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The youth mental health crisis in Wisconsin and the nation persisted in 2023.

The COVID-19 pandemic and its effects on mental health may have subsided, however, as the data in this report show, levels of anxiety, depression, self-harm, and suicidal thoughts continue to present at extremely concerning rates, especially among girls, children of color, and LGBTQ youth.

While youth mental health is always priority number one for our office, many state and national leaders also prioritized youth mental health this year. Gov. Tony Evers declared 2023 The Year of Mental Health and frequently urged action. U.S. Surgeon General Vivek Murthy addressed the importance of relationships, social connections, and resilience as well as the urgent response needed to buffer social media's impact on kids. The National Governors Association issued a playbook on Strengthening Youth Mental Health. These leaders amplified the urgency of the crisis and brought increased attention, including from the media, to our messages and responses to the crisis.

Our responses to the crisis focused on system change and providing practical suggestions for youth, parents, and families to take action in their own lives. Highlights included Office of Children's Mental Health (OCMH) state budget recommendations for children's mental health funding priorities. During mental health month in May, we emphasized action—not just awareness—on behalf of children's mental health. We provided a suite of messages, resources, and online toolkits to promote the priorities and sustainable funding needed to support Wisconsin's children. We began convening leaders from our state's 300 youth-led wellness programs at school to elevate youth voices and their perspectives on how to respond to the mental health crisis, also allowing them to learn from other youth leaders.

“"The pressure to succeed, concerns about climate change, widespread gun violence, and the political divisiveness being played out at school boards, libraries, and classrooms—these stressors are cumulatively unique and unlike what any previous generation has faced.”

Several times during the year, we took a break from the crisis to celebrate advancements in children's mental health: more policymakers speaking up for children's well-being, increased school mental health treatment programs, more people with lived experience participating at policy tables, and more people talking boldly and openly about mental health.

Yet, with youth nationally identifying the pressure to succeed, concerns about climate change, widespread gun violence, and the political divisiveness being played out at school boards, libraries, and classrooms as key factors in their declining mental health, we must acknowledge that these stressors are cumulatively unique and unlike what any previous generation has faced.

In 2024, we will engage with youth more extensively to listen for their solutions. We will continue to ground our work in evidence and pursue our Social Connectedness of Youth agenda, emphasizing that Connections are the Destination. Above all, we will collaborate to build wellness for all Wisconsin youth.

Linda A. Hall
Director, Wisconsin Office of Children's Mental Health
OVERVIEW

ABOUT THE OFFICE OF CHILDREN’S MENTAL HEALTH

Supporting Wisconsin’s children in achieving their optimal mental health and well-being drives our work.

By encouraging collaboration across child and family service systems in Wisconsin, including state agencies, nongovernment mental health programs, advocates, and people with lived experience, the Wisconsin Office of Children’s Mental Health supports children's mental health system improvements.

Our Values

- Collaborative across systems
- Data driven
- Family and youth guided
- Promote inclusivity and equity

Our Staff

Linda A. Hall
Director

Karen Katz
Operations Lead

Amy Marsman
Senior Research Analyst

Andrea Turtenwald
Family Relations Coordinator
Child well-being has been a concern for many years as rates of youth mental health declined, but in the post-pandemic years, even more alarms have been sounded. Youth tell us their key stressors are academic pressure, along with a compendium of societal stressors that are unique to their generation: widespread gun violence, climate change, discrimination, and deep political divisiveness. Research tells us that families are also under stress, impacting both parent and child well-being.

While there’s a growing understanding of the impact of social stressors on mental health, there’s also a growing list of actions that all of us can take to address children’s mental health. The following trends spotlight the stress that families are under, but also highlight the policy opportunities that Wisconsin has to substantially address children’s mental health and wellness.

**Childcare’s Impact on Wellness**

90% of brain growth happens in a child’s first 5 years.

