

10-YEAR FOCUS

ON CHILDREN'S MENTAL
HEALTH IN WISCONSIN



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The Wisconsin Office of Children's Mental Health (OCMH) celebrated its 10th Anniversary in 2024. This special Annual Report celebrates the past 10 years, reflects on 2024 work, and looks forward.



Vision

Wisconsin's children are safe, nurtured, and supported to achieve their optimal mental health and wellbeing. Systems are family-friendly, easy to navigate, equitable, and inclusive of all people.

Values

- Collaborative across systems
- Data driven
- · Family and youth guided
- Promote inclusivity and equity among all stakeholders

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EXECUTIVE SUMMARY

The 10-year anniversary of the Office of Children's Mental Health inspired us to reflect on youth mental health and OCMH's role in supporting the wellbeing of Wisconsin's children over the past decade.

As we did so, we heard from many long-term partners how OCMH's statewide leadership on **trauma-informed care** and our many trainings on incorporating trauma-informed care into therapeutic practice led to **systemic change**. OCMH has also been a steadfast leader in prioritizing the **lived experience** of parents and youth over the last 10 years. Featuring lived experts in our work, supporting their full partnership at our tables, and coaching other organizations on prioritizing the voice of lived experience in their work has been at the forefront of OCMH's efforts.

More recently we have been building awareness of the importance of **brain health** and how the **social connectedness of youth** contributes to mental health and children's well-being. We have also made a practice of highlighting successes throughout the state, showcasing local solutions, and **sharing recommendations** for how we can all work to improve youth mental health in Wisconsin.

OCMH consistently elevates **children's mental health data** and continues to call attention to the undeniably disturbing increase in youth anxiety, depression, lack of belonging, and suicidality to establish a statewide understanding of the problem.

Mental health problems now affect the majority of teens in our state. The scope of the problem demands **collective action**. We emphasize collective action because we know it will take everyone – from policymakers to pediatricians and parents – to effectively improve children's mental health.

Our work and this report magnifies both problems and solutions. As you peruse the report, examine the current data and long-term trends, but also be sure to pause on the accomplishments and the emerging solutions that offer so much promise for Wisconsin's youth.



Linda A. Hall, Director Wisconsin Office of Children's Mental Health Dedicated Focus on Children's Mental Health in Wisconsin since 2014

LOOKING BACK

OCMH WORK OVER THE YEARS

The Wisconsin Office of Children's Mental Health (OCMH) was created as part of the passage of 2013 Wisconsin Act 20 and began work in early 2014. Since then, much has been accomplished.



Trauma-Informed Care workshops featured experts in the field.



OCMH 2018 Lived Experience Partners.



Trauma-informed care (TIC) was an early focus for OCMH. With a dedicated TIC team and staff expertise, accomplishments included:

- · Six TIC workshops held across the state.
- Six TIC training videos available on the OCMH website with over 5,000 views.
- · Guidance on being a trauma-informed organization.



OCMH started a culture shift of integrating lived experience by inviting lived experts to the same tables where state and system leaders work on children's mental health.

- Over 70 parents, caregivers, and young people have shared their perspective as OCMH Lived Experience Partners (LEP).
- Over 36 OCMH Lived Experience Academy trainings have built the capacity of lived experts.
- Other agencies and organizations have been encouraged to integrate lived experience.
- A dozen resources have been created with lived experts.
- LEPs have presented 55 trainings, educating audiences on lived experience and youth well-being.



Impact

OCMH served as the backbone to children's mental health collective impact work.

- Advancing a common agenda, hundreds of people have participated on two councils and eight collective impact teams.
- Reaching some 4,000 subscribers, OCMH newsletters provide continuous communication and keep our network connected and informed.
- OCMH has partnered with many other agencies and organizations on grants, research projects, and reports including the Infant and Early Childhood Mental Health Consultation initiative with the Department of Children and Families and Wisconsin Alliance of Infant Mental Health in 2024.



