



## Improving Access to Mental, Emotional, Developmental, and Behavioral Health (MEDB) Care for Rural or Military Connected Children in the Upper Midwest

Accessing and navigating services for children with mental health, emotional, developmental, or behavioral (MEDB) health concerns is a complex endeavor for all families. For military families, geographically-dispersed families, and families who are highly mobile or lack providers near their homes, the complexities are even greater. The University of Minnesota (U of M) and Uniformed Services of the Health Sciences (USUHS) are working to lower these barriers in the Upper Midwest as a partner in the [Military Child and Family Collaboration Study](#).

### Building Provider Capacity for Specialized Mental, Emotional, Developmental, and Behavioral Health Needs

The Project ECHO (Extension for Community Healthcare Outcomes) model is being used to develop and expand provider capacity throughout the Upper Midwest. Each ECHO session is a virtual collaborative forum on topics that address unmet needs in the region. UMN specialists facilitate synchronous “hub and spoke” connections with providers who support rural, highly mobile, and military-connected families to discuss best practices with didactic and case-based learning.

### Training, Telehealth, and Digital Tools for Providers and Families of Children with MEDB Needs.

To better support children with MEDB in the Upper Midwest, the following activities, events, and resources are available nationwide, with a special current focus on Minnesota, North Dakota, and South Dakota:

- **The U of M Project ECHO Upper Midwest Weekly Series** focuses on supporting providers who serve children with MEDB in rural and/or military connected populations weekly, Thursdays from 12-1 pm. This series also has a special focus on autism, ADHD, obsessive-

compulsive disorder (OCD), care navigation, and supporting children with challenging behaviors. This series is free and open to all, but most likely relevant to primary care, pediatric, behavioral health, mental health, educational, and related clinical and non-clinical providers. [Registration is required.](#)

- **The Connect: T3 (Tiered Training via Telehealth for Remote Populations)** is a collaboration between the U of M and USUHS teams, consisting of a tiered offering of provider training and case support including the following: 1) virtual pilot ECHO specific to North and South Dakota providers in [February-May 2026 on Thursdays at 12-1pm CST](#), 2) in-person training in South Dakota for Ellsworth AFB providers and civilian providers in the Rapid City and surrounding area in [March, 2026](#), 3) de-identified case based learning is part of both ECHO series for providers to receive general feedback and recommendations for cases, and 4) for individualized case specific support for military-connected children, providers at the Ellsworth AFB and community providers who participate in the ECHO or in person training can also access live teleconsultation from a Developmental Behavioral Pediatrician, Dr. Eric Flake of USUHS Pediatrics.
- **Asynchronous, Do At Your Own Pace Training for Providers.** The U of M hosts a broad-ranging suite of free, self-paced training modules for providers supporting children and adolescents with MEDB needs. These modules provide essential evidence-based information and practical tools for providers working with children and their families. Topics include ADHD, anxiety disorders in youth, autism assessment, early autism intervention, medical issues with child and adolescent behavioral health, OCD and pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS), supporting children

recently diagnosed with autism and their families, and supporting youth with challenging behaviors. [Sign-up for access to the free MEDB training modules.](#)

- **Digital Tools: Bridges2Families.** The U of M team is developing, testing, and training on digital tools and telehealth models for families waiting for MEDB care. Currently these tools are focused on improving the timing of early intervention for young children who have been recently diagnosed with autism spectrum disorder. Autism continues to increase in prevalence—currently impacting an estimated 1 in 31 children in the United States. While autism can be reliably identified in the first two years of life, on average it is identified and services are started much later, with an average of [4.5 age of diagnosis in the U.S, often later for children residing in rural areas.](#) The U of M team is currently enrolling families with children ages 1-5 years old and community providers for a study about the efficacy of early intervention coaching provided over telehealth (video conferencing) for kids with autism and their families. This study seeks to identify ways to address current waitlists for autism diagnosis and intervention for families in geographically-dispersed locations and medically underserved communities. This study is also intended to train community providers in the use of this model. Contact the research team at [telehealthstudy@umn.edu](mailto:telehealthstudy@umn.edu) for more information.



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