High-quality childcare is essential in the first 5 years of a child’s life. Unfortunately, we are in the midst of a childcare crisis, and Wisconsin—one of the hardest-hit states—is at risk of losing a third of childcare centers due to closing; 50% of early care educators are considering leaving the field; and close to 90% of centers are considering raising tuition/parent fees. Additionally, 54% of Wisconsin residents live in a childcare desert where 3 or more children compete for every opening.

Each of these scenarios means more stress on families. When parents are stressed, their turmoil can be absorbed by children. Often it also means less time for healthy, stable, positive interactions that are crucial for brain development—the foundation of infant/toddler mental health. Without adequate childcare, families suffer.

The evidence is clear, children’s brains require stable, positive, caring interactions with adults. While parents are primary caregivers, their employment often depends on stable childcare where their children continue to have the positive interactions that are so essential for healthy brain development.

An investment in high-quality childcare is an investment in early childhood mental health.
Poverty’s Impact on Wellness

6 in 10 Wisconsin teens experiencing food insecurity report anxiety and depression. 4 in 10 report self-harm.

The rate of child poverty in the United States more than doubled recently, from 5.2% in 2021 to 12.4% in 2022, following the expiration of pandemic programs like the expanded Child Tax Credit. Financial worries are often the top stressor facing families—and families with high financial stress are twice as likely to report poor health. Low-income families and those living in poverty have higher risks of poor mental health than financially stable households. Food insecurity is closely intertwined, with clear impacts on children’s mental health. Among Wisconsin high school students who are food insecure, 6 in 10 report anxiety and depression, and 4 in 10 self-harm. Analysis of how Wisconsin families spent their Child Tax Credit payments during the pandemic shows that food was the top expenditure.

Policies like expanded child tax credits reduce poverty, household hardship, and food insecurity. Policy decisions like this make measurable, profound differences in family health—not only for those living at the poverty line but also for low- and middle-income families.

An expansion of child tax credits is an investment in children’s mental health.

How Wisconsin Families Spend Child Tax Credit Payments

Housing’s Impact on Wellness

Housing stability improves youth mental health and educational outcomes while reducing behavioral problems and suicide risk.

Most families’ largest outlay is for housing. Because housing costs are an increasing share of household budgets, and pandemic era eviction moratoriums have ended, more Wisconsin families are facing housing instability. Research shows that housing stability positively impacts child well-being. Stable housing has been shown to reduce behavioral problems in children and reduce suicidality. In addition to better mental health, youth who live in stable housing have better physical health, school attendance, academic performance, and improved earnings later in life.

Expanding affordable housing stock, funding housing assistance, and expanding the Earned Income Tax Credit are all investments in children’s mental health.
DATA

WISCONSIN CHILD WELL-BEING INDICATORS DASHBOARD

Understanding the Data Dashboard

Wisconsin is going in the wrong direction (known to be statistically significant).

Wisconsin seems to be headed in the wrong direction, but is within the margin of error (not statistically significant) or unknown (significance unknown).

This indicator did not change (difference of 0.5% or less before rounding).

Wisconsin seems to be headed in the right direction but is within the margin of error (not statistically significant) or unknown (significance unknown).

Wisconsin is going in the right direction (known to be statistically significant).

Each stoplight indicates whether the current Wisconsin data is an improvement or not when compared to the baseline data.

Data from approximately 5 years prior, when available, are used for baseline statistics. The most recent available data at the time of print are used for current statistics. Many data elements are reported biannually. Data that are new or updated in this year’s report are marked with * next to the indicator name.

For details on any indicator, please see the indicator description.

