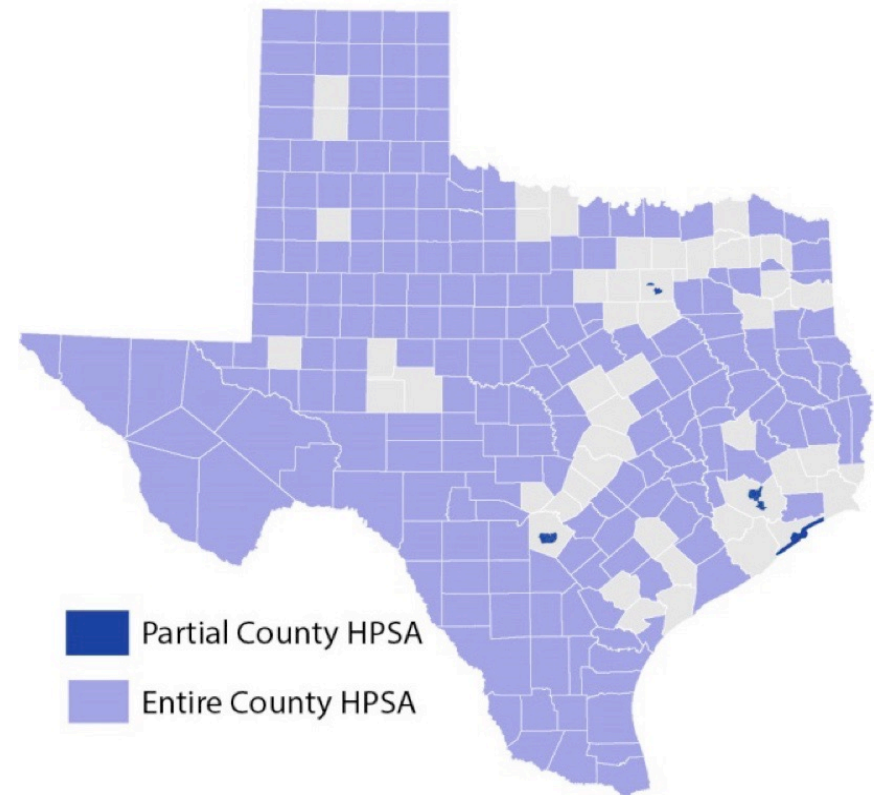
NOTE: Urban/Rural must be measured in expanded categorical paradigms rather than a dichotomy (urban vs. rural).



