

SURVIVAL COALITION - MENTAL HEALTH BUDGET PRIORITIES

STATEMENT

Mental health is crucial to so much of life and ill health can result in serious repercussions for individuals, families and society as a whole. One in 5 Wisconsinites experience diagnosable symptoms in a year and more than 230,000 adults have a psychiatric disability, also called "serious mental illness."

- In Wisconsin over 700 people die by suicide each year – 60% of them had a depressed mood but only 52% of those who died had received mental health treatment at some point.
- Children with mental health conditions are less likely to graduate from high school than youth with other disabilities.
- These conditions tax criminal justice systems – 30% of men in prisons and upwards of 60% of those in county jails have diagnosable conditions.
- Over 50% of individuals in the long-term care system need services to address mental health or substance use conditions in addition to services for their other disabilities, with associated much higher care costs.
- Conditions cause more days of work loss and work impairment than many other chronic conditions such as diabetes, asthma, and arthritis.
- Mental Health conditions often co-occur with other chronic health conditions, resulting in more sickness and death.
- Adults living with psychiatric disability die on average 25 years earlier than other Americans.

However, people do recover – even from the most serious conditions – when treatment and services are available

BACKGROUND

The Governor and Legislature made significant investments in mental health in the 2013-2015 biennium. However, children and adults in Wisconsin still face many barriers to accessing community services and supports that promote recovery; far more work needs to be done to increase access and quality. It is a smart investment to fund a continuum of services including psycho social rehabilitation, housing, benefits counseling, and employment supports, because these help people maintain their independence and limit reliance on more costly and traumatizing crisis and inpatient services. This includes program models which support employment, peer-run respite services, reducing incarceration and improving the reintegration back to the community of adults and juveniles who are incarcerated. In addition, the Legislature has yet to significantly address the prejudice, discrimination and isolation that prevents recovery.

RECOMMENDATIONS

Community Services and Integration

- Enhance the effectiveness of the Individualized Placement and Support (IPS) employment training programs by funding technical assistance and support to the counties running these programs. Increase the responsiveness of IPS programs to the employment training needs of individuals moving to work under the Medical Assistance Purchase Program (MAPP).
- Promote community services by limiting the subsidy for a nursing home "Institution for Mental Disease" (IMD) for residents staying longer than 90 days and allow DHS to use funds from the appropriation under Wis. Stat. 20.435(5)(be) to pay for:
 - Individual evaluations, community readiness assessments and community service recommendations.
 - Reimbursements to counties for transition costs when discharging residents to more integrated setting in their home county.
- Fund two Housing First pilots; one in South East Wisconsin and one in a less populated area of the state to encourage capacity-building of affordable, accessible housing for low-income individuals, many of whom are people with mental illness.
- Create a state funded program to ensure access to mental health and substance use services in the language of Deaf Wisconsinites and which includes a statewide mental health coordinator, peer specialist program and clinical training and supervision.

Improve the Criminal Justice System's Response.

- Expand Opening Avenues to Reentry Success (OARS) to additional regions of the state. OARS has been an effective means of reintegrating inmates needing services back into the community and reducing recidivism.
- Revise eligibility criteria for the Treatment Alternatives and Diversion Program (TAD) to allow it to serve individuals with only a mental health condition.
- Fund a grant program to encourage counties to create programming specific to diverting youth from detention through the provision of intensive supports for youth with mental health issues that are adjudicated delinquent and would otherwise be placed in detention.

Reduce Prejudice and Discrimination Which Prevents Recovery

- Enact statutory language similar to that introduced in the last legislative session which allows the establishment of peer-run respites in neighborhoods. Peer Run Respites are a key part of Wisconsin's effort to improve community-based mental health services.
- Provide support to allow current suicide prevention efforts to continue, particularly efforts targeting high-risk populations. This would include funding for training and technical assistance to local coalitions, Zero Suicide quality improvement initiative, and the Hopeline texting pre-crisis service.

****Improve Services for Children**

- **Reduce disparate treatment of parents of children with serious emotional conditions by eliminating the requirement that they pay child support for out of home treatment.**
- **Increase opportunities for paid in-home respite for families who have a child with a serious emotional condition.**
- **Limit the use of seclusion and restraint in all child-serving agencies.**
- **Require the Department of Health Services, to the extent permitted by the federal Center for Medicaid Services, to allow a mental health professional who is providing mental health treatment and services to a child to receive reimbursement under Medicaid for consultation and collaboration with that child's school team in order to provide more effective, integrated treatment plan.**

