



Central Wisconsin Health and Economic Development (CWHD) Summit

Behavioral Health: Mental Health and Substance Abuse Session Notes

CWHD Summit Overview

In 2015, the Central Wisconsin Health Partnership (CWHP) convened partners to plan and host a Health and Economic Development Summit for the six counties of the Central Sands agricultural region of Wisconsin: Adams, Green Lake, Juneau, Marquette, Waupaca, and Waushara. The purpose of this Summit was to catalyze collaboration towards the development of regional strategies to improve the health and vitality of rural communities in Central Wisconsin (WI).

As a result of these planning efforts, 155 people registered to attend the day long Summit on August 11, 2015 in Green Lake, WI. Participants from across the six counties represented a broad cross-section of stakeholder groups from the public, private, and community sectors. Afternoon attendees participated in breakout sessions organized by issue area (community development, transportation, workforce development, business development, behavioral/mental health, and sustainability). The breakout sessions used a World Café format, where a table host facilitated small group conversations with the aim of eliciting genuine input and broad perspectives around a focusing question.¹ The final take-aways, referred to as “aha’s,” were later shared with the large group.

This document provides a session description, take-aways, and the raw notes² from the issue area conversation on *Behavioral Health: Mental Health and Substance Abuse*. The full Summary Report from the CWHD Summit is available on the CWHP website.³

Behavioral Health: Mental Health and Substance Abuse Session Description

Mental illness and addictions are treatable conditions from which people can recover. The best outcomes occur when services are accessed early, with a good match between the service and the person in need. Mental illness and addictions, when not adequately treated, impact a person’s functioning on many levels and compromise their ability to make healthy choices. In addition, the health of our workforce is directly impacted by behavioral health issues. All parts of our community are impacted by behavioral health, and all sectors can play a part in supporting recovery. This session explored how we could make treatment services available to people early on, and hopefully prevent an escalation of problems for the individual, their families, and community.

Focusing question:

How can we create the environments and conditions that support improved behavioral health throughout our community?

¹ The World Café. “The World Café Method” <http://www.theworldcafe.com/key-concepts-resources/world-cafe-method/> (Accessed September 2015).

² The take-aways and raw notes preserve the language used by participants. Any abbreviations introduced, but not defined, were handwritten as such by participants during the session. Digital formatting (e.g., bold, underline, asterisks) is incorporated to maintain participant emphasis from handwritten flip charts and table notes. For example, asterisks are used to indicate items that were starred (*) in handwritten notes.

³ http://www.cwhpartnership.org/uploads/2/1/4/8/21489738/cwhealth_and_ed_summit_report.pdf



Session Take-aways

This section presents the final take-aways, or “aha’s,” from the *Behavioral Health: Mental Health and Substance Abuse* Session small group conversations.

Group Take-aways

- Lessen Stigma
- Prevention
 - Engage earlier
 - Schools
 - Education (benefits)
- Home-based model
 - Training whole family
 - Family System
- Integrated system with primary care providers
- Stronger political presence
- Community support
- Funds available for people to get services
- More collaboration between agencies



Additional take-away notes

- Need more resources
- Prevention – community education and understanding
- Providing affordable care (insurance)
- Affordable housing
- Jobs and decrease in poverty
- Have everyone at the table
- Same standard of care as other health care in regard to access and stigma and job loss
- Standard evidence based screening with brief intervention (SBIRT)
- More providers



Session Notes

This section includes the raw notes from the *Behavioral Health: Mental Health and Substance Use Session* small group conversations, as well as any additional individual notes from the moderator and participants.

Notes from Small Group Conversations:

#1a What's possible?

- (1) To get a certain population engaged in school/community/culture
- (2) Build/motivate a health celebrated culture
- (3) Find a way to build a relationship with the needy population (bring them out to be helped)

#1b Who cares?

- Everyone should

#2a PG What exists?

- We have defined and understand that there is a problem (we have a beginning)
- We do have an economy that needs workers
- Great entrepreneur culture

#2b PG What's missing?

- Stable family units (causing generational poor life choices)
- Motivated attitude

#3 What is most needed to affect change?

- A way to collectively motivate this population to better themselves (a big ass PR campaign)
- Come up with a way to improve **mental health** – self-esteem (tele health, mentoring, big brother)
- Youth job programs (may be hard to reach the population that needs this)

Notes from Moderator:

- *Introductions
- *What is your wish or passion re: this topic
- *How can we create an environment & Conditions that support improved behavioral health in our community?
- See the person and their health holistically
 - Public health
 - Mental health
 - Business
 - Economic
- Collective Impact
- Raise awareness
 - community awareness of issues
- MH stigma of MI
- Cultural acceptance of SA



- More access and funds for mental health provider [...]⁴ – help prevent crisis
- Meaningful outcomes for everyone important
- What happens after the [intervention]?
- 24 hour support

How can we create an environment and conditions to support behavioral health throughout all counties?

What is your wish, what do you hope to see? Passion in the topic?

- Lessen the stigma
 - Make people more comfortable
 - More open to services
- Prevention
 - Engage earlier
 - Helping younger children with skills
 - Go into schools
 - Educate why we need and want it (benefits)
- Home based model
 - Training the whole family
 - All w/in the family system
- Integrated system with primary care providers (family physicians)

Additional notes (page 1/2)

- Making funds available for people to get services
- Undervalue preventative services
- Business, housing, jobs (part of services) to access their treatment
- Stronger political presence for mental health
- Community support

Additional notes (page 2/2)

- More communication with primary care providers and human services
- Someone trained right underneath a mental health provider – help with services right away because of waiting lists
- More county collaboration between agencies
 - More networking/informative
- Funding
- Make resources more accessible (online, paper)

Additional Notes from Attendees:

- More collaboration is needed
- What's possible?
 - Empowering families
- Support/Improve behavioral health

⁴ “[...]” indicates that this phrase was not legible in the handwritten notes.