Recognizing the vital role schools play in youth mental health, OCMH:

- Partnered with the Department of Public Instruction to create Mental Health Units of Instruction for K4 through high school which were downloaded by 1,700 Wisconsin schools and educational leaders in 44 other states and 15 countries.
- Published a <u>fact sheet</u> on universal mental health screening in schools along with a Step-by-Step Screening guide <u>playbook</u>.
- Held the <u>Mental Wellness Student Leadership Summit</u> which attracted nearly 400 high school students and staff advisors.
- <u>Mapped</u> over 300 peer-to-peer school-based mental wellness initiatives in Wisconsin.



OCMH's work has been grounded in data. OCMH has:

- Published <u>48 Fact Sheets</u>, each raising up key youth mental health topics and recommended actions.
- Tracked key youth mental health data through the <u>Wisconsin Child</u> <u>Well-Being Indicators Dashboard</u> and the <u>Key Facts</u> in Youth Mental Health.
- Raised media awareness of key data points. OCMH has increasingly been called on by the media for youth mental health data and perspective.
- Testified at legislative hearings on mental health and substance abuse and responded to legislator requests for information and data on youth mental health.



OCMH resources help people learn and connect including:

- Feelings Thermometer a tool, translated into 11 languages, helps identify feelings, name an emotion, and take action to manage feelings. Over 20,000 magnets were distributed during COVID and there have been 80,000 online views.
- Mental Health Crisis Card a wallet-sized card to share calming strategies for an individual in a mental health crisis who is unable to verbalize what would help.
- Accessing Children's Mental Health Services a roadmap for getting children started with mental health services.
- Handling a Mental Health Crisis advice and resources for caregivers in supporting their child experiencing a mental health crisis.
- Infographics sharing youth thoughts on mental health.
- Five social media platforms promoting youth mental health on Facebook, LinkedIn, X, YouTube, and Instagram.



Social Connectedness of Youth has been **OCMH's strategic focus** since **2022**. OCMH:

- Established four collective impact teams in which 120 people participated. Each team developed an action plan to advance aspects of social connectedness.
- Held five convenings on Social Connectedness of Youth attracting over 300 people.
- Ignited a conversation across the state on the importance of youth being socially connected and changed the way people think and work.
- Held eight youth listening sessions (since 2020), additional listening sessions with mental health clinicians, and community conversations throughout the state. All created opportunities for participants to connect on shared experiences.
- Partnered with ArtWorks for Milwaukee teen interns to create two youth-designed campaigns uplifting the value of social connections and mental wellness.



OCMH provides a wealth of children's mental health and wellness resources, including mental health curriculum, data-focused infographics and Fact Sheets, mental health tools, and social media postings.

LOOKING DEEPER

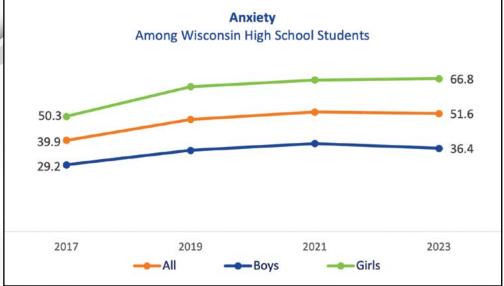
► INCREASING CONCERNS

Examining **trends over time** is an important part of understanding the youth mental health crisis. When available, we present Wisconsin's **10-year trend data**.

The following data (pages 6-11) are from the Youth Risk Behavior Survey (YRBS), a long-running biennial survey given to high school students. Learn more at dpi.wi.gov/sspw/yrbs.

Anxiety 29% increase in Wisconsin

Anxiety has substantially increased among Wisconsin youth, particularly for girls. By 2023, two-thirds of female high school students reported having problems with anxiety — an increase of 29% in recent years.



WHAT HELPS ► Coping Skills



OCMH asked youth what they did to manage anxiety, stress, sadness, and loneliness. We then created a series of coping skills resources, which were shared on social media and are available on the OCMH website.





Consistently feeling sad and hopeless for extended periods of time is a marker of depression. Nearly half of girls now feel this way, doubling the rate of boys who report feeling sad and hopeless. Overall, kids feeling depressed has increased 42% in 10 years.