Healthy Behaviors

<table>
<thead>
<tr>
<th>2023 Indicators</th>
<th>An * marks new or updated data</th>
<th>US Current</th>
<th>WI Baseline</th>
<th>WI Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent participating in activities (ages 6–17)*</td>
<td>72%</td>
<td>85%</td>
<td>78%</td>
<td></td>
</tr>
<tr>
<td>Electronically bullied (cyberbullying)</td>
<td>16%</td>
<td>18%</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Bullied on school property</td>
<td>20%</td>
<td>24%</td>
<td>18%</td>
<td></td>
</tr>
<tr>
<td>Students who use electronics 3+ hours on average school days (not for schoolwork)</td>
<td>NA</td>
<td>40%</td>
<td>75%</td>
<td></td>
</tr>
<tr>
<td>Students who sleep 8 hours on average school night</td>
<td>22%</td>
<td>26%</td>
<td>28%</td>
<td></td>
</tr>
<tr>
<td>Students who experienced sexual dating violence</td>
<td>8%</td>
<td>10%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Students who drink alcohol (at least one drink at least one day in prior month)</td>
<td>29%</td>
<td>30%</td>
<td>26%</td>
<td></td>
</tr>
<tr>
<td>Teen birth rate per 1,000*</td>
<td>13.9</td>
<td>13.8</td>
<td>10.1</td>
<td></td>
</tr>
<tr>
<td>Students who vape frequently (20 or more days in the month prior)</td>
<td>11%</td>
<td>3%</td>
<td>7%</td>
<td></td>
</tr>
</tbody>
</table>

Kids who participate in extracurricular activities are less likely to report depression and anxiety and more likely to feel they belong.

Some screen time can be positive, creating opportunities to connect with friends and peers. Excessive screen time, however, is associated with mental health concerns.

Research consistently shows that kids who sleep the recommended amount have better mental health. Experts advise middle and high school classes begin after 8:30 am.
### Social & Economic Factors

<table>
<thead>
<tr>
<th>2023 Indicators</th>
<th>An * marks new or updated data</th>
<th>US Current</th>
<th>WI Baseline</th>
<th>WI Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low-income youth*</td>
<td>35%</td>
<td>35%</td>
<td>29%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Homeless youth*</td>
<td>2%</td>
<td>2%</td>
<td>2%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>School connectedness</td>
<td>NA</td>
<td>71%</td>
<td>61%</td>
<td><img src="Red" alt="Red" /></td>
</tr>
<tr>
<td>School suspensions</td>
<td>3%</td>
<td>3%</td>
<td>3%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Trusted adult at high school*</td>
<td>NA</td>
<td>72%</td>
<td>67%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Difficulty with friendships (social skills)</td>
<td>23%</td>
<td>26%</td>
<td>23%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>High school graduation*</td>
<td>87%</td>
<td>90%</td>
<td>90%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Employment (ages 16–24)*</td>
<td>55%</td>
<td>66%</td>
<td>67%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Adults 25+ with bachelor's degree*</td>
<td>36%</td>
<td>30%</td>
<td>33%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Parents who attend child's activities</td>
<td>84%</td>
<td>90%</td>
<td>89%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Family communicates very well*</td>
<td>62%</td>
<td>59%</td>
<td>61%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Foster care placements per 1,000</td>
<td>2.8</td>
<td>4.3</td>
<td>3.1</td>
<td><img src="Green" alt="Green" /></td>
</tr>
<tr>
<td>Four-year-old kindergarten enrollment*</td>
<td>32%</td>
<td>71%</td>
<td>61%</td>
<td><img src="Red" alt="Red" /></td>
</tr>
<tr>
<td>Mothers with higher education degrees*</td>
<td>44%</td>
<td>46%</td>
<td>50%</td>
<td><img src="Green" alt="Green" /></td>
</tr>
</tbody>
</table>

- **Child poverty has declined due to policies such as the Earned Income Tax Credit, and further reduced during pandemic-expanded relief programs like the Child Tax Credit (CTC). A reversal of this trend is expected since the expiration of CTC expansion.**
- **Kids who feel they belong at their school have better attendance, academic success, and mental health.**
- **Having supportive and trusted adults is crucial to youth wellness. Rates of trusted adults at school have declined overall and are much lower for students of color.**
- **Positive adolescent friendships play a key role in protecting youth mental health. Kids’ interactions with their peers have long-lasting effects well into adulthood.**
- **Kids who feel they can talk to their family about feelings is a positive childhood experience, which can mitigate negative effects of adverse childhood experiences (ACEs).**
- **Mental wellness is built early in life when children’s brains undergo the vast majority of development by age five. Preschool, in particular, can forge positive connections and set kids on a healthy path.**
Clinical Care

