



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT



Southwestern Wisconsin Behavioral Health Partnership



Fall 2018

S.W. Wisconsin Behavioral Health Partnership

Who we are...

We are a community-based partnership taking action to:



1. Increase **acceptance** and reduce stigma
2. Increase **access** to support and services, through better connections.
3. Increase **availability**, by increasing our local capacity to provide services and be supportive.

The Southwestern Wisconsin Behavioral Health Partnership is an 8 year grant-funded project working on improving behavioral health in our five-county region of the state. Our funder is the Advancing a Healthier Wisconsin Endowment through the Medical College of Wisconsin, and we are one of ten projects throughout the state.

Our Fall Mental Health Summit—You're invited!

Tuesday October 23, 2018 at UW-Platteville | <https://www.eventbrite.com/e/sw-wi-fall-mental-health-summit-tickets-48482792337> - More about this on page 5.



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Farm and Rural Mental Health

Our partners including the Iowa County Suicide Prevention Coalition, UW-Extension, Farm Center, Farm Service Agency, and Center for Cooperatives have been meeting with SWCAP and UW Population Health Institute to talk about how to work on improving the situation faced by our rural communities and farmers.

Statewide, Wisconsin lost 500 dairy farms in 2017. Economics and farm finances, along with other factors like isolation and identity (who they are and their ties to their land, family history) are impacting farmers, their families and their communities. The stresses facing farmers and economic impacts are felt across our small rural communities.

The suicide rate of farmers is 5 times the national average and more than twice as high as veterans.

It is important that we all know about available resources:

- Suicide Prevention Coalition—<http://www.suicide-iowacountywi.org/> - Can provide QPR Suicide Prevention trainings, which can help all of us save a life!
- **National Suicide Hotline 1-800-273-8255 or TEXT 839863**
- **DATCP Farm Center Hotline 1-800-942-2474**—can provide assistance with farm business and other stressors

“...at 48 years old, I lost my barn to a fire – I was lost. The most depressing day of my life was when I went to a job fair, right after that barn burned. I thought, I ain’t got a prayer. But I did. I had more knowledge than I thought I had.”

- Focus group participant

Healthcare Provider Surveys

The SW WI Behavioral Health Partnership is working with healthcare providers in our area to find out what they feel they have as strengths, and where we can partner to increase capacity to provide psychiatric services in our rural communities.

Our researchers and evaluators at the UW Population Health Institute, Liz Feder and Robin Lecoanet, are collecting survey information from primary care providers, and will be working with interested healthcare providers to consider what will work best for them. In the meantime, we are beginning to link to some commonly desired consultation programs. Look for more information in the coming months!



Workplace Mental Health

Not long ago there was a stigma surrounding cancer diagnoses. As a kid, I remember the hushed tones of family members talking about a neighbor who had cancer. It was clear to me that this was not something intended to be publicly shared, that there was a sense of judgment toward, and a finality in the way they spoke about this person. I see a similarity today confronting people living with mental health conditions, who may be perceived as lazy, weak, or incompetent and who may face rejection, bullying, and discrimination.

People who are experiencing mental health problems, such as depression or anxiety, may have more days where they are absent, or when they are at work but less productive (presenteeism). They also may not disclose to colleagues or bosses at work because of legitimate fears of being treated differently or even laid off. In a typical workplace less than one third of people experiencing mental health problems access any kind of treatment, and this is often due to concerns around “letting on” to their employers that they are experiencing these problems. (National Alliance on Mental Illness)

The flip side is that when people are given the opportunity to live and work in places that are “stigma free”, that are more open and accepting, and that offer and encourage access to treatment and recovery, people are more likely to access treatment earlier and recover. The outcomes for employers include increased employee morale and productivity, improved job satisfaction and employee retention rates.

If you would like to learn more about becoming a stigma free workplace or other ideas and models for incorporating improved employee and workplace mental health at your business or organization, contact Liz Feder at elizebeth.feder@wisc.edu.





