



of Wisconsin Disability Organizations

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MENTAL HEALTH

STATEMENT

Mental illnesses are treatable and people do recover, even from serious mental disorders. But untreated mental illnesses result in serious repercussions for individuals, families and society as a whole. In Wisconsin over 700 people die by suicide each year; studies suggest 60-90% of these individuals have a mental illness. Children with serious emotional disturbances are less likely to graduate from high school than youth with other disabilities. 30% of individuals in prisons and upwards of 60% of those in county jails have mental disorders. Over 50% of individuals in the long-term care system have mental illnesses in addition to other disabilities and the costs associated with the care of these individuals is much higher. Mental illness causes more days of work loss and work impairment than many other chronic conditions such as diabetes, asthma, and arthritis. And when mental illness co-occurs with these other chronic health conditions it significantly increases the morbidity and mortality associated with these conditions. Wisconsin needs to continue to develop its community-based, recovery-oriented, trauma-informed system of care and integrate mental health treatment with substance use and primary care interventions to ensure earliest identification and intervention.

BACKGROUND

The 2013-2015 legislative session saw unprecedented activity in support of the expansion of mental health services and supports in Wisconsin. Both the Governor's budget and the recommendations from the Speaker's Task Force on Mental Health provided new funding for community-based services and supports for adults and children with mental disorders; together about \$22 million were allocated. However, additional investments are needed to make sure that these initiatives can achieve their goals and that we are able to adequately evaluate their success. Wisconsin also should be expanding successful program models for reducing incarceration of individuals with mental illnesses and improving the reintegration back to the community of those who are incarcerated. In addition, the Legislature has yet to address the stigma and discrimination that often results in individuals failing to seek treatment and support.

RECOMMENDATIONS

Sustain important investments made in the 2013-2015 state budget.

- Strengthen the workforce of certified mental health peer specialists and parent peer specialists in order to both increase the employment of people with mental illness and

to improve our system of care for children and adults with mental and emotional disorders. Comprehensive Community Services and Coordinated Service Teams, both of which the Legislature expanded in the last biennium, rely on peer specialist providers.

- Increase support for the newly-created Office of Children's Mental Health. The initial budget for this Office funded basic staffing but did not include funds for the initiatives the Office will need to pursue to meet its mission.
- Extend Individualized Placement and Support (IPS) employment training services for individuals with mental illness beyond the single year provided in the last budget.

Improve the criminal justice system's response to individuals with mental illnesses.

- Expand Opening Avenues to Reentry Success (OARS) to additional regions of the state. OARS has been an effective means of reintegrating inmates with mental illness back into the community and reducing recidivism.
- Expand the Disabled Offender Economic Support (DOES) program to ensure that inmates with mental health needs obtain prompt access to health services upon release.
- Revise eligibility criteria for the Treatment Alternatives and Diversion Program (TAD) to allow it to serve individuals with a mental illness in the absence of a co-occurring substance use disorder.
- Expand programming to support parents for youth re-entry, utilizing parent peer specialists to work with families of incarcerated youth to prepare and support them in reintegrating their children into their homes and communities.

Reduce the stigma associated with mental illnesses through evidence-based practices and reduce discrimination against individuals living with mental disorders and their families.

- Fund evidence-based programs that reduce stigma, as recommended by the Speaker's Task Force on Mental Health but not yet enacted by the legislature.
- Reduce disparate treatment of parents of children with serious emotional disorders by eliminating the requirement that they pay child support for out of home treatment.

Improve services for children with serious emotional disorders and their families.

- Increase opportunities for paid in-home respite for families who have a child with a serious emotional disorder.
- Limit the use of seclusion and restraint in all child-serving agencies.

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