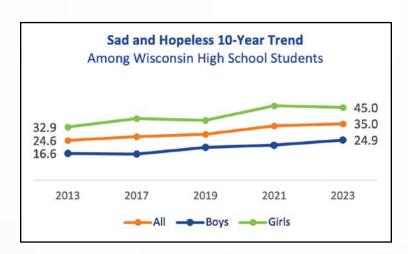
Sometimes, in an effort to diminish emotional pain, people

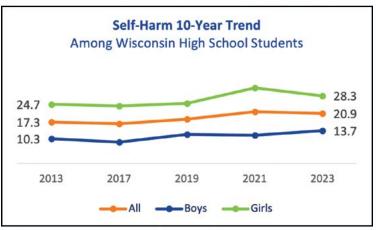


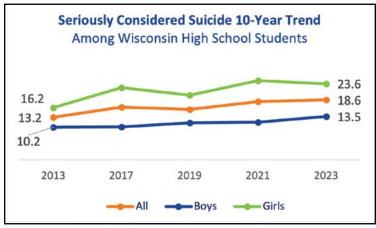
increase

in Wisconsin

The percent of students who seriously considered suicide also increased over the last 10 years. Nearly one in four girls reported they had seriously considered suicide in the last year.







WHAT HELPS ► Screening



Suicide

Screening kids for anxiety and depression helps with early identification - before problems escalate into a crisis – and can be embedded into clinical settings and school settings. Screening processes can also encourage students to employ healthy coping skills and connect to resources.

For more on Universal Screening, see OCMH's School Based Wellness Screening Playbook and Fact Sheet on Universal Screening.

LOOKING DEEPER

▶ DECREASING PROTECTION

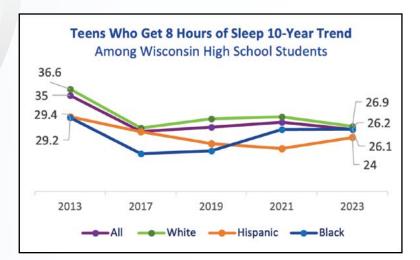
Examining outcomes by race is critical to understanding the depths and contours of the youth mental health crisis. When available, we present data by race for Wisconsin youth.*

SUFFICIENT SLEEP

In the last 10 years, the rate of teens who get sufficient sleep has dropped by 250/0

Sleep is a critical component of mental health.

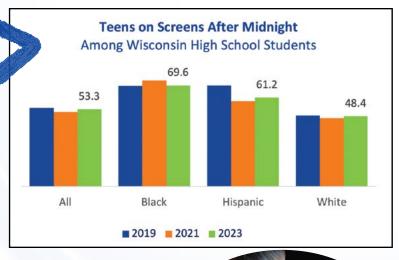
Developmental experts are clear – adolescents need at least eight hours of sleep a night. Currently, only a quarter (26%) of Wisconsin teens get sufficient sleep. Further, one in five students reported getting five or fewer hours of sleep per night.



LATE NIGHT SCREENS ◀

53% of teens are on screens after midnight.

Most teens, especially kids of color, report being on a screen after midnight. Physicians, scientists, developmental experts, and mental health providers urge families to keep all screens out of bedrooms at night and to end all screen use one hour before bedtime as screens disrupt the brain's ability to rest and repair.



WHAT HELPS ► Family Media Plans



Establishing basic tech rules and creating a <u>Family Media Plan</u> can help establish healthy digital habits. These in turn can aid learning, improve memory, and foster mental well-being. OCMH has <u>evidence-based tips</u> that can help.

* Survey data may not include sufficient data points to report representative results for all the racial groups in the state. Many Native American youth identify as multi-racial.

