

**The Rural Health and Safety Education Program: Exploring Rural Communities' Needs  
for Behavioral Health Programming**

Aaron Golson, M.B.A (*aaron.golson@uga.edu*)

Dr. Virginia Brown (*virginia.brown@uga.edu*)

Dr. Dianne Bales (*dbales@uga.edu*)

Dr. Marie Bowie (*mbowie@uga.edu*)

Dr. Anna Scheyett (*amscheye@uga.edu*)

University of Georgia

Department of Agricultural Leadership, Education and Communication

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## Introduction

The United States has a high prevalence of systemic mental health and substance abuse challenges within rural communities; impacting residents' quality of behavioral health due to limited resources (Lundeen et al., 2018). Such disparities in rural communities contribute to the constant rise in U.S. adult and youth behavioral health divergence (MacNab & Francis, 2015). Thus, Cooperative Extension has increased its role in creating programming to assist in behavioral health awareness for its rural clients. Extension has acknowledged developing programs in these rural communities could be considered difficult compared to the urban communities due to a lack of readily available services (Benke et al., 2013). However, Extension has a long-standing relationship as a stakeholder in many rural communities and could be seen as an asset to leverage assistance to provide appropriate behavioral health programs. Extensions' mission is to improve community members' overall quality of life by integrating scientific interdisciplinary approaches to solving issues within a community-based context (Braun et al., 2014; Linnell et al., 2021). Furthermore, developing and enhancing community public health initiatives for individuals and families is a foundation for behavioral health promotion, a familiar strategy used by Extension to increase behavioral health practices within communities (Barnes et al., 2020; Morgan & Fitzgerald, 2014; Walsh et al., 2018). Therefore, Extension professionals must fully understand the effectiveness of their programs by properly identifying the behavioral health needs within these rural communities.

The purpose of this qualitative study was to explore rural communities' perceptions of the essential knowledge necessary for successful behavioral health programs in their perspective county. The following two research questions guided the study: What are rural community members' perceptions of the Cooperative Extension mission; What are rural community members' perceptions of behavioral health programs in rural areas? The Rural Health and Safety Education Program (RSHE) will serve as a catalyst for increasing behavioral health awareness programming for rural community members throughout the counties in the state of [State] participating in this project.

## Theoretical Framework

The theoretical framework for this study is based on Roger's diffusion of innovations theory focusing on rural community members' perceptions of behavioral health services being implemented in their county. Roger's diffusion of innovations focuses on the relative advantage; compatibility, complexity, trialability, and observability of an innovation (Rogers, 2003). These five characteristics provide context for Extension professionals to identify the rural community needs to address when developing programs (Taylor & Miller, 2016). This study focused on each of the five characteristics of Roger's diffusion of innovation to best support the rural community members.

## Methodology

The participants in this qualitative study were from six rural counties in Georgia. Each participant from the rural communities volunteered for this study. These rural community members were selected due to their high level of community engagement. Participants included social workers, counselors, teachers, extension personnel, first responders, providers, pastors, community leaders, and social service organizations who were invited to an 80-120-minute focus group. Each of the participants was recruited through purposive sampling. Extension personnel

acted as recruitment liaisons to the focus group participants. The focus group script was developed to capture the participants' internal and external perceptions of Extension. A consent form was distributed via email to the participants prior to engaging in the focus groups (Dillman et al., 2014). The focus groups were conducted by a committee of three Extension professionals consisting of a content specialist, a program coordinator, and an evaluation specialist. The focus groups were held in the four districts including six counties throughout Georgia. In addition, each focus group was recorded and transcribed through a third-party service. A codebook was created by two doctoral students with expertise in qualitative research. The current study used thematic analysis to identify key themes related to the phenomenon of interest. Data were analyzed through Atlas Ti through an abductive coding method using both *a priori*, or theory-driven, and emergent, or data-driven codes (DeCuir-Gunby et al., 2011).

### **Results/Findings**

There was a total of 60 rural community members who participated in the six focus groups. The focus groups highlighted four emerging themes: 1) Extension is trusted and has many strengths; 2) Extension Behavioral Health Hubs (EBHHs) as a multifunctional system, 3) Barriers with Extension offices as EBHHs, 4) Required resources for EBHHs. The participants showed interest in learning about the role of Extension would serve as a hub for behavioral health resources. Also, participants indicated wanting to be involved with the strategic plan for where the hub should be located in their community. For example, participants stated: "I think one benefit that Extension has is that they've already got a foot in the door in the school system and with a lot of communities, so they've already got that partnership." Another participant expressed, "Do y'all have a way of making Extension services more visible because I have never heard of the Extension office having anything to do with helping with, or even wanting to help with, drug problems in the community?". These statements show the potential strengths and challenges of implementing EBHHs within rural communities.

### **Conclusion/Recommendations**

Overall, the participants were familiar with Extension, but not with their ability to be seen as a behavioral health resource in rural communities. The social structure within the participants' community would require behavioral changes in their perception of Extension to conceptualize a new behavior toward the organization (Rogers, 2003; Warner et al., 2019). Extension professionals must continue building relationships to instill trust amongst rural communities to be able to create EBHHs throughout Georgia. The US rural population should token community leaders to collaborate with Extension to assist in developing innovative recruitment strategies for residents to participate in Extension programs. As the demand for mental health and substance abuse resources increases, Extension should promote each division's (4-H, ANR, FACS) programs through the rural school systems and community events. Thus, ensuring these community members with a safe inclusive space to seek behavioral health resources. Further research should examine Extension professionals' capacity to build out new programs in addition to their current responsibilities within the profession.

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