At first glance, you would never guess that 11-year-old Jessica struggles with any disorder. With flowing blond hair and an excited giggle, she appears as happy as any young girl her age. While Jessica looks healthy on the outside, she is hurting on the inside: She has Attention Deficit Hyperactivity Disorder (ADHD) and an Autism Spectrum Disorder. The truth is, these disorders greatly affect Jessica’s behavior. Jessica, like other children with emotional, behavioral or mental disorders, has a hard time controlling her behavior.

“When you see Jessica kicking, hitting, throwing herself violently on the floor and screaming obscenities, you are seeing symptoms of her disorders,” says her mother, Tina Swinford. Swinford also adds that these behaviors are very challenging, at times embarrassing and often misunderstood. Many people, including friends and family view these outbursts as signs of an “undisciplined, spoiled rotten, and disrespectful child.”

One incident occurred when Jessica and her family went shopping. Swinford states, “While standing in line to check out, Jessica became frustrated with the long wait. She began screaming at me to hurry up, hit me and then threw herself to the floor. She was hitting her head, kicking and swearing out of frustration.” Swinford overheard comments from others in line, such as, “If that was my child she would never get away with that,” and, “My child knows better than to act like that.” Recalls Swinford, “I tried to ignore Jessica’s outburst for fear she would accidentally lash out at me but hurt someone else standing in line. I was also very embarrassed. I didn’t want to draw more attention to us.”

This type of behavior has drawn other strong, hurtful reactions. Swinford relates that one family member responded to an incident in front of Jessica saying, “Wild animals behave better than that. Now you know why some mothers in the wild eat their young.”

“These comments left me frustrated, angry, hurt, and feeling very alone,” said Swinford. Soon, she and her husband limited their contact with family and friends. They refrained from taking Jessica to the store and even reduced the frequency of family outings to avoid further judgment from others.

“The sense of isolation can be overwhelming,” says Hugh Davis, Executive Director of Wisconsin Family Ties, a non-profit organization dedicated to serving families that include children with emotional, behavioral or mental disorders. “Despite having family nearby, living in close-knit neighborhoods and seeing coworkers on a daily basis, many of these families feel tremendously alone.”

In fact, Jessica and her family are not alone; the state of Wisconsin estimates there may be as many as 508 children in Waupaca County with emotional or behavioral disorders resulting in “extreme impairment” of daily functioning. Nationally, it is estimated that 2/3 of children with such illnesses are not getting the help they need.

Jessica, and others like her, need help controlling their behavior from parents and professionals. “Sometimes the help we give Jessica is as simple as patience, understanding, support, and a loving hug,” states Swinford. “We made modifications to her room to give her a quiet and safe place to ‘cool down.’ We try to reinforce positive behavior and use strategies recommended by professionals to reduce negative behavior.”

Other assistance available to kids like Jessica include psychological counseling, therapy, special diets, medication, and in extreme instances, hospitalization. One way family and friends can help these children is to learn more about their disorder to better help them live healthy, happy and productive lives.

In Waupaca County, families that include children with emotional and behavioral dis-

**Why Is This Issue Late?**

This issue of family ties was scheduled to be published last September. Unfortunately, funding for WFT has decreased sharply, requiring us to make some difficult decisions. The unavoidable cuts have included staff reductions and delaying or canceling some planned activities. Please see a related article on page 8.

Continued on page 6
**Meet the WFT Staff**

**Don, why do you work for WFT?**

I work for Wisconsin Family Ties because I want to reach out to other parents of special kids. Those parents are just like me. They have many questions, few answers and just don’t know where to turn. Because I’ve been there, too, I can be of help.

**What’s your favorite thing about being a Family Advocate?**

One thing I like is working with such a variety of people – families, school personnel, police, legal, and social workers. Most of all, my favorite thing is giving parents and their child some direction, hope and light at the end of the tunnel. I like letting them know that they are real people with real issues, and that they do matter.