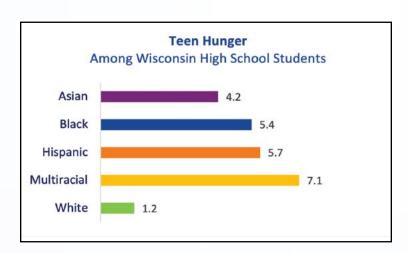
HUNGER

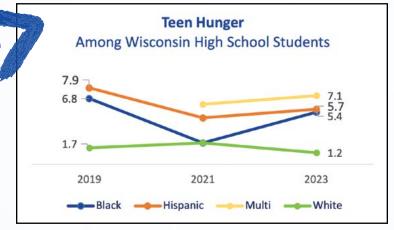
Food insecurity is linked to mental health problems. In the 2023 YRBS, 30% of students who were food insecure seriously considered suicide. Wisconsin kids of color are far more likely to report hunger and lack of food at home than are white children.

30% Among teens who were hungry, 30% seriously considered suicide.

When hunger and food insecurity were addressed during the pandemic, the hunger gap between Black and white children was eliminated.

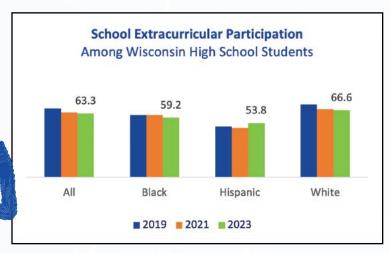
Black kids are nearly five times as likely to be hungry as white kids





EXTRACURRICULARS

Participating in an activity at school or in the community is linked with better mental health and social connectedness. Teens, as well as parents in other surveys, are reporting lower levels of extracurricular participation in the last five years.



WHAT HELPS ► Social Connections



Activities that connect kids to other kids as well as supportive adults, especially when they are in-person connections, can improve children's mental health. Activities that infuse movement, cultural practices, or outdoor components can be particularly effective at increasing kids' health and well-being.



children.wi.gov

LOOKING DEEPER

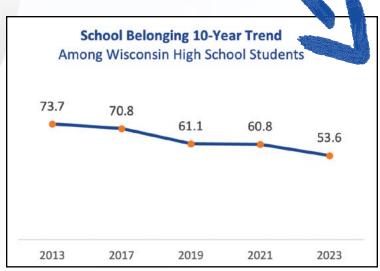
▶ PROTECTIVE RELATIONSHIPS

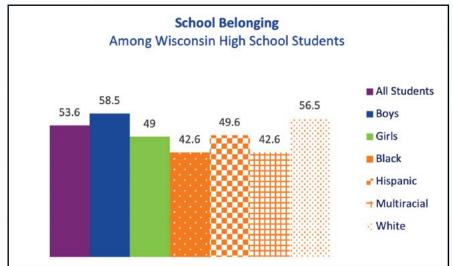
Examining **relationship trends** also contributes important information on youth mental health – and critically points to **how adults can help**. When available, we present Wisconsin's 10-year trend data and disaggregated data.

BELONGING

A sense of belonging is consistently linked with better mental health. In order to thrive, children need to feel like they belong in their families, in their schools, and in their communities. Connectedness at school has steadily fallen over the last 10 years. Currently, about half of high school students feel they belong at their school.

In the last 10 years there has been a 37% drop in kids feeling like they belong at their school.





Students of color and girls feel lower levels of belonging while LGB students report the least amount of belonging.

WHAT HELPS ► School Culture



A welcoming and positive school culture with trusted adults and strong student-teacher relationships is key. When kids feel connected to others at school, when kids are taught life skills and mental health literacy, and when schools ensure both psychological and physical safety, then belonging can flourish.



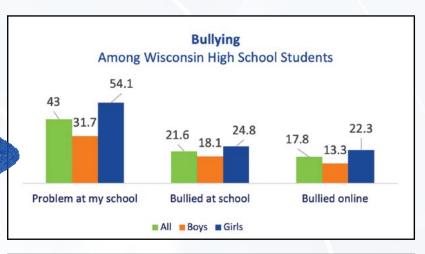
BULLYING

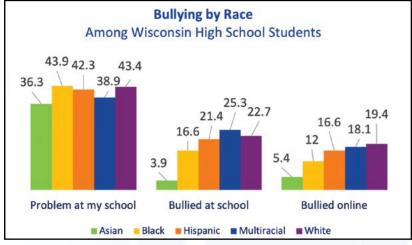
One in four high school students (27%) reported being bullied — online or at school — in the last year. More than half (54%) of girls agree bullying is a problem at their school, and nearly a third (32%) of boys think the same.