2023 Indicators | An * marks new or updated data | US Current | WI Baseline | WI Current
--- | --- | --- | --- | ---
Psychiatrists (statewide count)* | NA | 340 | 370
School Social Workers (statewide count)* | NA | 673 | 772
School Counselors (statewide count)* | NA | 2122 | 2251
School Psychologists (statewide count)* | NA | 957 | 1028
Difficulty obtaining mental health services | 47% | 45% | 50% | ✓
Children with mental conditions who did not receive treatment (ages 3–17) | 48% | 47% | 49% | ✓
Doctors who did not ask about parental concerns with learning, development, or behavioral problems (ages 0–5) | 70% | 62% | 66% | ✓
Early developmental screen | 35% | 43% | 44% | ❌
Early prenatal care (first trimester)* | 75% | 80% | 82% | ✗

Though increasing, counts of community and school-based mental health professionals are far below recommended levels. Growing the workforce is key to addressing Wisconsin's youth mental health crisis.

Half of Wisconsin youth with a diagnosed mental health condition such as depression, anxiety, or behavioral problems receive no treatment.

The majority of prenatal mental health concerns go unreported. Maternal mental health checks can help address Wisconsin's high infant mortality rate.

Quality of Life

2023 Indicators | An * marks new or updated data | US Current | WI Baseline | WI Current
--- | --- | --- | --- | ---
Two or more ACEs (Adverse Childhood Experiences) | 17% | 21% | 18% | ✓
Youth experiencing a major depressive episode (ages 12–17)* | 20% | 14% | 16% | ✓
Children who have emotional, behavioral, or developmental conditions | 23% | 21% | 23% | ✓
High school students feeling sad or hopeless | 37% | 27% | 34% | ❌
Teens seriously considering suicide | 19% | 16% | 18% | ✓
Suicide attempts | 9% | 8% | 9% | ✓
LGBT youth seriously considering suicide | 45% | 43% | 48% | ❌
Young adults experiencing any mental illness (ages 18–25)* | 34% | 26% | 37% | ❌

The number of kids with major depression is increasing, both in Wisconsin and the nation.

There has been an alarming increase in the number of teens seriously considering suicide, especially among girls, kids of color, and LGBTQ students.

Political divisiveness over LGBTQ issues can negatively impact all youth but especially LGBTQ kids, as it contributes to rising rates of anxiety, depression, and suicidality.
PROMOTING THE SOCIAL CONNECTEDNESS OF YOUTH

We convened Collective Impact Teams that focused on three vital categories of Social Connectedness.

Cultural Identity Team

**GOAL:** Build community collaborations that provide opportunities for youth to connect to others and their culture, elevating youth voice in this work. 3 strategies and 10 action items support the goal.

**KEY ACTION ITEM:** Engage youth of all cultures to identify barriers to youth in connecting with others and their culture.
Evidence shows that youth who are socially connected have better mental and physical health. Youth are socially connected when they are actively engaged in positive relationships where they feel they belong, are safe, cared for, valued, and supported.

OCMH convened 4 teams that focused on 3 of the 5 Social Connectedness of Youth categories shown below.

Each team established a goal and then developed strategic action plans to support the goal.

OCMH will implement elements of each plan and encourages organizations and individuals throughout the state to also implement activities from the plans that align with their work. That is collective impact in action!

**Family Team A**

**GOAL:** Family voice is at the center and authentically leads in service planning/delivery. 3 strategies and 11 action items support the goal.

**KEY ACTION ITEM:** Develop best practices for making family voice at the center for organizations.

**Family Team B**

**GOAL:** Support the early childhood/childcare workforce and professionals serving this population with children’s mental health/well-being education and resources. 3 strategies and 9 action items support the goal.

**KEY ACTION ITEM:** Sustainability of Infant and Early Childhood Mental Health Consultation. Advocacy efforts to pass legislation that sustains Consultation beyond June 2024 when current funding ends.

**Supportive Adults Team**

**GOAL:** Equip adults to form supportive relationships with youth, including youth voice in this work. 5 strategies and 12 action items support the goal.