**If you had one thing to tell parents, what would it be?**

That there is hope, so don’t give up.

**What has helped you cope?**

Open communication and keeping an open mind has helped me cope because these give you the opportunity to have a better understanding of a sometimes chaotic situation. Honest listening is the most important part of communication. Heubert Spencer said, and I paraphrase, “One thing that can keep man in everlasting ignorance is contempt prior to investigation.” Making up my mind before hearing the issues can close my mind. Listening to the issues before I make up my mind is crucial.

**What are some things you like to do out side of work?**

Artistic things, three dimensional projects like upholstery and sculpting. A personal hobby of mine is magic – illusion. Children have fantasies. They have the Easter Bunny, Santa Claus and other make-believe to escape from reality. Adults don’t have these luxuries – we have a grumpy co-worker, or unstable living situations cluttering our heads. If I can take someone away from their normal thoughts, if just for five minutes, I can sometimes give them back their childhood fantasies through the magic I do.

**How have your child rearing experiences affected your outlook?**

Those experiences have given me a much more honest, truthful grasp of life.

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**14th Annual Children Come First Conference**

**July 28-29, 2004 and Pre-Conference Training July 27**

Country Inn Hotel, Waukesha, WI (800-247-6640)

All Aboard for New Destinations!

Featuring Peter Alsop, family entertainer and psychologist!

Entry level and advanced workshops in wraparound, mental health and AODA, family-based services, suicide prevention, and education

**Two Special Programs for Kids and Sibs!**

1/2 Day Training on Advanced Wraparound Techniques July 27

7th Annual Children Come First Awards Luncheon July 28

Cost of this two-day conference is $135 ($85 one day)

1/2 Day Training on the 27th is $35.

For more information contact Mark Wehrly: mwehrly@wccf.org, or 608-284-0580 ext 308 or visit www.wccf.org/CCF for info/registration.
Family Fun Day
Scheduled for July 13!

Wisconsin Family Ties’ ever-popular Family Fun Day will be held on Tuesday, July 13 at Family Land Waterpark in Wisconsin Dells. 2004 will mark WFT’s 9th Annual Family Fun Day. Last year, over 600 family members from all over the state enjoyed picture-perfect weather, fantastic water slides (including the world’s steepest and fastest slide), a gigantic wave pool, mini-golf and 3 children’s water play areas just for the little ones. The faint-of-heart (and those tuckered out from numerous water slide runs!) relaxed on tubes floating down two “endless rivers.”

Once again, we are offering steeply-discounted tickets that include a picnic lunch. Even more astonishing, prices remain the same as last year - $10 per family member. Kids 2 and under are free.

We greet families at the waterpark entrance (1701 Wisconsin Dells Parkway) at about 9 a.m. and all gather at a cabana reserved for WFT. The picnic lunch will be at noon. For those needing a break from the sun, Family Land also has a large indoor waterpark with tube and body slides, children’s pool, endless river and whirlpools.

To register for Family Fun Day, complete the form on this page and mail it to us with your payment by Tuesday, July 6, so you will be assured of receiving your tickets before the event. You may also call the WFT office to request tickets, however, we need to receive your payment before the tickets can be sent to you. See you at the Dells!
Learning is a Two-Way Street with ADHD Son

By Lisa Mensink

Having a son with ADHD has meant having to teach many concepts I never thought I'd have to teach, and coming up with discipline techniques to achieve behaviors I had assumed would occur on their own.

One of the first clues to my son's ADHD, aside from his restless, unfocused behavior, constant noise-making, and angry outbursts, was an inability to understand time concepts. He was attending home daycare with a loving and professional provider, who was also an educator on child development. She provided regular reports on each child for parents. Her reports for our four-year-old son indicated that he didn't have an age-appropriate understanding of time concepts, such as "yesterday," "today," "tomorrow," and "later." He was repeatedly asking the same questions about when something was going to happen, then being confused with the answer. My first guilty thought was, "I should have taught him that." My second thought was, "Don't kids just pick that up without being taught?"

