



NEWSLETTER

May 2023

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Welcome to the Office of Children's Mental Health (OCMH) May Newsletter!

Focus on Children's Mental Health in May

Children's Mental Health Week, Mental Health Awareness Month, and 2023 being declared the Year of Mental Health by Governor Evers all call us to focus on Children's Mental Health in the month of May.

Children's mental health spans the lifespan of a child – from infancy through adolescence and young adulthood, the full first 25 years of a young person's life. As we prepare for Children's Mental Health Week, and recognizing mental well-being throughout the month of May, we offer a few key data points to ground our understanding of youth mental health:

- Kids who play well with others by age 3 have better mental health later in childhood.
- 50% of mental health problems begin by age 14 and 75% begin by age 24.
- 20% of adolescents experience a mental health problem in any given year. Half go untreated.

Whether you are parenting a baby, toddler, school age child, teen, or young adult, it's clear that their mental health needs to be at the forefront. For those who work with young people ages 0-25, know the impact you can have on their well-being.



May is observed as Mental Health Awareness Month and the second week of May is Children's Mental Health Week. 2023 is the Year of Mental Health as declared by Governor Evers. With all this extra emphasis, now is the time to promote acceptance and inspire action on mental wellness!

The data is clear that Wisconsin youth are feeling anxious, hopeless, and overall stressed. Whether you are an individual advocate or representing an organization, taking action to support child and family

wellness the week of May 7 through 13 will help us collectively call attention to the importance of youth mental health and well-being.

Primary Messages for Children’s Mental Health Week 2023:

- **Awareness** – Let’s reframe the conversation – Mental health is NOT mental illness. We are talking about mental and emotional wellness.
- **Acceptance** – We all must invest in our mental wellness, and our mental health is linked to our physical health. Treatment and support looks different for everyone, and we all can learn new coping skills.
- **Action** – All of us need to create opportunities to practice and support mental and emotional well-being. Advocate for mental health sick days at school and work. Tell your legislators sustainable funding for children’s well-being is what we need.

Our Children’s Mental Health Week toolkit has everything you need to elevate this important topic:

Awareness	<ul style="list-style-type: none"> • Update your email signature • Change your Zoom virtual background • Circulate a Press release to your favorite newspaper, radio, or TV station
Acceptance	<ul style="list-style-type: none"> • Share Social media posts and graphics • Post throughout the week and connect with OCMH on your favorite platform: Facebook, Instagram, LinkedIn, Twitter, YouTube
Action	<ul style="list-style-type: none"> • Contact your Legislator to support the proposed state budget • Demonstrate commitment to mental wellness with our 7 day action plan • Initiate systems change within your organization to support family well-being • Share the <i>How are Wisconsin Kids Doing</i> data presentation in your community • Get more ideas from the <i>Children’s Mental Health Week</i> webinar presentation

The Governor joins us in proclaiming the importance of setting aside a week to focus on Children’s Mental Health. He has issued a [proclamation](#) declaring May 7-13, 2023 as Children’s Mental Health Week throughout the State of Wisconsin.

Let’s celebrate our successes together! [Tell us how you are taking action](#) this Children’s Mental Health Week.

2023 – The Year of Mental Health

A message from OCMH Director Linda Hall

Youth Wellness – The Trends and What the Pandemic taught us on How to Respond



COVID taught us that we are all vulnerable to mental health challenges and that if we are to be mentally well, we need to pay attention to our feelings and our whole body. To be well requires us to invest in our wellness. The same is true if our youth are to be well.

As the COVID pandemic progressed, we heard more and more about the Youth Mental Health Crisis across the nation. The data are alarming: half of Wisconsin teens are anxious, a third are sad and hopeless every day, and the statistics for kids of color, females, and LGBTQ youth are even more dire.