Socio-Economic Determinants: Food Insecurity and Mental Health

With this Newsletter, we introduce a new section, called “Social-Economic Determinants of Behavioral Health”. Food Insecurity will be our first topic – read to the end of this article to learn about food security screening in healthcare settings.

What is Food Insecurity? Food insecure individuals and households are worried about having enough food; may reduce the quality, variety, and nutritional value of foods they do have; eat less food or eat less often. Most of these people and households have at least one adult in the workforce, or are elderly or disabled.

Why does it matter? Food insecurity is linked to cognitive, socio-emotional and behavioral problems, including depression and anxiety – especially in children. It often causes other physical symptoms like being more prone to illness, underweight or overweight/obesity, anemia, stomachaches and headaches. People who experience these psychological and physical problems associated with food insecurity also have difficulty concentrating, and have lower academic achievement and employment issues. When we say there is a cycle of poverty, this is one way to think about it.

Often, doctors and nurses, teachers, and employers don’t put these things together – the symptoms of food insecurity may look like other illnesses or behavioral issues. You cannot tell who might be food insecure by their appearance, like clothing or hairstyle. One thing we are trying to address this problem is working with healthcare providers to implement food insecurity screening.

The HungerCare Coalition is a program of Second Harvest Foodbank of Southern Wisconsin dedicated to assisting families that are struggling with food insecurity. The Coalition is partnering with health care systems to help them screen their patients for food insecurity and connect families with needed resources. Inspired by successful projects led by food banks across the country, HungerCare encourages clinics and hospitals to use a 2-question food insecurity screen and provide food assistance resources that will ensure that at-risk families are able to access the food that they need to lead healthy, active lives. Anne Gargano Ahmed, the HungerCare Coalition Coordinator, is available to work one-on-one with clinics and hospitals to help you determine the best way to incorporate the screen into your current workflow and offer guidance from clinics who have implemented the process here in Wisconsin and in other states. You can learn more about the project at www.hungercare.org. **If you are interested in learning more about how you can implement the food insecurity screen at your hospital or clinic, please contact Anne at annega@shfbmadison.org or (608) 216-7245.**

Upcoming Statewide or Regional Events and Trainings

September 24th—Southern Wisconsin Conference on Mental Health, Janesville
www.healthnet-rock.org

September 25-26—Mental Health & Behavior Summit; healthy minds, behaviors and schools, Wisconsin Dells <http://mhb.cesa5.org/home>

September 27-28—Poverty Matters Conference, Milwaukee <http://povertymatters.events/>

September 27-29—Wisconsin Society for Addiction Medicine Conference (Suboxone training Saturday the 29th), Madison <http://wisam-asam.org/event-2666595>

October 5—Pediatric Mental Health in Primary Care, Conference, Pewaukee https://ocpe.mcw.edu/pediatrics_general/node/191984

November 1-2—Wisconsin Peer Recovery Conference, Stevens Point <http://www.mhawisconsin.org/wi-peer-recovery-conference-stevens-point-2018-11-01>

NAMI (National Alliance on Mental Illness) – multiple events and resources coming up for people with, or loved ones with lived experience; see their

Recovery Pathways— Welcome Kimberly Hill!

Please welcome Kimberly Hill,
the new Recovery Pathways
Program Director!



Kimberly has over a decade of experience working with people in recovery, and in recovery housing, and is a licensed Substance Abuse Counselor. Kimberly will work with community partners to set up housing and connections to services and supports in Richland and Iowa Counties, and will supervise two peer support specialists who will work with recovery housing residents.

“Many think addiction is a moral failing, but it is not. Addiction is a chronic disease of the brain.”
- Kimberly

Addiction and Recovery

SWCAP applied for and received two grants to expand opportunities for people with addictions to receive treatment and recovery support.

