



# NEWSLETTER

July 2021 Edition

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

## Rights of Minors – Outpatient Behavioral Health Treatment

Minors have legal rights regarding their outpatient mental health and substance use treatment. A brochure produced by the Wisconsin Department of Health Services Division of Care and Treatment Services explains these. Find information on consent for mental health and substance use treatment, personal rights, treatment rights, and patient rights help. Access the brochure in [English](#), [Hmong](#), or [Spanish](#). Access an [informational flyer](#).



## Mental Health 101 – Collective Impact Partner experts help us understand basics of mental health

### What is Anxiety?

By: Marcia J. Slattery MD, MHSc, Professor of Psychiatry and Pediatrics, Director, UW Anxiety Disorders Program – Department of Psychiatry, UW School of Medicine and Public Health

Anxiety is the most common mental health problem in children and adults. Occasional anxiety is normal; anxiety that is recurrent, or pervasive, and interferes with usual activities may indicate an anxiety disorder. Symptoms often include feeling anxious, worried, or apprehensive. The three most common types of anxiety disorders in youth include separation, social, and generalized anxiety. Kids with separation anxiety don't want to leave home or their caregivers and worry that something bad might happen to themselves or others. For social anxiety disorder, kids avoid social interactions and activities and worry about not fitting in. Kids with generalized anxiety disorder worry about many different things that could go wrong, are often irritable, and appear easily stressed. Anxiety treatments include cognitive behavioral therapy (CBT) to decrease anxious thoughts/worries and avoidant behaviors. In some cases, medication may also be indicated (in addition to CBT) to optimize brain pathways and function affected by anxiety.



## OCMH Updates

### Welcome Kate McCoy as OCMH Research Analyst – Advanced

OCMH is delighted to welcome (back) Kate McCoy to the team as OCMH Research Analyst – Advanced. She began her position on June 21<sup>st</sup>. Kate was the original researcher for OCMH in 2014-2015. Since 2015, she has worked as a Research and Evaluation Consultant for the Wisconsin Department of Public Instruction where she was responsible for the Youth Risk Behavior Survey.



**Listening Sessions** – OCMH will hold two listening sessions in July:

- **Real Talk with Culturally Diverse Mental Health Professionals: Culturally Sensitive Supervision**  
Mental health professionals from diverse backgrounds across the state are invited to talk with each other about culturally sensitive supervision. The date for this virtual event is July 20, 2021, 6 – 7:30 pm (via Zoom). This is the third virtual event where OCMH has created a forum for culturally diverse mental health clinicians. Panelists include Jose Torres, MFT/Psychotherapist/Couples and Family Therapist, Consultant & Educational Services; Viveca Nwagbaraocha, Bridge for Success PhD Program Student; and Sheng Lee Yang, MSW, Executive Director – US 2 Behavioral Health Care Inc. The panel moderator is Dr. Armando Hernandez, Chief Diversity Officer – Journey Mental Health Center. Culturally diverse clinicians, clinicians in training, graduate students, and others engaged in direct mental health care are invited to attend. [Register](#).
- **Youth Listening Session – Why understanding intersectionality matters**  
Teens and young adults across the state ages 13 – 26 are invited to attend this virtual discussion on intersectionality and share their experiences and opinions. Our youth leaders selected this topic and hope that the discussion will lead to how the system and providers can do better to address intersectional identities. Young people are invited to share their experiences and opinions. The event is July 29, 2021, 5:30 – 7:30 pm, via Zoom. Youth attending will receive a \$15 gift card. [Register](#).

## Legislative & Policy Update

**State Biennial Budget signed by the Governor.** On July 8, Governor Evers signed the biennial budget bill, passed by the Legislature, into law as [2021 Wisconsin Act 58](#). The final budget is markedly different from the budget proposed by the Governor. Detailed explanations of each element of the Governor’s proposal, changes made by the Legislature, and provisions vetoed by the Governor are available on the Legislative Fiscal Bureau’s [website](#). Below is a summary of how OCMH’s 7 Recommendations for Improving Children’s Mental Health fared in the final budget.

1. **Expand Medicaid** which would extend coverage to 53,000 parents and result in millions of dollars of savings that could be reinvested in children’s mental health. **Removed.**
2. **Increase the Earned Income Tax Credit** to reduce children’s behavioral health problems, including anxiety and depression, as recommended by the Centers for Disease Control and Prevention. **Removed.**
3. **Increase investment in school mental health** for both student services staff and mental health collaboration grants.
  - **School Mental Health / Student Wellness.** The Governor proposed investing \$46.5 million to increase to 10% state funding of school expenditures for school counselors, psychologists,

social workers, and nurses. The final bill increases base funding for these services by \$12 million and removes the statutory language changes. **Modified.**