1 in 4

Students have been bullied, either electronically or on school property.

White students are most likely to report being bullied online while multiracial students report the highest rate of bullying on school property. Black students are most likely to say that bullying is a problem at their school.

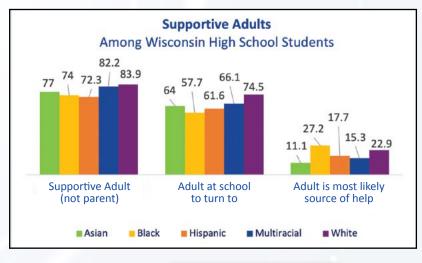




TRUSTED ADULTS

Most students have a supportive adult (besides their parent) in their life. Having trusted adults who can listen to youth when they are stressed is highly valuable. These trusted adults can be found at school for many but not all Wisconsin youth.

Black students are least likely to have a supportive adult at school – but they are most likely to say an adult would be their source of emotional help.



WHAT HELPS ► Tiplines



Confidential student reporting – see something say something programs – allow peers to report bullying. Wisconsin's tipline Speak Up Speak Out (SUSO) is available 24/7 for any community member to flag bullying or school safety concerns. SUSO staff also provide a wide array of trainings.



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 on OCMH's website.
 - 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.

OUALITY OF LIFE

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT		
Children who have emotional, behavioral, or developmental conditions	25%	25%	25%	0	
High school students with anxiety	NA	49%	52%	×	Rates of anxiety and depression continue to rise, especially
High school students feeling sad or hopeless	40%	29%	35%	×	among teen girls.
Teens seriously considering suicide	20%	16%	19%	×-	Teens seriously considering suicide has increased again,
Suicide attempts	10%	7%	9%	×	particularly among girls and white students.
LGBT youth seriously considering suicide	41%	42%	40%		
Youth experiencing a major depressive episode (ages 12-17)	20%	15%	19%	2	There has been a substantial
Young adults experiencing any mental illness (ages 18-25)	35%	28%	40%	<u>×</u>	increase in the rate of young adults who have a mental illness.
Two or more ACEs (Adverse Childhood Experiences)	18%	18%	17%	0	

SOCIAL & ECONOMIC FACTORS

INDICATOR	US CURRENT	WI BASELINE	WI CURRENT	Child poverty declined due to
Low income youth	36%	34%	32%	policies such as the Earned Income Tax Credit, and further
Severe Housing Problems	179/o	15%	13º/o	reduced during pandemic-ex- panded relief programs like the Child Tax Credit (CTC).
School connectedness	N/A	61º/o	54%	Kids who feel they belong at their school have better attendance, academic success, and
School suspensions	3%	4%	1º/o	mental health. Having at least one supportive adult to talk to about a problem is
Trusted adult at high school	N/A	72%	70%	crucial to youth wellness. Rates of trusted adults at school are much lower for students of color.
Difficulty with friendships (social skills)	24%	29%	24%	Kids' interactions with their peers have long-lasting effects
High school graduation	87%	90%	91%o	well into adulthood. Healthy relationship skills, emotional literacy
Employment (ages 16-24)	55º/o	62%	68%	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
Ages 25+ with bachelor's degree	36%	31%	34%	economic outcomes.
Parents who often attend child's activities	79%	91%	85º/o	Foster care placements continue to decline in WI and across the US thanks to family preser-
Family communicates very well	62%	59%	64%	vation efforts, including home visiting and kinship care, among
Foster care placements per 1,000 children	2.6	4.2	2.9	Preschool has a particularly positive impact on children's
Four-year-old kindergarten enrollment	35%	72%	63%	well-being. Emotional regula- tion and coping skills are most helpful when established early
Mothers with higher education degrees	45%	47%	50%	in life during the vast majority of brain development.