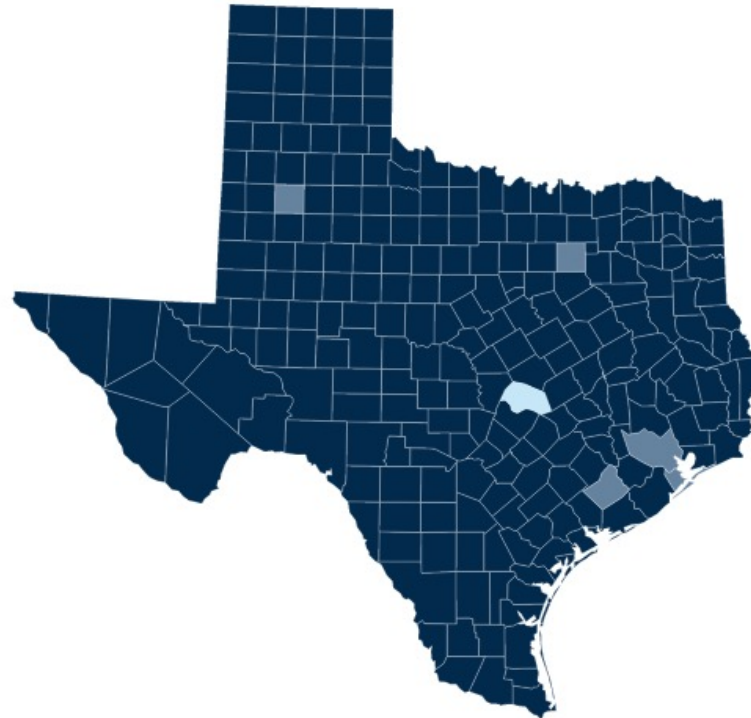
HEALTH PROVIDER SHORTAGE AREAS & RURAL COMMUNITIES

According to the Texas Department of State Health Services (2014, p. 7), “207 of Texas’ 254 counties had whole or partial county Mental Health HPSAs (Health Provider Shortage Area) and 241 counties had whole or partial county designation or at least one site-designated HPSA”

Texas Counties with Mental Health HPSA Designations



Health Professional Shortage Areas: Mental Health, by County, 2021 - Texas



UTILIZING THE DELPHI METHOD AS A COMMUNITY NEEDS ASSESSMENT IN A SOUTH TEXAS RURAL COMMUNITY

- The Delphi Method is a forecasting process framework based on the results of several rounds of questionnaires presented to a panel of experts or valid representatives of a particular area (rural areas of South Texas).
- Multiple rounds of questions were put forth, and the collective group responses were aggregated and shared with the group after each round. The participants were allowed to adjust their answers in subsequent series for refinement of answers.
- A consensus was reached on the most important topics and issues related to rural mental health through the use of the Likert-scaled responses.



Group Session #1

Group 1
Response A

Group 2
Response A

Group 3
Response A

Collaborative Discussion #1

Dr. Bain facilitates a cohesive/consensus answer to each question.

Hypothesized consensus

Group Session #2

Group 1
Lickert & *Response B*

Group 2
Lickert & *Response B*

Group 3
Lickert & *Response B*

Collaborative Discussion #2

Dr. Bain facilitates discussion to make hypothesized consensus better.

Consensus



**RESEARCH
QUESTION
#1**

**What does
mental
health mean
to you?**

**DATA
COLLECTION**

1 - Strongly Disagree

2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree



**RESEARCH
QUESTION
#2**

What are the most prominent factors that impact mental health in your community?

**DATA
COLLECTION**

1 - Strongly Disagree

2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree



**RESEARCH
QUESTION
#3**

**What are the
perceived
barriers to
receiving mental
health treatment
in your
community?**

**DATA
COLLECTION**

1 - Strongly Disagree

2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree



**RESEARCH
QUESTION
#4**

**What are
suggested
solutions that
could meet the
mental health
needs of **your**
community?**

**DATA
COLLECTION**

1 - Strongly Disagree

2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree



KEY ELEMENTS FOR INCORPORATING THE DELPHI METHOD IN A CNA

- **A true representation of the community is essential. Participants were selected based on demographics from the latest U.S. Census reports for that rural community.**
- **Participants must be given a clear explanation of the purpose of the CNA and Delphi method through clear and concise instructions prior to the meeting.**
- **The key is “consensus”!**
- **Attention must be given to properly and precisely formulating the questions.**
- **A Likert scale was used to measure the combined responses of the group participants toward consensus.**
- **Consider the potential language issues that may be present in the group(s).**
- **The facilitator must be clear, unbiased, and practice active listening skills.**



ETHICAL CONSIDERATIONS

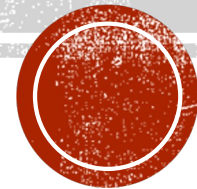
- **The Delphi Method gives a voice for participants**
- **The Delphi Method encourages community autonomy**
- **Provides participants the opportunity for self-direction**
- **Does not guarantee full anonymity**
- **Affirms community uniqueness**
- **Brings communities together on mental health needs**



LISTENING TO THE COMMUNITY VIA THE DELPHI METHOD

Dr. Steve F. Bain, LPC-S, NCC, Professor

Dr. Kristopher Garza, LPC-S, NCC, Associate Professor



**TEXAS A&M
UNIVERSITY
KINGSVILLE**