















CHILD WELL-BEING INDICATORS DASHBOARD

THE FOLLOWING INDICATORS PROVIDE INSIGHT INTO THE WELL-BEING OF WISCONSIN'S YOUTH FROM MULTIPLE DOMAINS.

- Each stoplight indicates whether the current Wisconsin data is an improvement or not, when compared to the baseline data, and color is based on statistical significance, when available in source data.
- The most recent available data at the time of print are used for "current" statistics. Data from approximately five years prior are used for "baseline" statistics.
- For data details, please see the indicator description document at <https://children.wi.gov/Pages/ResearchData/Indicators.aspx>.

-  Wisconsin is going in the wrong direction.
-  Wisconsin seems to be headed in the wrong direction.
-  This indicator did not meaningfully change.
-  Wisconsin seems to be headed in the right direction.
-  Wisconsin is going in the right direction.

QUALITY OF LIFE

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT	
Children who have emotional, behavioral, or developmental conditions	25%	25%	25%	
High school students with anxiety	NA	49%	52%	
High school students feeling sad or hopeless	40%	29%	35%	
Teens seriously considering suicide	20%	16%	19%	
Suicide attempts	10%	7%	9%	
LGBT youth seriously considering suicide	41%	42%	40%	
Youth experiencing a major depressive episode (ages 12-17)	20%	15%	19%	
Young adults experiencing any mental illness (ages 18-25)	35%	28%	40%	
Two or more ACEs (Adverse Childhood Experiences)	18%	18%	17%	

Rates of anxiety and depression continue to rise, especially among teen girls.

Teens seriously considering suicide has increased again, particularly among girls and white students.

There has been a substantial increase in the rate of young adults who have a mental illness.

SOCIAL & ECONOMIC FACTORS

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT	
Low income youth	36%	34%	32%	
Severe Housing Problems	17%	15%	13%	
School connectedness	N/A	61%	54%	
School suspensions	3%	4%	1%	
Trusted adult at high school	N/A	72%	70%	
Difficulty with friendships (social skills)	24%	29%	24%	
High school graduation	87%	90%	91%	
Employment (ages 16-24)	55%	62%	68%	
Ages 25+ with bachelor's degree	36%	31%	34%	
Parents who often attend child's activities	79%	91%	85%	
Family communicates very well	62%	59%	64%	
Foster care placements per 1,000 children	2.6	4.2	2.9	
Four-year-old kindergarten enrollment	35%	72%	63%	
Mothers with higher education degrees	45%	47%	50%	

Child poverty 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).

Kids who feel they belong at their school have better attendance, academic success, and mental health.

Having at least one supportive adult to talk to about a problem is crucial to youth wellness. Rates of trusted adults at school are much lower for students of color.

Kids' interactions with their peers have long-lasting effects well into adulthood. Healthy relationship skills, emotional literacy and positive social skills can be taught. Investments in teaching life skills pay off by helping protect youth mental health and by improving educational and economic outcomes.

Foster care placements continue to decline in WI and across the US thanks to family preservation efforts, including home visiting and kinship care, among states and tribal nations.

Preschool has a particularly positive impact on children's well-being. Emotional regulation and coping skills are most helpful when established early in life during the vast majority of brain development.

CLINICAL CARE

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT	
Early prenatal care (first trimester)	75%	80%	82%	✓
Children with mental conditions who did not receive treatment (ages 3-17)	48%	35%	49%	?
Doctors who did not ask about parental concerns with learning, development, or behavioral problems (ages 0-5)	69%	66%	68%	?
Early developmental screen conducted	34%	38%	39%	↕
School Nurses	66%	74%	75%	...
Psychiatrists (statewide count)	NA	360	450	↕
School Social Workers (statewide count)	NA	673	802	↕
School Counselors (statewide count)	NA	2122	2248	↕
School Psychologists (statewide count)	NA	957	1055	↕

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

90% of brain development occurs between ages 0-5, and the majority of this growth is during the infant and toddler years. Experts advise that mental and behavioral health care be embedded early into routine pediatric care.

Wisconsin requires every school to have a school nurse. Most are part-time. Though the counts are slowly increasing, 25% of districts have no school nurse at all.

Though the number of school-based mental health professionals is increasing, totals are far below recommended levels, and their services are not reimbursed at sustainable rates. Fixing school mental health reimbursement rates is key to addressing Wisconsin's youth mental health crisis.

HEALTH BEHAVIORS

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT	
Participation in activities (ages 6-17)	70%	81%	77%	?
Electronically bullied (cyberbullying)	16%	17%	18%	...
Bullied on school property	19%	22%	22%	...
Students who use electronics 3+ hours on average school days (not for schoolwork)	N/A	75%	79%	✗
Students who sleep 8 hours on average school night	23%	27%	26%	✗
Teen birth rate per 1,000	13.6	13	9.8	✓
Students who vape frequently (20 or more days in the month prior)	5%	9%	7%	↕
Students who drink alcohol (at least one drink, at least one day in prior month)	22%	30%	26%	✓
Students who experienced sexual dating violence	10%	13%	13%	...

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

Excessive screen time, associated with mental health concerns, continues to increase.

Kids who sleep at least 8 hours a night have better mental health. Experts advise that phones be kept out of kids' bedrooms and that teen classes begin 8:30 am or later.