We proceeded to get a calendar and a book on time with a large clock on the front. We are still struggling to teach about time. My well-intentioned son will spend an hour doing nothing in the morning, then three absolutely frantic minutes trying to pull himself together as soon as I call, "time to head down to the bus!" My husband and I have been discussing how best to create mini-goals within the morning; breaking the morning into rewardable mini-deadlines for breakfast, teeth, hair, bed making, clothes. How can we make the time more visible to him?

There are other techniques I've had to try medication, because we had heard problem reports from many sources: our son's two teachers (they provided, unsolicited, an ADHD evaluation for him); the lunch lady; the school principal; the playground supervisor; the Sunday-school teacher; and the soccer coach, all within a two-week time period. Although I was willing to put up with any level of personal hassle or challenge for myself in the course of raising my son the best way I could, it finally became apparent that he himself was suffering due to his behavior — from lack of learning, lack of understanding of time concepts, such as "yester-

Continued on page 5
year, Mom!” The more I questioned him, the more clear it became that he attributed all of the changes in his year to changes in the teachers. Even after I argued convincingly that it was his own behavior that made the difference, I don’t think he completely believed me.

In recent years he has formed some healthy friendships. Even so, I still need to coach him on interpreting responses from others from time to time. When he first went on his medication and we were experiencing new-found focus and self control, and new levels of communication with our son, we found he had a lot of catching up to do in understanding relationships. A friend would laugh happily in delight at something fun my son did, and my son would angrily storm off to sulk in his room, claiming, “He was laughing at me!” He was convinced he was being made fun of. I explained that his friend was being happy and enjoying him. At other times, friends have been very unhappy with my son’s behavior and he has been oblivious.

“Look at your friend’s face. See how sad he is? His voice sounds rough and low. Something has made him sad, so you need to think about what you are doing and see if it could be upsetting your friend.” There have been cards, phone calls, and gifts of apology when instincts and reminders have failed.

And what is my son teaching me? That it is important to make your own judgments about your life, and not just accept those of others who are outside looking in. That it is crucial to keep an open mind. That patience is a virtue, but sometimes it is best to admit defeat and ask for help. And most of all that you don’t have to be perfect to be loveable.

Conferences and Workshops

There are several organizations that provide training or workshops across the state. Obtain their Events Calendars by writing, calling or e-mailing them.

Wisconsin FACETS
(special education)
www.wifacets.org/events.htm
877-374-4677;
e-mail wifacets@execpc.com

ABC for Health
(health care financing)
www.safetyweb.org; 888-428-4222;
e-mail info@safetyweb.org

CESAs 1-12 & Wisconsin Statewide Parent-Educator Initiative (WSPEI)
http://www.dpi.state.wi.us/dpi/dlseca/ecn/par liaison.html;
800-441-4563 or contact Martha De Young,
CESA 5, 608-742-8814 ext. 255;
deyongm@cesa5.k12.wi.us for information
on Parents in Partnership trainings in
Wisconsin Rapids, Eau Claire, Madison,
Waukesha and Watertown to be held in

NAMI-Wisconsin
(National Alliance for the Mentally Ill)
www.namiwisconsin.org;
or call 800-236-2988 for the NAMI affiliate
in your area or county.
Affiliates may provide workshops, trainings and support groups which can fit your needs.

July 28-29  Country Inn Hotel, Waukesha
2004 Children Come First Conference: "All on Board for New Destinations." Pre-conference wraparound training on July 27. Sponsored by the Wisconsin Council on Children & Families. Full conference brochure and registration may be found at the WCCF website: www.wccf.org/CCF, e-mail mwehrly@wccf.org or call 608-284-0583.

July 28-31 Hyatt Regency, Minneapolis
North American Council on Adoptable Children 30th Anniversary Conference. Call 651-644-3036, or e-mail info@nacac.org, www.nacac.org.

