# Examining the Relationships between Population Health, Community Conditions and Provider Shortages for Mental Health in Missouri

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### **About Me**



- BS, Community and Public Health,
   1997
- MA, Sociology, 2006
- PhD, Health and Human
   Performance Concentration
   Public Health, 2018
- 25 years in Higher Ed
- 22 years working with students going into Public Health and HealthCare
- Research Interest HP Shortages,
   Mental Health
- MHFA Instructor Adult
- Personal Experience led me to asking this specific research question.

# Scope and significance of provider shortages in Missouri



#### **Mental Health Provider Shortage**

Missouri faces a critical shortage of mental health providers affecting access to essential care across communities.

#### **Primary Care Limitations**

Primary care providers often lack adequate training and resources to address complex mental health conditions effectively.

#### **Access Barriers**

Long wait times and travel distances for specialized care create significant barriers worsening mental health outcomes.

#### **Need for Systemic Solutions**

Urgent systemic changes are needed to strengthen the mental health workforce and promote integrated care models.



# Barriers and Contributing Factors to Provider Shortages

According to

Americashealthrankings.org
(2025), Missouri ranks 35/50
for number of mental health
providers per 100,000
population (273.3)





## Challenges in underserved and rural regions

#### **Geographic and Demographic Barriers**

Low population density and long distances between services hinder access to mental health care in rural areas.

#### **Limited Professional Resources**

Fewer professional development opportunities and specialist support reduce retention of mental health providers.

#### **Financial and Social Barriers**

Lower reimbursement rates, uninsured residents, and stigma discourage providers and patients in rural communities.

# Professional Challenges and Trends in Shortage Areas

Healthcare
Workforce
Shortages



#### Burnout, workload, and worklife conflict for providers

#### **High Workload Pressure**

Providers in underserved areas face heavier workloads and frequent off-hours demands, increasing stress levels significantly.

#### **Burnout Among Providers**

Burnout rates rise in rural communities due to continuous professional and personal challenges faced by providers.

#### **Work-Family Conflict**

Balancing work responsibilities with family life becomes difficult, resulting in significant work-family conflict for providers.





## Financial, accessibility, and stigma-related barriers

#### **Accessibility Challenges**

Patients in rural and underserved areas face difficulties accessing mental health care due to provider shortages and coverage gaps.

#### **Financial Barriers**

High uninsured rates and low reimbursement reduce mental health practice viability in many communities.

#### **Stigma Impact**

Social stigma discourages patients from seeking mental health support, complicating care delivery.

### **Expanded role of primary care providers in shortage areas**

#### **Increased Clinical Responsibilities**

Primary care providers in shortage areas face growing clinical duties, including mental health management.

#### **Mental Health Screening Role**

Primary care practitioners are tasked with mental health screenings due to limited access to specialists.

#### **Training and Support Gaps**

Lack of sufficient training and support challenges primary providers managing behavioral health needs.





### Provider perspectives and workforce issues



#### **Provider Shortage Causes**

Lack of funding and poor reimbursement rates contribute significantly to mental health provider shortages.

#### **Workforce Retention Challenges**

Low retention due to unattractive profession and aging workforce affects availability of mental health providers.

#### **Demand and Caseload Pressure**

Increasing demand for mental health services creates high caseloads and stress for providers.

#### **Cost of Living Impact**

Cost of living in underserved areas and low pay discourage providers from working in these regions.



### Factors influencing retention and provider satisfaction

#### **Organizational Support**

Supportive administration and reasonable working hours encourage mental health professional retention in shortage areas.

#### **Work-Life Balance**

Work-life balance is a key factor cited by clinicians who remain in underserved regions.

#### **Meaningful Work**

A strong sense of purpose and meaningful work motivates providers to stay and reduces turnover.

#### **Challenges Leading to Attrition**

Limited scope of practice and frustration contribute to clinicians leaving shortage areas.





# Effects on suicide risk, youth vulnerability, and population access



#### **Mental Health Professional Shortage**

Shortage of mental health professionals reduces access to care and worsens health outcomes in communities.

#### **Increased Suicide Risk**

Reduced provider access is strongly linked to higher suicide risk among vulnerable populations.