CLINICAL CARE

P/o 80%	82%	
		U /
P/o 35%	49%	2
P/o 66%	68%	2
26/0	39%	
P/o 74%	75%	0-
NA 360	450	
NA 673	802	
NA 2122	2248	
NA 957	1055	
	P/o 66% P/o 38% P/o 74% NA 360 NA 673 NA 2122	P/o 66% 68% P/o 38% 39% P/o 74% 75% NA 360 450 NA 673 802 NA 2122 2248

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 schoolbased 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		Kids who participate in extra-
Participation in activities (ages 6-17)	70%	81º/o	77%	2	curricular activities are less likely to report depression and
Electronically bullied (cyberbullying)	16%	17%	18%	0	anxiety and more likely to feel they belong.
Bullied on school property	19%	22%	22%	0	
Students who use electronics 3+ hours on average school days (not for schoolwork)	N/A	75%	79%	×	ed with mental health concerns, continues to increase.
Students who sleep 8 hours on average school night	23%	27%	26%	×	Kids who sleep at least 8 hours a night have better mental
Teen birth rate per 1,000	13.6	13	9.8	\odot	health. Experts advise that phones be kept out of kids' bed-
Students who vape frequently (20 or more days in the month prior)	5%	9º/o	7%	2	rooms and that teen classes begin 8:30 am or later.
Students who drink alcohol (at least one drink, at least one day in prior month)	22%	30%	26%	O	
Students who experienced sexual dating violen	ce 10%	13%	13%	0	

LIVED EXPERIENCE

Lived Experience has been foundational for OCMH since Day One. Here we share key lived experience accomplishments from 2024.

"I loved this experience –
it has been so nice to be able to
freely network and reconnect
with others from each of the
groups. I feel wonderful and
confident with the information
I am taking home."

LIVED EXPERIENCE PARTICIPANT

Mental Wellness Student Leadership Summit

In April, OCMH welcomed to Madison 300 students from 44 Wisconsin high schools for the first ever Mental Wellness Student Leadership Summit. Students leading peer-to-peer wellness programs joined their adult advisors to build relationships and exchange ideas for their school-based wellness initiatives.

Opportunities to connect and exchange ideas permeated the day. Intentional small group conversations focused on topics such as fundraising, program activities, and mental health policy. A training on how to support a friend with suicidal thoughts was the highlight of the day, and attendees reported they learned the importance of non-judgmental conversations.

"This event was so awesome and eye-opening. I had the best time!!" > STUDENT PARTICIPANT

Lived Experience Academy Summit

OCMH's Lived Experience Academy offers a variety of learning experiences and connection opportunities to intentionally develop leadership skills and relationships among parents and youth in Wisconsin.

The second annual Lived Experience Academy Summit, held in May, was co-created by lived experts and featured experiential learning opportunities on topics such as Mental Health Data and Research, Preventing Caregiver Burnout, Embracing Harm Reduction, and Policy and Advocacy.

A two-day, in-person intensive convening, the summit featured six workshops and activities including collaboratively building a marshmallow structure to foster teamwork and a group art activity inviting participants to move beyond hardships of their past.







Above: Lived Experience Academy Summit. Below: First Lady Mrs. Evers and OCMH Director Linda Hall greeted each school and welcomed the nearly 400 people participating in the Student Leadership Summit.







0CMH 2024

WORK AND KEY ACCOMPLISHMENTS

Improving the well-being of Wisconsin's young people is what drives our work at OCMH.



Social Connectedness



Social Connectedness of Youth Convenings • OCMH held a series of five convenings exploring different aspects of Social Connectedness of Youth: Cultural Identity/Community, Family, Peer, School/Early Education, and Supportive Adult. These convenings brought over 300 people together from across the state to share best practices and inspire action.

Lived Experience



<u>Lived Experience Academy Summit</u> • A second Lived Experience Academy Summit gathered 44 parents, caregivers, and youth leaders from the Department of Children and Families and OCMH to learn, connect, and grow.

Mental Wellness Student Leadership Summit • OCMH brought together in person over 300 students from 44 high schools across Wisconsin to learn how to support their friends. Attendees represented school-based peerto-peer wellness programs.