August 6 – 8 Marriott Madison West Hotel
Agenesis of the Corpus Callosum (ACC) Conference. Contact Kristen Barge, 608-848-9895 or go to the web site at www.corpuscallosum.org.

August 10-12 Marriott Madison West Hotel
Wisconsin State Prevention Conference -- "Weaving a Tapestry of Health: Collaborations Among Substance Abuse Prevention, Mental Health Promotion and Tobacco Control.” Conference will provide professional development opportunities in several culturally-specific model programs

Sept 23-24 Ho-Chunk Casino Hotel & Convention Center
Eighth Annual Crisis Intervention Conference: "Creating Partnerships and Fostering Hope." Contact SE WI Area Agency on Aging at 262-821-4444 or conferences@sewaaa.com. Conference brochure available in July.

Sept 27 Radisson Hotel West, Milwaukee

Oct 22 Madison
“Caring for our Daughter” Community Partnerships, Inc. will host a free one-day conference dedicated to adolescent girls and their parents from 8 a.m. – 5 p.m. at the Alliant Energy Center. Open to any teen girl (13-17) in Dane County. Some workshops designed for parents. Call 608-250-6342.

Learning...
Continued from page 4
What is Family Voices of Wisconsin?

By Liz Hecht

Family Voices State Coordinator

Family Voices of Wisconsin is a group of volunteer parents and advocates with a long history of working to improve the system of supports and services for children with disabilities and significant healthcare needs in Wisconsin. We focus our efforts on working with our partners to support the voice of families to inform and influence public policy on behalf of children and families. We do this by providing information to families via the Dis-Update and Family Action Network email lists, convening topical focus groups of family members, surveying families about particular issues and experiences, sharing information with legislators and policy makers, and participating in statewide systems change efforts.

Family Voices currently focuses on the following efforts in Wisconsin:

- Survival Coalition
- DAWN
- Children’s Redesign
- Circles of Life Conference
- Medicaid Prior Authorization
- Long-term Care Reform
- Family Support Waiting Lists
- Funding for Children with Autism
- Sharing Family Stories with Legislators
- Children with Special Health Care Needs (CSHCN)

Family Voices of Wisconsin is the recipient of a systems change grant from the Centers for Medicaid and Medicare Services. Grant activities will focus on developing a Family-to-Family Health Information Center in Wisconsin and improving the coordination between existing information, assistance and advocacy services for children with disabilities and special health care needs.

Family Voices of Wisconsin is part of the national Family Voices network, which acts as a clearinghouse for information and education concerning the health care of children with special health needs. We track public and private sector health care changes that affect our children and families through the collective efforts of our families, along with a volunteer Coordinator in every state, 10 Regional Coordinators and a national staff based in several locations around the country. Together, we share the expertise and experiences of families from around the country with state and national policymakers, the media, health professionals, and other families. We work in public and private hospitals, public health programs, in state capitals, in Washington, DC, serving on boards and task forces, working in partnership with health professionals and policymakers, bringing the family perspective to policy discussions and decisions. There are almost 40,000 Family Voices members - families of children with special health needs and friends and professionals who know and love our children.

We are always interested in hearing about the challenges families experience in navigating the health and community-based systems of support and in the solutions families have to improve the systems that serve us. For more information about Family Voices of Wisconsin, go to our website (www.wfv.org) where you can sign up for one of our on-line newsletters or e-mail Liz Hecht at hecht@waisman.wisc.edu.

Orders may be able to receive assistance from the Integrated Services Project (ISP). This county-run program is family-focused and builds upon the strengths of the child and family. "Some people may be afraid they’ll lose their children if they contact the county, but this program is designed to keep children at home and in school," says Alan Stauffer, Project Director of Waupaca County’s ISP. "We work closely with each family to identify supports and services tailored to their unique needs."