Recovery Pathways has begun to work on developing recovery housing, improved connection to treatment, and wraparound community supports for people addicted to opioids (prescription pain medications and/or heroin) in Iowa and Richland Counties. The Wisconsin Partnership Program, a grant-maker within the UW School of Medicine of Public Health has funded this five-year pilot program. SWCAP is a uniquely suited organization to create and establish an addiction recovery program, with its existing housing, jobs, transportation, healthcare, and other programs and services, and its experience in partnering with other community organizations to work collaboratively.

SWCAP was also awarded a grant through the Department of Health Services (DHS) for expanding opioid treatment in our five-county region. The grant will be able to support addiction

counseling and peer support services in two counties, Green and Richland. These counties will be able to offer more treatment (for example 3 times per week, or daily) for people early in the recovery process, which will allow for better outcomes and improved chances for people receiving treatment to remain in recovery. Both counties are also simultaneously working on other recovery supports in their communities.

The DHS Opioid Treatment Expansion grant also funds a Psychiatric Nurse Practitioner to provide addiction and other behavioral health treatment at a SWCAP run clinic, Neighborhood Health Partners (NHP). NHP is an existing reproductive health clinic in Platteville, Dodgeville, and Monroe, and will expand their services to include behavioral health and addiction treatment. Two other NHP staff members will receive training to be able to provide support for these services. We expect that over time the clinic will be able to provide direct and consultative services for prenatal and maternal behavioral health, addiction



SWCAP Gala and Fund-raiser

SWCAP holds a fundraising Gala each year, to promote our anti-poverty mission.

For 2018, our Gala fundraising will focus on the need for recovery housing in our rural area. Too many people are struggling with addiction and have nowhere to turn for stable, substance-free housing after treatment and during recovery. Our gala fundraising goal is \$50,000 to help establish two Oxford-model Recovery Homes to help individuals remain substance-free.



PEOPLE HELPING PEOPLE

ANNUAL Gala AND FUNDRAISER

TUESDAY, OCTOBER 23 5:30 - 8:30 p.m.

DEER VALLEY LODGE Barneveld, WI TICKETS: \$35
1 free drink, hot appetizers, cash bar
Music by Paul Biere & Friends

Brought to you by SWCAP

To find out more about the Gala or to purchase tickets go to: <http://www.swcap.org/gala/>

“Standing for the whole. Collaboration before competition. We have to be the one entity that wholes the group together around a larger aim of healthy rural communities.” - Tom Mosgaller, on our Partnership and our upcoming Summit.

Fall Mental Health Summit Sneak Peek

- John McKnight, a founding father of Asset-based Community Development will be our morning keynote.
- Updates and best practices from the 5-county Partnership and from each county coalition.
- Asset-sharing: Learn about and network with our community mental health resources and people.
- Lunch buffet
- Panel presentation and Legislative Agenda-Setting:
“Rural mental health crises and emergency transport”
- Caucus discussions in groups based on our place in community (faith leaders, medical professionals, informal supporters, etc)
- Circling back and taking action together!

Morning Break-out Sessions:

GREEN COUNTY- Community crisis intervention strategy panel

GRANT COUNTY- Drug Court and Family Drug Court panel

RICHLAND COUNTY- Recovery and Prevention efforts, Faith-based work/Ministerial Assn.

IOWA COUNTY- Collaboration around crisis, Behavioral Health and Substance Abuse groups (merged), MAT trained physicians

LAFAYETTE COUNTY- Mental Health Matters – organizing the community around stigma reduction and awareness, resource outreach

Afternoon Caucuses:

- Faith-based and Clergy
- Farming/Rural
- Youth/Schools
- Healthcare
- First Responders/Crisis
- Support Groups/peer support
- Mental Health Providers
- Stigma Reduction
- Veterans
- Funeral Directors/Grief
- Addiction



Mental Health Providers Partner with Schools

Steering Committee

Grant County:

Jeff Kindrai – Director of Public Health
Jodi Moen – UW-Platteville Counselor
Mandy Pettit and Joni Downs – Gundersen, Boscobel
Mark Weaver—Pastor Lancaster United Methodist

Green County:

Rob Miles – Green Co. Human Services Mental Health Supervisor
Frank and Carol Mixdorf – NAMI Green County
RoAnn Warden—Director of Public Health
Wes Speer—Monroe Clinic

Iowa County:

Kim Emerson – Upland Hills Health
Steve Michek – Iowa County Sheriff
Tom Slaney – Iowa County Director of Social Services

Lafayette County:

Justin Erickson – Funeral Home Director
Candi Fitzsimons – Director of Darlington Public Library
Jason King – Darlington Chief of Police

Richland County:

Mike Breininger – Pastor Richland Center Fellowship
Janis Peterson – Community Peer Supporter

At Large:

Deb Goold – CESA 3 School Counselor Liaison
Jeff Lockhart – Director, Unified Community Services, Grant & Iowa Counties
Mary Mezera – Regional Director – SW WI Aging & Disability Resource Center
Hayley Jordan—UW-Extension, Green & Lafayette Co.

We know a few things about kids and schools, from parents and teachers, and from other sources of information, including the Youth Risk Behavior Survey: kids are experiencing more behavior problems, bullying, trauma and mental health issues. Schools don't have the resources to help kids and families, as these issues become more pronounced. It is impacting classrooms and school environments.

Several school districts are working with private mental health counseling organizations, to establish (or have established) in school and "near"-school sites for children and families to receive mental health services. Typically, mental health services can be very difficult for families to access. Families who live in Platteville or Monroe for example, may face time constraints with work, or may not get in to traditional counseling right away, with waiting lists and other barriers. Families in other smaller communities have not only time and waiting list barriers, but also have to find a way to get to communities where counseling is available., like Lancaster or Richland Center.

Schools may offer a space and a way to connect kids and families to services, and these private organizations then take on the treatment, billing, liability and other concerns.

Our Partnership is aware of two private counseling organizations working and partnering with schools. They are CWM out of Platteville, (contact: Dr. Craig Miller, cwmcounseling@gmail.com or 563-580-5151) and Oregon Mental Health who has employed two new counselors in the northern Iowa/Grant County area and from the Platteville area (Contact Mary Sella: mary@oregonmentalhealthservices.com or 608-835-5050).

Upcoming Local Trainings and Events

- **September 22**—9:00am—Ben's Hope Suicide Awareness 5K Run/Walk—Platteville – REGISTRATION: <http://www.bens-hope.com/events/annual-run-walk/>
- **September 29** –2:00pm –Suicide Awareness Walk—Mental Health Matters of Lafayette County—REGISTRATION: <https://www.lafayettecountywi.org/community/page/mental-health-matters-suicide-awareness-walk-and-banquet>
- **October 7**—NAMI Green County and Trevor's Team at NAMI Walks in Madison—REGISTRATION: <https://www.namiwalks.org/team/TrevorsTeam>
- **October 12**—Mental Health First Aid class—Upland Hills Health, Dodgeville—to register, call Michelle at Upland Hills Health at (608)930-7150.
- **October 23**—Fall Mental Health Summit at UW-Platteville (See inside for details) <https://www.eventbrite.com/e/sw-wi-fall-mental-health-summit-tickets-48482792337>
- **October 23**— SWCAP Gala— Deer Valley Lodge, Barneveld (see inside for details) <http://swcap.org/gala/>
- **November 5**— evening—Prevention and Recovery Data Walk—Richland Center (Place TBD) Contact Kimberly Hill khill@swcap.org

Send us news of key meetings, trainings or events! Additional Upcoming Events and Trainings can be found at our Facebook Page and Website:

⇒ FACEBOOK: https://www.facebook.com/BehavioralHealthPartnership/?ref=aymt_homepage_panel

⇒ WEBSITE: <http://www.behavioralhealthpartnership.org/>

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