Infographics Share Youth Mental Health Strategies and Advice • OCMH asked youth what their mental health coping strategies were, what advice they have for other youth about mental health, and what they wanted adults to know about their mental health. These insights were shared in three new infographics posted on our website. The "What Youth want Adults to Know about Youth Mental Health" infographic has gotten 4,800 views.

Youth Supportive Adult Listening Sessions • OCMH and Young Adult Lived Experience Partners invited young people ages 13-24 to share their thoughts on how adults can be supportive to youth. What they said was turned into a 31-minute training wideo and infographic by youth for adults who interact with youth.

Data



Fact Sheets • OCMH produced four Fact Sheets on critical mental health topics: Infant and Toddler Mental Health, Supporting Kids with Disabilities, School Shootings, and School Nurses.

Key Facts • This new data snapshot shows the key mental health challenges Wisconsin youth are facing – anxiety, depression, self-harm, and suicidality – and highlights student groups with concerning disparities.

Media Resource • OCMH is routinely called upon by the media as a resource for youth mental health information. OCMH Director Linda Hall was quoted in numerous news articles and interviewed by many news outlets across the state. OCMH shared eight media advisories and multiple media availabilities for reporters to share critical information on youth mental health.

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Schools

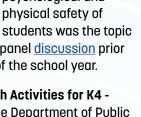


School Safety Discussion • The psychological and physical safety of

of an expert panel discussion prior to the start of the school year.

Mental Health Activities for K4 -Grade 2 • The Department of Public Instruction and OCMH produced Activities for Building Mental Health Literacy for K4-K5 and Grades 1-2. These classroom activities encourage early learners to practice skills to build their

mental wellness and ability to ask for help.



Activities for Mental Wellness



Collective Impact

Showcasing Solutions • OCMH is committed to sharing great things happening in children's mental health across Wisconsin. In this year's Showcasing Solutions series, OCMH shared 11 inspirational stories.

Children's Mental Health Week • May 5-11, 2024 was Children's Mental Health Week. The theme was "Listen and Connect with Youth," and the OCMH toolkit helping individuals and organizations celebrate the week and take action on children's mental health got 3,800 views.

Early Childhood Feelings Thermometer • OCMH created the <u>Early Childhood</u> Feelings Thermometer, a visual aid for child care providers, early childhood educators, and families to use with young children (ages 0 to 5) to help them begin naming emotions and calm challenging behaviors. It was distributed to child care providers throughout the state.

> Child Care Provider Discussions • Collaborating with the Department of Children and Families, OCMH held listening session discussions with child care providers in Wisconsin to learn about their daily challenges, including mental health.

What To Do While You Wait for Children's Mental Health Services • OCMH explored what families can do while they wait for mental health services for their children and compiled recommendations from doctors and mental health experts into a resource offering families tips for this critical time.

OCMH & STATE

COLLABORATIONS

Spotlighting Wisconsin State Departments' Children's Mental Health Accomplishments in 2024

DEPARTMENT OF CHILDREN AND FAMILIES

Strategic engagement with lived experience stakeholders continued in 2024 with the Department of Children and Families (DCF) working with OCMH to support agency-wide efforts to develop more aligned practices across all DCF programs to authentically engage lived experts as advisory partners in shaping DCF policies and programs. DCF partnered with OCMH to develop and host the 2024 Lived Experience Academy.



DCF continues to support the Leadership Council on the Early Years (LCEY) led by DCF Secretary Jeff Pertl. LCEY convenes cabinet level agencies, OCMH, and the Child Abuse and Neglect Prevention Board to make strategic connections across multiple state agencies using a birth to five lens focused on improving outcomes for families with young children. OCMH presented "Supporting Child-Well-Being through Housing Stability" at the LCEY which led cabinet agencies to surface ideas for how to better connect and improve critical services that support stable housing for families.



DEPARTMENT OF HEALTH SERVICES

Following Governor Evers' establishment of the Interagency Council on Mental Health, the Department of Health Services (DHS) is bringing together state agencies to focus on reducing barriers and addressing gaps in mental health services across Wisconsin. The Council will create a statewide action plan to expand access to mental health and substance use disorder services, increase prevention efforts, reduce stigma, and build capacity among caregivers, providers, and community partners to address the mental health crisis.