**KEY ACTION ITEM:** Develop evidence-based professional development on youth engagement and positive youth development so adults will be equipped for meaningful relationships with youth.
OUR STRATEGY

VALUING VOICE & CONNECTION

Through our work, we saw how the process of creating connection and relationship ultimately empowered and inspired OCMH’s Lived Experience Partners.

Throughout 2023, OCMH continued to receive positive feedback on social connectedness of youth as an important focus for addressing youth mental health. This guidance from our Lived Experience Partners provides focus to our initiative and reminds us how belonging and feeling heard has a profound impact on overall wellness.

“Due to me growing up with not a lot of a support system, to be able to share my story and have people who actually want to learn about it means a lot to me.”

– Brad, Wisconsin Youth Advisory Council Member

“My experience is always going to be significant to me, but when my experience is significant to somebody else because of what they’re going through, then you get a sense that what you’ve been through maybe wasn’t all for naught.”

– Jared, OCMH Lived Experience Parent Partner

“For me it’s being able to get my story out there to show people that you can do this. You can make it through.”

– Eris, Wisconsin Youth Advisory Council Member

“I learned so much from hearing others’ stories and connecting on what we’ve been through.”

– Jennifer, Wisconsin Youth Advisory Council Member

“It’s really important for us to share our stories and our lived experiences so service providers can see the impact of their work, and hopefully, we can find ways to work together to improve the systems of care.”

– Heather, OCMH Lived Experience Parent Partner

“It’s my voice and my voice alone. No one can share my voice for me. It’s mine. And I’m proud of it and my experiences.”

– ShawnaRae, Wisconsin Youth Advisory Council Member
Elevating Lived Experience

Lived Experience is a foundational pillar of OCMH’s work. Our Lived Experience Partners are the parents/caregivers of children with mental health challenges or the youth themselves (ages 16–26) who experience mental health challenges.

- **Sharing Voice**
  
  **18 Lived Experience Partners** participated on OCMH’s four Social Connectedness of Youth teams.

- **Lived Experience Academy**
  
  Our structured leadership development program provided training in storytelling and accessing resources in 2023. Each session was attended by an average of **22 lived experts** from across Wisconsin.

- **Lived Experience Academy Summit**
  
  The first Lived Experience Academy Summit was held in Wisconsin Dells in May. It convened **36 parent and youth leaders** from the Department of Children and Families and OCMH and provided time to connect, learn, and strategize. Attendees said the experience provided connections, community, and new ways to practice self-care.

- **Lived Experience Directory**
  
  Creating a listserv of nearly **100 parent and youth leaders** who want to participate in systems change opportunities got underway in 2023. Members receive wellness news and resources and are notified of opportunities to share their perspective to influence programs and policies across Wisconsin and beyond.

Elevating Youth Voice

Youth leadership builds resilience and activates the skills that promote and protect wellness long into adulthood.

- **Convening Student Leaders**
  
  Youth lead and support one another in **300 schools** across Wisconsin through 4 Peer-Led School-Based Wellness Programs: Raise Your Voice, Hope Squad, Sources of Strength, and REDgen. OCMH staff have attended trainings for each program. To facilitate collaboration and connections, OCMH convened over 100 students from 19 high schools at a virtual event in April, and over 30 student leaders from 13 high schools and 1 middle school at a virtual event in September.

- **Youth Wellness Network**
  
  OCMH convened **6 state departments** that have youth leadership efforts underway to share best practices and identify collaboration opportunities.
The declaration of 2023 as the Year of Mental Health offered OCMH a unique opportunity to draw attention to children's mental health.

- **Children’s Mental Health Week in May**
  The focus of Children’s Mental Health Week was on moving from awareness to acceptance to action. OCMH developed a **Children's Mental Health Toolkit** with suggestions to inspire personal and policy action. Resources were presented during a widely attended webinar.

- **Children’s Mental Health Advocacy Celebration at Governor’s Residence**
  OCMH wrapped up Mental Health month with an event hosted by Gov. Tony Evers and First Lady Kathy Evers on May 30th celebrating **partners across Wisconsin** actively working to improve child well-being.