These trends were well underway before COVID, however, the pandemic exacerbated these feelings. In doing so, the pandemic pushed youth mental health to the forefront, raising awareness of the crisis, and requiring not only attention, but action. Three key areas require our focus:

- **Family Strength Matters.** Children in families with parents stressed due to job loss, decreased income, or death were more anxious and depressed.
 - *What is working and should be continued:* Tax credits like the Child Tax Credit sent to families reduced childhood poverty by nearly 50%. Parents spent the extra dollars primarily on food and housing, helping to lower household stress and childhood adversities. Continuing financial supports for low-income families makes a measurable difference in children's mental health.
- **School Mental Health Matters.** Children are back in school, but the isolation, increased screen time, and trauma experienced during the pandemic is still affecting youth and young adults at every level of the educational system. Schools are where the majority of kids receiving services get their mental health care. Educators are seeing unprecedented levels of need among their students.
 - *What is working and should be continued:* Addressing the lost social skills and traumas youth are showing up with at school, makes a difference in their ability to attend school consistently and to learn. Other than home, school is the primary place where kids make social connections and learn skills like conflict resolution, stress management, and emotion regulation. Increased and stable funding to support these activities will make a difference for youth now, prevent mental conditions in adulthood, and save money over the long-term.
- **Youth Voice Matters.** Youth told OCMH during the pandemic that they have ideas about how to address the youth mental health crisis and they want to be part of the solution. Data tell us they are anxious about academic performance, their safety at school (guns are now the #1 killer of American youth), their economic future, climate change, and political divisiveness.
 - *What is working and should be continued:* Listening to youth reveals new solutions to their mental health crisis. Listening to youth voice promotes mental health, because it activates their decision-making skills, social skills, feelings of belonging which offer a sense of agency, and provides purpose. Prioritizing youth voice and supporting efforts to build systems of authentic youth leadership can inform our collective efforts and improve the effectiveness of youth mental health programming.

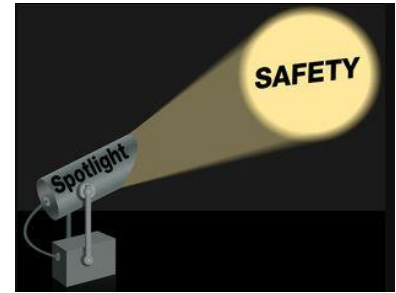
This year during Children's Mental Health Week we encourage you to [**take Action to support increased and stable funding for children's mental health**](#). Our [2023 Year of Mental Health – State Budget webpage](#) with a draft email for state legislators makes it easy for you to voice your support for our priority issues.

There are also a number of [daily actions](#) you can take to advance youth mental health – none require an appointment or a prescription. We have ideas for [individuals, interpersonal, and organizational actions](#) that you can take. Set an intention to take action today.

Together we can take advantage of the pandemic's lessons, to take action so all of Wisconsin's children can enjoy a brighter future.

Violence and Safety – a Top Concern for our Kids

When we asked our OCMH Children’s Mental Health Collective Impact Advisory Council to list their top children’s mental health concerns, we noted that violence and its effect on children’s mental health topped the list. So, we took some time to explore this issue in the most recent Advisory Council meeting.



Given the prevalence of mass shootings, it’s easy for our thoughts to immediately go there when we consider how our children are exposed to violence. But there are many additional ways our kids encounter violence: Kids can be exposed to crime in their community, to bullying and harassment in their school or online, or to domestic abuse in their home. Children are also exposed when they witness traumatic events whether it’s in real life, or in the media. It’s estimated that each suicide impacts 135 people. We know that both direct and indirect exposure, collective, and individual violence impact children.

National statistics paint a grim picture of children’s exposure to violence:

- 60% were exposed to violence, crime, or abuse in their homes, schools, and communities
- 40% of American children were direct victims of 2 or more violent acts
- 1 in 10 were victims of violence 5 or more times
- 25% had been exposed to family violence during their life
- 1 in 10 American children saw one family member assault another family member
- Children are more likely to be exposed to violence and crime than adults

Wisconsin data is equally troubling. The Youth Risk Behavior Survey, where students self-report on their health and behaviors, tells us:

- **Bullying** – At its peak in 2017 (prior to the pandemic), 25% of students reported being bullied at school. That has dropped to 18% in 2021 but is still ahead of the national average of 15%. Parents paint a worse picture, however. When parents of 6-17 year-olds were asked in the National Survey of Children’s Health if their child was being bullied, picked on, or excluded by other kids in the last year, 42% of parents in Wisconsin said yes in 2020-21 compared to 26% in 2016-16 (a double digit increase in five years).
- **Harassment and bullying at school** – three quarters of Wisconsin students (76%) say bullying is a problem at their schools. And they’ve been saying so for at least 10 years.
- **Safe from harm** – 1 in 10 Wisconsin students rarely feel safe at school.
- **Violence at school** – over half of students (54%) say violence is a problem at their school. This rate has increased five percentage points over the last 10 years.