Through her family’s involvement in the ISP program, Swinford heard about Wisconsin Family Ties. Swinford states, "I remember calling and talking with individuals at Wisconsin Family Ties who understood what I was going through. They knew how I felt and didn’t judge me! I realized I wasn’t alone and began healing from the hurtful comments that I now know were made because people really don’t have much knowledge about children’s mental health problems."

Swinford’s experiences have motivated her to help others in similar situations. Through Waupaca’s Integrated Services Project, Swinford learned of an open position at Wisconsin Family Ties in Waupaca County and was encouraged to apply. "All I had was experience in dealing with my child’s behavior, knowledge on disorders, and getting services to better help her," says Swinford; but that is what qualified her for the job. She now works as a Family Advocate for Wisconsin Family Ties helping other families.

Swinford acknowledges the increasing need for support for parents of children with these disorders. To assist parents and caregivers, she started a local support group for families with children with special needs. She currently is working on launching a group specifically for parents / caregivers of children and adolescents with mental, emotional or behavioral disorders.

Today, Jessica is learning to identify when she needs a break to calm down and spends part of her school day in a regular classroom. While her family still faces many challenges, Swinford acknowledges, "Without the services and help we received, we wouldn’t have gotten this far." She hopes that by speaking out, people in Waupaca County will begin to better understand children’s mental health issues. "Maybe some people will realize that what they’re seeing on the outside may be due to what’s going on on the inside. Maybe they won’t be so quick to judge. And maybe some family that needs help will know where to start to find it."
Wisconsin Family Ties recently published a guide describing a little-known and underutilized federal program through which Medicaid-eligible children can access mental health services. The name of the federal program is “Early and Periodic Screening, Diagnosis and Treatment” or EPSDT, but it is called HealthCheck in Wisconsin.

Under this program, Medicaid-eligible children are entitled to periodic health screenings (checkups) and appropriate treatment for any physical or mental health condition diagnosed during the screening. Medicaid also may be referred to as Medical Assistance, MA or Title 19. Even though all children who qualify for Medicaid are eligible for the screen and for any services prescribed as a result of the screen, it is often hard for families to get those services or to even know that their child has such coverage.

Prior to 1989, a state could limit Medicaid reimbursement for services to only those listed in their state Medicaid Plan. The federal Omnibus Budget Reconciliation Act passed in that year strengthened the EPSDT program by requiring states to make available to EPSDT-screened children any medical or mental health service authorized under federal Medicaid law, if it is deemed medically-necessary for the child. Federal law usually encompasses a much more comprehensive list of services than does a state Medicaid Plan. The change in law was especially significant for children in need of mental health care, because federal Medicaid covers not only the more "traditional" forms of mental health care (i.e., treatment in a clinic), but also community-based services. Services listed in the federal statute include:

- Home-based health care services
- Case management
- Preventive and rehabilitative services, including any medical or remedial services (provided in a clinic, a home, or other setting)
- Physical, occupational and speech therapy
- Inpatient psychiatric hospital services
- Outpatient hospital services
- Personal care services furnished in a home or other setting

The Role of the HealthCheck Screen in Accessing Mental Health Services

A HealthCheck screen can provide early identification of a mental health problem in a child. This identification and the right to treatment under federal law can save the child and family pain and frustration. It can also save the system that pays for the mental health services a great deal of money over the long haul if a mental health problem is diagnosed and treated early in a child’s life. However, HealthCheck screens do not regularly check for mental health concerns. Parents concerned about their child’s mental health should ask specifically for a HealthCheck mental health screen.