- **Teen Coping Kits**
  OCMH shared **150 teen coping kits with young fans** and over 100 mental health information bags with adults at a Milwaukee Bucks February home game in partnership with the Department of Health Services and United Way of Greater Milwaukee and Waukesha County.

- **Conference Presentations**
  OCMH presented at **10 major conferences** throughout Wisconsin and led a Seminar Day focused on Children’s Mental Health at the Together for Children Conference in April.

- **Increased Media Attention**
  With rising state and national attention on the youth mental health crisis, OCMH noted **increased media interest**, especially on our **Fact Sheets** and messaging on what parents, youth, and government can do to improve children's well-being.
Research & Data

Data grounds OCMH’s work. OCMH produced an annual report and 6 children’s mental health fact sheets.

- The 2022 Annual Report
  Held at the State Capitol in January, the release event attracted over 340 virtual attendees as well as those attending in person.

- Fact Sheets
  These highly-valued publications explored important topics such as universal screening, toxic stress, girls’ mental health, and peer support.

Advocacy

The Governor’s proposed 2023–25 state budget included many provisions to improve children’s mental health.

- Children’s Mental Health Budget Priorities
  OCMH identified 10 items from the proposed budget as children’s mental health budget priorities and published them in a document that was widely circulated. The online document was viewed 232 times, and the advocacy webpage was viewed 394 times.

Reaching Wisconsin Online

<table>
<thead>
<tr>
<th>Page Views</th>
<th>Downloads of OCMH Mental Health Literacy Instructional Units</th>
<th>Followers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Feelings Thermometer</strong></td>
<td>10,000+</td>
<td>500 Facebook</td>
</tr>
<tr>
<td><strong>2022 Annual Report</strong></td>
<td>6,600+</td>
<td>438 LinkedIn</td>
</tr>
<tr>
<td><strong>Trauma-Informed Care Training Video</strong></td>
<td>5,100+</td>
<td>189 X (Twitter)</td>
</tr>
<tr>
<td><strong>Girl’s Mental Health Fact Sheet</strong></td>
<td>3,400+</td>
<td>189 Instagram</td>
</tr>
<tr>
<td><strong>Children’s Mental Health Week</strong></td>
<td>2,200+</td>
<td></td>
</tr>
</tbody>
</table>
OUR WORK

COLLABORATING FOR CONNECTEDNESS

OCMH works with state agencies, youth-serving organizations, and experts across the state to improve the well-being of Wisconsin’s youth.

Collective Impact Convening

OCMH primarily uses a collective impact model of convening people and organizations to focus on improving children’s mental health outcomes, systems, and social connectedness of youth.

135 PEOPLE on the Collective Impact Council to learn about children’s mental health initiatives

75 PEOPLE guiding our work as Lived Experience Parent and Youth Leaders

120 PEOPLE on 4 Social Connectedness of Youth teams to develop strategic action plans

20 PEOPLE on the Advisory Council to provide strategic guidance to OCMH

Leading Youth Voice at a State Level

• Shared Interest in Youth-Directed Work

Many state departments are interested in bringing the voice of youth into their decision making. OCMH has taken a leadership role in bringing these state departments together to explore more effectively integrating and elevating youth voice.
Contributing to State Agency Work

- Partnering On Initiatives

OCMH works closely with state departments that serve children and understand the mental health challenges our youth are facing. OCMH had taken lead roles in 2 important initiatives with the Department of Children and Families: the Parent Leaders in Child Welfare group and Infant Early Childhood Mental Health Consultation.

OCMH has also worked closely with the Department of Public Instruction on important initiatives including the Whole School, Whole Community, and Whole Child framework as well as K–12 mental health screening.

- Active Participation

OCMH supports the work of state department partners through active participation on numerous boards, committees, and councils including the Governor’s Wisconsin Council on Mental Health’s Children and Youth Committee and many with the Department of Children and Families, the Department of Health Services, and Department of Public Instruction. In addition, OCMH participates on numerous local and regional coalitions, boards, and committees and is routinely called on to provide insight on children’s mental health issues.