The topic of violence and safety affecting children’s mental health is a big one, and there is no easy way to solve it. By raising it as part of our Children’s Mental Health Week conversation we hope to raise awareness and inspire organizations and individuals to consider that action can be taken to help address it and paint a brighter picture for Wisconsin children.

(more)

Lived Experience Insights

OCMH Lived Experience Partner Crystal Long shares her insights on navigating the children's mental health continuum.

The journey through recognizing symptoms, getting mental health services, and then seeing results and growth has been a long and exasperating experience. Everyone's experience is different – there is no “one size fits all” when it comes to this process. I hope by sharing my story it will help others know they are not alone, that this process is extremely messy, and there is a light in the tunnel.



My story of navigating the children's mental health continuum

My family was very young when I started to notice my children were different than most of their peers. I remember thinking “there is something going on but I just don't know what it is.”

My young ones were very rambunctious, had extremely high energy levels, and little memory retention. It seemed like every morning when we woke up it was with a blank slate. When I took them to a doctor and explained what was happening, I got berated and told “boys will be boys” and that I needed to do better. I took them to a psychologist and was told they needed medication. I didn't get answers when I asked why they needed medication, so I didn't put them on it

For many years, and with many doctors, I went back and forth like this. I felt defeated, ashamed, and angry. And the feelings of guilt for ruining my children's life because I just could not figure out how to do better was overwhelming.

When my oldest was about 10 I found a doctor who listened to what I told him. I can't explain the relief I felt when that doctor finally explained to me what was really going on, and that I wasn't a terrible parent. After getting that diagnosis and knowledge it was substantially easier to obtain some services, but it didn't open the doors as wide as I thought it would.

We've been in consistent therapy for many years now, and while there have been massive changes, there are still times I hear people say that it doesn't seem like it's working for me and my family. To that I say they really don't know my family because if they did they would see the growth.

What I learned

Finding a professional who was on my side made all the difference. Having them speak with the other professionals who didn't take parents as serious was also a game changer. The unfortunate reality is I've found a lot of doctors got very critical when they were questioned.

Finding the right counselor is also important. You can call any counselor and set appointments, but that will not guarantee they will be a good fit or that they will be able to meet your specific needs.

Finding out what your specific needs are is a struggle, particularly if you have to figure it out on your own. And, the more specific your needs are, the harder it is to obtain services. If you have multiple children with different needs, it can seem impossible, especially when they become teenagers with a whole different set of individualized symptoms.

Therapy needs are fluid and it takes a while to see results. Therapy needs can change, and sometimes that means you have to find new programs and start over. It can be very daunting, but keep going. Mental health is a life-long journey.

Children cannot tell you what's going on with them. Until they can help themselves, they need your help.

Use whatever resources you can get. There are many organizations that can assist you.

This journey can be emotionally stressful for the parents. It provokes a lot of feelings. Allow yourself to feel all of them, your feelings are OK.

What I hope

I hope one day parents will be taken seriously in this process so they can get the help they need early and so they don't have to keep seeking multiple professionals. We haven't gotten there yet.

Keep seeking, and where you can, be that resource for another parent who is struggling to get the services they need.

OCMH Updates

Children's Mental Health Priorities in the State Budget

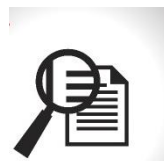
With his declaration of 2023 being the Year of Mental Health, Governor Evers has included \$500 million in his 2023-25 state budget to expand access to mental and behavioral health for children and adults. Of these, OCMH has identified items of particular importance to sustaining and advancing children's mental health treatment/services as well as increasing youth voice. See the priority list OCMH developed [here](#).

Advocacy with legislators to include the children's mental health initiatives in the state budget is the most immediate and effective action we can take. OCMH has made it easy to voice your support to your Assembly Representative and State Senator. On our website you'll find:

- How to [find your legislators](#).
- [Email](#) to personalize and send.



Children's Mental Health in the News



OCMH Senior Research Analyst Amy Marsman spotlights recent articles, resources and research findings impacting youth mental health.

Kids attempting suicide by overdose rose sharply during pandemic

Data reported to the National Poison Data System, [analyzed by the CDC](#), and [recently reported](#) show suspected youth suicide attempts by poisoning jumped during the pandemic. Among 10-12 year olds, suicide attempts in 2021 increased 73% compared to 2019. Among 13-15 year olds, suicide attempts increased 49% over the same time period. Overall, for the 10-19 year old youth group, suicide

attempts by poisoning increased by 30%. Researchers noted that girls accounted for eight out of ten suspected suicide attempts in the 10-19 age group.

