

SUPPORTING CHILD WELL-BEING THROUGH ADDRESSING SHORTAGES IN THE MENTAL HEALTH WORKFORCE

FEB 2021

WHY THIS IS IMPORTANT

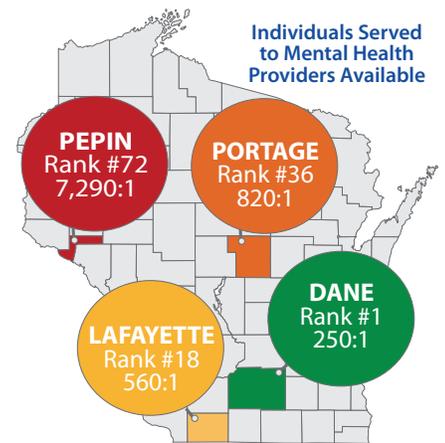
Mental health workforce shortages have far-reaching implications for children and providers alike. Shortages inhibit access to culturally competent and geographically diverse practitioners, and create large disparities for both children of color and those living in rural areas. Developing retention and recruitment strategies are critical for increasing the workforce, but also for ensuring providers' overall well-being. When met with high demand for services, they can become overworked and prone to burnout, affecting their ability to provide quality care.

WHAT THE RESEARCH SAYS^{1,2}

As of 2019, Wisconsin had an average of 490 individuals served by one mental health provider in a county, if the population were equally distributed across providers. Across the nation, the top state has a ratio of 290:1. Due to the pandemic, we expect to see a steep increase in provider need in coming years.

The mental health workforce shortage has individual, community and state level consequences. When the supply of providers cannot accommodate the demand for services, it can lead to an increase of:

- Distress caused by worsening mental health symptoms
- Family conflict, child abuse and neglect
- Risk of suicide, homelessness, and substance use
- Out-of-home placement and juvenile detention
- Emergency room visits and in-hospital stays
- Individual, community and state-level costs associated with mental health treatment



WHAT'S HAPPENING IN WISCONSIN?

Wisconsin takes several approaches in addressing workforce shortages that will support a child's social-emotional development and improve access to mental health care. Since 2019, Wisconsin has made significant investments through several grants in recruiting and retaining the mental health workforce:

- ▶ **Early Childcare and Education** - Grants assist in building the pre-school infrastructure by expanding cross-sector professional development and increasing workforce compensation.
- ▶ **Clinical Supervision** - Grants support mental health qualified treatment trainees in their 2-3 years of practice prior to full licensure, and the ability to be paid for therapy services. The Wisconsin Mental Health Council and the Department of Safety and Professional Services are also working to remove the administrative barriers that prevent license approvals.
- ▶ **Culturally and Linguistically Diverse Practitioners** - Grants support increases in mental health professionals to meet the needs of underserved populations.
- ▶ **Telehealth for Mental Health Services** - Children in underserved areas are now able to access more mental health services due to modifications in the implementation and reimbursement for sessions.



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ADDRESSING WORKFORCE SHORTAGES REDUCES HEALTH DISPARITIES IN RACIAL/ETHNIC GROUPS

Children of color and those living in rural areas already experience significant disparities in mental health that are exacerbated by mental health professional shortages.

There are several state and federal incentives available which encourage providers to work in designated Health Professional Shortage Areas. To learn more, visit the [Department of Health Services website](#).

MENTAL HEALTH OUTCOMES³



WHAT WE CAN DO^{4,5}

➔ POLICY MAKERS:

- Increase compensation for mental health providers to improve rates of recruitment and retention.
- Support funding for social-emotional training for early care and education to reduce suspensions, expulsions, and seclusion and restraint.
- Support parent and peer-run organizations to train, bill insurance, and pay for peer specialists.
- Require private insurers to cover telehealth for mental health services.
- Support staff for, and modernization of, state mental health licensing system.

➔ PARENTS:

- Leverage your lived experience and join the workforce as a peer specialist.
- Encourage the young people in your life to pursue mental health fields of study and careers.

➔ PROVIDERS:

- Expand the role of individuals and families by providing family-centered care and shared decision-making.
- Prioritize staff development opportunities for training in best practices and self-care.
- Develop and implement competency-based curricula that employ culturally relevant therapies and track learned knowledge, skills, and abilities.

➔ COMMUNITIES:

- Strengthen connections between behavioral health organizations, schools, and local community organizations to increase access.
- Expand the use of “grow-your-own” recruitment and retention strategies focused on residents of rural areas, culturally diverse populations, and consumers and families.

REFERENCES:

¹ Duenow, L. et al. A Mental Health Workforce Crisis: Roadmap for Enhancing Recruitment & Retention in Minnesota, Iowa & Wisconsin. Policy Brief, March 2017.

² County Health Rankings & Roadmaps, Wisconsin 2020. Retrieved from: <https://www.countyhealthrankings.org/app/wisconsin/2020/measure/factors/62/description?sort=sc-3>

³ University of Wisconsin Population Health Institute. County Health Rankings State Report, 2019.

⁴ Wisconsin Early Childhood Advisory Council. Recommendations for Governor Evers. 2020 Report.

⁵ Wisconsin Council on Mental Health, Children and Youth Committee. Mental Health Workforce Principles and Policy Recommendations. Aug. 6, 2020.