- **School Mental Health Collaboration Grants.** Increase grant funding by \$7 million to increase the number and size of school-based mental health collaboration grants that provide students with mental health services, specifically through co-location of services at schools. **Approved.**
4. **Increase Medicaid payment for mental health treatment** to improve recruitment and retention of mental health professionals. The Governor proposed \$40.6 million to fund a 40% phased-in increase (half in January, 2022 and half in January, 2023) for Medicaid outpatient mental health and substance abuse services and a 40% increase for child-adolescent day treatment rates. The final bill provides \$24 million to fund a 15% increase in outpatient mental health and substance abuse services and a 20% increase for day treatment services with both increases beginning January, 2022. **Modified.**
  5. **Invest in skillful responses to children’s problem behaviors** by supporting early child care educators with **Social Emotional Learning (SEL) Training and Technical Assistance for Early Childhood Educators**. This \$3.3 million in federal dollars for training, technical assistance, and program coordination will be augmented by dollars from DCF’s implementation [Preschool Development Grant – Birth to Five](#). **Approved.**
  6. **Increase investment in peer support** to increase access to services leading to faster and longer lasting recovery through \$0.6 million of support for behavioral health phone line support backup to staff at four peer-run respite centers during periods of high call volume. **Removed.**
  7. **Increase DSPS Position Authority** so the Department can process mental health professional licenses faster with staff financially supported by licensing fees. The Governor proposed \$2.0 million for 16 positions. The final bill provides \$0.6 million for 5 positions with 2 being designated for health license and permit program associate positions. **Modified.**

**School Resource Officers - Required Training (AB330).** Current law provides standards and training requirements for law enforcement officers, but not for school resource officers who are law enforcement officers assigned by a law enforcement agency to work in collaboration with a school district, private school, or independent charter school. This [bill](#) requires the Office of School Safety in the Department of Justice (DOJ) to develop standards and approve a certified training program for school resource officers. The bill prohibits law enforcement agencies from assigning officers after September 1, 2022, as school resource officers unless they have completed a training program that DOJ has approved. The bill also requires the Office of School Safety to maintain a database of all school resource officers and when officers completed the training required under the bill. The Assembly passed the bill on June 16<sup>th</sup> and messaged it to the Senate for its consideration. The Senate has not yet acted on the bill.

**Gender Neutral Parent Birth Certificate.** On June 1, Gov. Evers signed [Executive Order #121](#) directing state agencies to use gender-neutral language in their external communications. On June 28, DHS announced changes to the birth certificate form to allow the option of ‘Parent,’ alongside ‘Mother / Father.’ Other changes to the birth forms include using "parent giving birth," and making the forms available in English, Spanish, and Hmong starting July 1. These changes are consistent with existing public-facing forms within Vital Records that use spouse-spouse and other gender-neutral language. Individuals who would like to request that the label on their or their child's existing birth certificate be switched to parent-parent can [email](#) or call the Vital Records Office (608-266-1373). This updating of the birth certificate form is one important step toward the adoption of gender-neutral language in all of DHS external documents. Many parents and children will appreciate this more accurate description of their family composition.

## Federal Legislation

**Promoting Effective and Empowering Recovery Services (PEERS) in Medicare Act of 2021.** This [bill](#) introduced by U.S. Senators Bill Cassidy, M.D. (R-LA) and Catherine Cortez Masto (D-NV) is a companion bill to HR 2767 previously introduced by Rep. Judy Chu (D-CA) and Rep. Adrian Smith (R-NE). Leading mental health organizations, including Mental Health America, are [supporting](#) this bill that would allow Medicare coverage of peer support services for individuals with mental health or substance use disorders who are being treated in primary care and receiving integrated behavioral health services. Medicare coverage of these peer support services could lead to Medicaid coverage of these services as a more standard, rather than specialized service.

## Of Interest

**Well Badger launches [Children’s Mental & Behavioral Health Resource Navigator](#)** – This new online tool helps parents, caregivers, and professionals navigate services for children’s mental and behavioral health. An adult confidentially answers a few questions on behalf of a young person under 21, and the Navigator provides a customized guide with suggested next steps and applicable resources.

**Wisconsin Nonpartisan Redistricting Committee** launched a portal to gather public input. The Wisconsin People’s Maps Commission (PMC) encourages Wisconsinites to submit maps of their communities, redistricting plans of their own, and written comments to guide the work and recommendations of the PMC. Access the [portal](#).

**July is National Black, Indigenous, People of Color (BIPOC) Mental Health Month.** [Learn more.](#)

**NAMI Youth Ambassador Opportunities** – NAMI is looking for youth and young adults (ages 14-25) affected by mental health conditions who are interested in sharing their voice on a national platform. To apply complete this [form](#). For questions contact Jennifer Rothman at [jrothman@nami.org](mailto:jrothman@nami.org).

## Children’s Mental Health in Wisconsin News

*Here are a few articles related to children's mental health that we noted and would like to share.*

- How Autistic People are Showing the Limitations of Person-First Language. [Read the article.](#)
- Milwaukee’s Black men discuss fatherhood – Milwaukee Journal Sentinel. [Read the article.](#)
- Language change among advocates regarding the term “Special Needs” – USA Today. [Read the article.](#)
- More Wisconsin Police Departments Are Adding Social Workers to Respond To Crisis Calls – WPR. [Read the article.](#)
- Fatal overdoses in 2021 already higher than in 2020 – WAOW. [Read the article.](#)
- 'I Would Always Say Be Careful': Milwaukee Grapples With Uptick In Shooting Deaths Among Youth – WPR. [Read the article.](#)

The Office of Children’s Mental Health  
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