DHS completed the first phase of the Mendota Juvenile Treatment Center (MJTC) expansion project, which offers state-of-the-art spaces for education, medical, and therapeutic services. The expansion provides space to treat additional boys and, for the first time in early 2025, girls. MJTC provides mental health treatment to justice-involved youth in Wisconsin.



DEPARTMENT OF CORRECTIONS

All areas of the Department of Corrections' Division of Juvenile Corrections (DJC) continue to move towards a treatment-based model of care, focusing on the mental health of youth, and using a foundation of treatment to teach youth new skills and hold them accountable.

DJC Field staff continue to do risk-based assessments to address youth needs in a trauma informed manner while working with community providers to provide treatment and support.

Copper Lake/Lincoln Hills Schools continue to work on full integration of Dialectical Behavioral Therapy (DBT) throughout the facilities. Youth are engaged in twice weekly DBT skills training groups and now have weekly individual sessions with their clinicians using the DBT model. Youth are monitoring their behaviors and setting goals for themselves through the use of Diary Cards. Many different staff from multiple disciplines are working with youth on their Diary Cards and discussing behavior goals. Over the past year the Grow Academy has been working to implement DBT as well, training staff and engaging youth in weekly DBT skills groups.



DEPARTMENT OF PUBLIC INSTRUCTION

The Wisconsin Department of Public Instruction (DPI) continues to expand its support of building Comprehensive School Mental Health Systems (CSMHS) in school districts across the state. The DPI is prioritizing federal grant funding through the 2023-28 Project AWARE to build capacity of regional partners to support school mental health in every region of the state and to increase access to high quality mental health services, regardless of zip code. The DPI has also expanded support for universal mental health promotion, such as suicide prevention and building mental health literacy. New, free resources are available on the DPI's website, including Suicide Prevention Training Modules, Suicide Prevention Curriculum, the 2024 Annual Model Notice, and the Roadmap for School Mental Health Improvement. The DPI and the OCMH recently released new Mental Health Literacy Activities for K4-2nd grade, expanding previous offerings for grades 3-12, to ensure that Wisconsin's youngest learners are developing the life skills that ensure student well-being.



What's Ahead for OCMH

Youth tell us the main stressors impacting their mental health include academic pressures and achievement culture amidst economic uncertainty, widespread gun violence, political divisiveness, and discrimination playing out in communities and schools and magnified online. These challenges, as well as concerns over climate change, were not faced in childhood by previous generations.

Adults working with youth tell us that essential relationship skills lost during the pandemic, often compounded by unhealthy tech habits, prevent the building of healthy friendships with peers. Lost relationship skills also impede trusting relationships with teachers which affects learning. All of these factors contribute to youth disengaging from school, low levels of belonging, and poor mental health.

While our magnifying glass applied to the children's mental health data clearly identifies these disturbing trends, it also brings into focus solutions. Looking forward, OCMH plans to double down on what works — activities that promote belonging in school and community, youth-led peer-to-peer mental health programs, and youth voice in building responses to this mental health crisis. We will continue to highlight the actions and policies that contribute to child well-being, such as sustainable funding for school mental health, child tax credits, integrated mental health and medical care, and the interpersonal actions that individuals can take daily to help improve the lives of Wisconsin youth.

Continued attention to, and investment in, these practices and policies will allow us to leave behind the youth mental health crisis so painfully in place now and chart a new course for our youth to thrive and move into adulthood healthy with lives full of promise.



WE DON'T DO THIS IMPORTANT WORK ALONE. OVER THE PAST 10 YEARS, WE HAVE BEEN...

- · humbled by the people who have shown up to work alongside us,
- honored to participate in important conversations,
- · gratified at the deep concern people in Wisconsin have for children's well-being,
- amazed at the willingness of people to say yes to hard work,
- · inspired by the stories our lived experts share,
- · compelled to challenge systems, and
- · continually motivated to do more!