Supporting the Legislature

- Providing Resources and Expertise

OCMH is a resource on children’s mental health for Wisconsin’s legislators and their staff. As an example, OCMH provided expert testimony for the Assembly Committee on Mental Health and Substance Abuse Prevention.

- Annual Report Briefing

OCMH’s Annual Report was presented to the legislature, and the 2022 report briefing event welcomed 2 legislators as co-hosts.

- Engaging Legislators

Legislators actively participated in 2 of OCMH’s Social Connectedness of Youth collective impact teams.
Spotlighting State Department Children’s Mental Health Accomplishments in 2023

The year saw key children’s mental health accomplishments—several of which involve collaborations with OCMH—from 4 state departments that are also working on the challenges Wisconsin’s youth are facing.

Department of Children and Families

Strategic engagement with lived experience stakeholders continues in the Department of Children and Families’ (DCF) Parent Leaders in Child Welfare group, which brings together 20 parents with child welfare experience to advise DCF on system transformation. The group developed 2 resource guides for parents navigating the child welfare system.

DCF is also partnering with the Wisconsin Alliance for Infant Mental Health (WI-AIMH) to establish an Infant and Early Childhood Mental Health (IECMH) Consultation model in Wisconsin. In development by WI-AIMH, the program will provide mental health consultants to assist childcare and early education professionals in building knowledge and skills in mental health.

Department of Public Instruction

The Department of Public Instruction (DPI) Wisconsin School Mental Health Framework provides a vision for more equitable, integrated, and comprehensive systems for promoting well-being in schools. The Framework is deepening efforts to develop social and emotional skills, positive school culture, and eliminate systemic barriers to well-being and student success. A tool for use within the framework, the Mental Health Units of Instruction, saw a notable increase in 2023. As State Superintendent Dr. Underly said in her State of Education address, safety and support are a requisite for all Wisconsin kids, including our LGBTQ+ kids, because they are key to well-being and student success.

Department of Health Services

Following Governor Evers’ declaration that 2023 is the Year of Mental Health, the Department of Health Services (DHS) renewed its commitment to improving the health and well-being of Wisconsin children and all Wisconsinites. DHS launched a year-long multimedia campaign to ensure all state residents know about the 988 Suicide & Crisis Lifeline, which received 91,834 contacts for support in the first year of operation. DHS also released a new self-harm dashboard. Spotlighting non-fatal instances resulting in an emergency services visit or hospitalization, the dashboard provides insight that will focus suicide prevention, harm reduction, and mental health efforts.

Knowing that stable housing is a crucial factor in health, DHS launched the Children’s Health Insurance Program Housing Support Initiative, connecting families with supportive housing services. As the first state to implement this type of housing benefit with CHIP funds, Wisconsin is actively working toward every family in the state securing a safe and stable home.

Department of Corrections

Since Gov. Evers took office in 2019, the Department of Corrections (DOC) has worked tirelessly to move forward transformative justice for youth served in the deepest end of the system. Implementing Dialectical Behavioral Therapy (DBT) as a system of care approach for youth served in the juvenile corrections system has been central to the transformation. Over the course of 2023, DBT has taken root in the juvenile corrections system. With this treatment-based approach in place, long gone are the days of old-school power and control tactics. Staff and youth now engage in practicing DBT skills to reduce risk and enhance pro-social engagement with others.
REFERENCES

Take a closer look at the data and research used in this report.

Learn more about youth mental health data and the child well-being dashboard at: children.wi.gov/Pages/ResearchData/Indicators.aspx.


CONNECTIONS ARE THE DESTINATION

We’re moving forward together.

In 2024, OCMH will convene discussions around 5 key points of connection to inspire local communities to take action on the Social Connectedness of Youth.

- Families talk about things that matter.
- All youth have a supportive adult besides their parent.
- Youth have the skills to make and keep friends.
- Youth feel they belong at their school.
- Youth participate in extracurricular activities.

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