#### **Youth Vulnerability**

Adolescents face particular vulnerability due to limited mental health services in underserved areas.

#### **Population Access Disparities**

About 91 million people live in shortage areas and have lower rates of seeking mental health care.

# Emerging Solutions and Directions in Addressing Shortages



# Integrated care models and provider well-being strategies



#### **Integrated Care Models**

Integrated care models coordinate primary and behavioral health services to enhance access and improve patient outcomes.



#### **Reducing Provider Burnout**

Strategies focus on reducing burnout among mental health providers by improving administrative support and workload management.



#### **Work-Life Balance and Retention**

Addressing work-life balance is crucial to encourage provider retention and maintain professional well-being.

**Grass Roots Efforts????** 

### Policy interventions and fostering meaningful clinical work

#### **Reducing Stigma in Healthcare**

Policy efforts focus on reducing stigma to encourage clinical practice in underserved regions.

#### **Reshaping Reimbursement Structures**

Reforming financial incentives aims to address economic barriers for clinicians in shortage areas.

#### **Fostering Meaningful Clinical Work**

Encouraging purpose and community engagement among providers enhances meaningfulness in clinical roles.

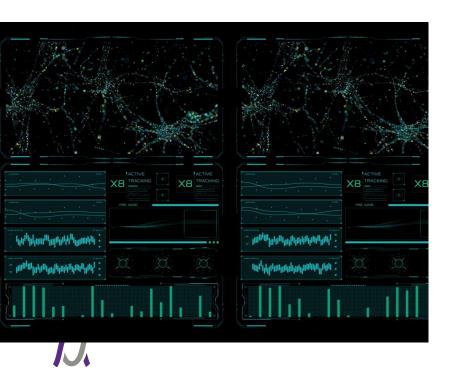




# Missouri-Specific Data: Relationships and Community Conditions



# Research question and variables examined



#### **Research Question**

What relationships exist between provider shortages and county attributes in the state of MO?

#### **Community Conditions Variables**

Includes social, economic, environmental, and health infrastructure factors impacting community health.

#### **Population Health & Wellness**

Measures life expectancy, quality of life, and mental health across counties in Missouri.

#### **Health Provider Rates**

Examines rates of mental health and primary care providers relative to community needs.

#### Variable Details



#### Key findings on relationships between community conditions, health outcomes, and provider shortages

#### **Community Conditions and Health**

Better community conditions strongly correlate with improved population health and wellness outcomes in Missouri. (p<.001)

#### **Mental Health Provider Shortages**

Areas with worse community conditions face more mental health provider shortages, indicating an inverse relationship. (p=.016)

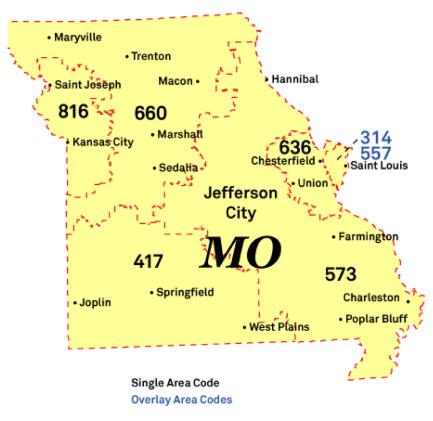
#### **Primary Care Provider Shortages**

Primary care provider shortages occur more often in areas with poorer community conditions, showing a strong negative correlation.(p<.001)



# Addressing Shortages: Barriers, Strategies, and Resources





## Barriers contributing to shortages in Missouri

#### **Access Challenges**

Limited availability of qualified mental health providers restricts access to necessary care across Missouri.

#### **Workforce Shortage**

Insufficient number of trained mental health professionals contributes to unmet patient needs in the state.

#### **Geographical Disparity**

Rural and underserved areas face greater shortages compared to urban centers in Missouri.

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## Strategies to address service needs and provider commitment

#### **Community Mental Health Services**

Implement accessible and culturally sensitive mental health services to meet diverse community needs effectively.

#### **Provider Recruitment and Retention**

Develop incentives and supportive work environments to attract and retain committed mental health providers in underserved areas.

MHFA??

Psychological First Aid???





## Q&A

#### Let's Talk!



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