



# WISCONSIN FAMILY TIES

16 North Carroll Street, Suite 230  
Madison, Wisconsin 53703

(608) 267-6888

Toll Free (800) 422-7145

Fax (608) 267-6801

[www.wifamilyties.org](http://www.wifamilyties.org)

## TESTIMONY to the WISCONSIN LEGISLATIVE COUNCIL SPECIAL COMMITTEE ON REVIEW OF CHAPTER 51

by

Hugh J. Davis

Parent & Executive Director, Wisconsin Family Ties

Representative Pasch, Senator Hansen, committee members: Thank you for the opportunity to speak on behalf of Wisconsin families that include children with mental health needs.

Wisconsin Family Ties is a statewide, parent-run nonprofit serving families that include children with mental, emotional or behavioral disorders. All Wisconsin Family Ties employees are parents of children with mental health disorders. Each year we interactively serve about 1,000 families in the state, providing the information, resources and support they need to succeed and to thrive.

The work before you is vitally important: We believe that the mental health and wellbeing of our children are foundational to Wisconsin's future. Over 100,000 school-age children in Wisconsin have a mental health disorder that substantially impacts their functioning at home, at school, and in the community (Wisconsin Department of Health Services, 2009). Unlike most disabling illnesses, mental disorders are the chronic disease of the young. Half of all lifetime cases of mental illness begin by age 14; three-quarters have begun by age 24 (US Dept. of Health & Human Services, 2005). Like other illnesses, delay in treating mental health disorders leads to a more severe illness that is less likely to respond to treatment.

Today I will be limiting my remarks to the issues relating to treatment of minors.

Wisconsin Family Ties supports what the legislature intended by enacting Act 444 in 2006, to give parents a greater voice in decision-making regarding the mental health care of their children. We do recognize there are several issues with the implementation of those changes.

- 1) **Awareness:** Parents throughout the state have reported and continue to report examples of public mental health facilities making service decisions based on what the law was prior to 2006. That is, access to services is being denied if the minor age 14 or older does not consent.
- 2) **Interpretation:** Some counties are applying the Act 444 changes to all minor children, not just those 14 or above. One psychiatrist told us, "If a 6 year old stamps his feet and says he wants to go home because he is told he must brush his teeth, [it would] require a petition to be filed." In a six month period from late 2006 to early 2007 in one county, 103 petitions were filed. Sixty (60) were for children under the age of 14.

- 3) **Onerous review procedures:** The requirement to file a petition with the courts is a hardship for treatment facilities. Wisconsin Family Ties had advocated for a peer review process to provide appropriate safeguards rather than a legal review.
- 4) **Operating practices:** Apparently some private treatment facilities have enacted internal policies that are more consistent with the law prior to Act 444. That is, they are by policy refusing to treat minors who do not consent to treatment, regardless of parents' wishes. We believe this practice circumvents the intent of the legislature.
- 5) **Discharge:** We have received reports that children on short-term inpatient admissions are being discharged immediately prior to the 12-day limit. There is concern that this is not coincidental.
- 6) **Complexity:** Chapter 51 was enacted in 1976; it has been modified countless times since then. When changes are made the tentacles run long and deep, impacting multiple sections of the statute. Further, when Act 444 was implemented, the decision to maintain references to 14 year old youth and to have different requirements for them than for other minors has only added to the confusion surrounding the provisions governing child and adolescent mental health treatment.

While dealing with this section of Chapter 51 is important, we believe there is a larger issue at play: We have a crisis in child and adolescent mental health in Wisconsin.

- In FY 09, 11.3% of Wisconsin children who met the criteria for a serious emotional disability (SED) received public mental health services. In the same time frame, 35.6% of adults with a serious mental illness (SMI) received public mental health services.
- We appear to be making more progress in the adult mental health system in Wisconsin. Between FY 08 and FY 09, the number of adults receiving public mental health services increased by 3,657. In the same time frame, the number of kids served decreased by 48.
- The MHSIP (Mental Health Statistics Improvement Program) survey includes measures of parental satisfaction with functional outcomes resulting from public mental health services. In 2007 (latest data available), Wisconsin had the lowest positive response in the nation at 44%.
- Seventy-five percent of boys entering one of the state's juvenile corrections facilities screen as having mental health needs; the percentage is higher for girls entering Southern Oaks.
- Fifty percent of children and youth in the child welfare system have mental health issues; these kids are less likely to be placed in permanent homes.

The complexity of Chapter 51, the fact that kids are not "little adults" and have very different needs, the data that show that progress in our child and adolescent mental health system appears to be lagging – all these things lead us to believe it is time to look at creating a separate child and adolescent mental health code to address the unique needs of children and their families. We believe it is time to intentionally decide what kinds of mental health services and supports are needed, rather than dealing with the aftermath as these kids frequently get involved in other, more costly systems.