Half of kids didn't receive follow-up after mental health visit to the ER

A [journal article](#) in *Pediatrics* reported that out of 28,000 U.S. kids discharged from Emergency Rooms (ER) for a mental health crisis, only about half had a follow-up health care appointment within a month. More than 25% were back within six months. Follow-up rates were worse for Black kids when compared to white kids who had been to the ER. An [article](#) on the research points out that community clinics with the greatest needs are likely to have the least experienced staff.

Youth mental health crisis is also a cost crisis

Knowing mental health disorders are the [most expensive conditions](#) to treat among kids, and that 20% of American health care [debt is from mental health services](#), Nomi Health [study](#) projects a spike in employer costs in 2023. Care for kids with a mental health diagnosis cost 69% more on average than for those who did not have a diagnosis. Elementary age children with depression had prescription rates of 42% in 2022, a substantial jump from 29% in 2019. Employers are urged to examine if they are providing solutions to help care for employees and their families.

Amid Adderall Shortages, Teens Misuse ADHD Medications

Supply chain problems and increasing demand have resulted in a shortage of ADHD prescription drugs. ADHD diagnoses and stimulant prescriptions have increased, partially due to leniencies afforded during the pandemic, but also due to better awareness and detection of ADHD. Teen misuse of ADHD medications – for nonmedical uses – has also risen. Read [NIH press release](#), [JAMA journal article](#), and [story](#).

Wisconsin Lead Poisoning Maps

Amidst [news](#) that not enough children are being tested for lead poisoning, DHS released a new resource to track lead poisoning in Wisconsin. A [report](#) from the CDC shows the number of kids in the state who were tested dropped 75% between April 2019 and April 2020. While testing has rebounded somewhat, the number of kids currently being tested is still below pre-pandemic numbers. Lead poisoning damages developing brains and bodies. To explore your communities' results, check out the [Childhood Lead Poisoning Data Explorer](#).

Preschool Expulsions

In every state, there are profound racial disparities behind disciplinary statistics in schools. It is [estimated](#) that 48% of Black male children in the U.S. have been suspended at least once, more than double the 21% rate of white male children. Child Trends studied the implementation of a Maryland law that restricts suspension and expulsion in prekindergarten through second grade (PK-2) and mandates the use of non-punitive behavioral interventions. The new Child Trends [brief](#) summarizes key findings and offers recommendations for policies that reduce PK-2 suspension and expulsion.

Wisconsin Families Used Child Tax Credits on Food, Rent, and Utilities

The KIDS COUNT Data Center has been revamped and updated. Users can explore state and national [data](#) covering a variety of topics: economic well-being, education, family, health and safety, youth, and young adults. In one [series](#), data show how Wisconsin families who spent their Child Tax Credit (CTC) dollars used them primarily for food, followed by rent and utilities. During back-to-school time, families spent less of the CTC on food and more on school supplies. Child Trends recently released a [brief](#) on how cash transfers like the CTC support early childhood development, including mental health and healthy relationships.

Of Interest

May is National Teen Self Esteem Month – Let’s take the opportunity in May to raise awareness of the importance of making sure our teens are self aware and feel confident about themselves. [Learn more and get ideas](#) on how to build self esteem in teens.



Qualified Treatment Trainee Grant Opportunity – Applications for Spring 2023 awards are being accepted through May 12, 2023. For more [information](#).

The Child Mind Institute reminds people of their [Guide to ADHD](#) amid the continued **shortage of ADHD medications**.

Say It Out Loud is an annual art competition open for people age 6 and older residing in Grant, Iowa, or Lafayette County during May, National Mental Health Month. Artwork is accepted from May 1 through May 31, and entries will be featured in Southwest Health facilities throughout the year to raise awareness. For [information](#).

	YOUR WORDS	MATTER
	INSTEAD OF...	TRY
	Be quiet.	Can you use a softer voice?
	What a mess!	It looks like you had fun! How can we clean up?
	Do you need help?	I'm here to help if you need me.
	I explained how to do this yesterday.	Maybe I can show you another way.
	Do I need to separate you?	Could you use a break?
	Stop crying.	It's okay to cry.
	Do you have any questions?	What questions do you have?
	You're OK.	How are you feeling?
	It's not that hard.	You can do hard things.
	We don't talk like that.	Please use kind words.

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