What Families Need to Know

Medicaid rules can be very confusing, especially in states like Wisconsin, where a Medicaid-eligible child may be covered under either a Health Maintenance Organization (HMO) Plan or a Medicaid Fee-for-Service Plan. The following information can be helpful for the family who wishes to have their child screened for a possible mental health condition under the HealthCheck program:

- Any child with an MA card is eligible for regular HealthCheck screens and is entitled to treatment for any medical, vision, hearing, dental or mental health condition found in the screening process.
- If a child already has had a HealthCheck screen and a parent is concerned that their child may have an undiagnosed mental health problem that was not initially screened for, they may ask for a special checkup (called an “interperiodic screen”).
- A family can file a grievance with their health plan or file an appeal to the state if they are dissatisfied with any service they have received. Instructions describing the filing process should be included when a family receives initial information about their Medicaid or Health Plan.
- A family can call the state of Wisconsin Department of Health & Family Services at 800-722-2295 to find their nearest HealthCheck provider or to get answers to any questions or problems they may have with HealthCheck.
- To talk to a Family Advocate (another family member) about accessing mental health services for your child, call Wisconsin Family Ties at 800-422-7145. WFT can provide you with a free Parent’s Guide to Accessing Mental Health Services for Your Child through HealthCheck and help you understand your rights.

(Note: The HealthCheck Parent Guide has been revised due to an error in the list of covered services. The updated version has a sticker stating “Revised” on the cover. Contact WFT to receive an update if you have a previous version of the guide.)
Over the years, Wisconsin Family Ties has helped thousands and thousands of families throughout the state. Now we need your help. We’ve been forced to cut back due to a steeply-declining budget. If you believe in the work of WFT, there are several ways you can help, even if you are unable to contribute financially.

How big is the problem?
As you can see from the chart below, there has been a fairly sharp decrease in funding for Wisconsin Family Ties. Revenue is currently running 28% behind last year at this time. At the same time, we have seen rising costs in such areas as health insurance and rent, as well as increasing demand for WFT services.

Be assured we are not sitting idly by while this is happening. WFT has left no stone unturned, reducing discretionary spending while at the same time preserving service to families wherever possible. Many of our employees, none of whom has received a pay increase in 18 months, are volunteering extra time to make sure that families continue to have their needs met.

We are also aggressively pursuing new sources of funding for the organization. This is a difficult undertaking, since we were forced to eliminate nearly all administrative activities, leaving very little time for fundraising. Further, the economic downturn has affected non-profit agencies and funding organizations alike, leaving fewer dollars available and stiff competition for those limited funds.

How did this happen?
Several events have contributed to this situation. Here are a few:

Loss of Major Funding Source: Federal funding for the Northwoods Alliance for Children & Families (NACF) ended, ultimately resulting in the closing of NACF in Forest, Vilas and Oneida counties. WFT had a contract with NACF that fully funded our operations in those three counties. This contract accounted for 8.4% of our fiscal year (FY) 2003 budget.

County Cutbacks: Some counties with whom WFT has contracts to provide family advocacy and support have utilized those services far less than they originally anticipated. Many counties in the state are facing their own budget crises.

Fewer Private Donations: In December, 2003, we sent out fundraising letters to many of the individuals on our mailing list. Only 1 out of every 100 people who received the letter responded. Total individual donations in 2004 are running about 50% lower than last year.

Federal & State Grants: WFT’s major sources of revenue are from federal and state grants. The amount of these grants has remained static over the past few years, while our costs have continued to rise.

Ways You Can Help
There are several ways you can help WFT at this time…and only one requires you to open your wallet! Here are some suggestions for those who would like to get involved.

Contact Your Legislators and Public Officials
Wisconsin Department of Health & Family Services (DHFS); WFT’s largest sis-
WFT Needs You!

Continued from page 8

A single source of funding comes from the Mental Health Block Grant administered by DHFS. Two prime contacts within DHFS are Helene Nelson, who heads the department, and Sinikka Santala, whose responsibilities include mental health services. If you contact them, tell them how WFT has helped your family and ask them to increase WFT’s allocation for peer and family support. Contact information for these two key individuals follows:

Helene Nelson, Secretary
Department of Health & Family Services
1 West Wilson Street
PO Box 7850
Madison, WI 53707-7850
Email: nelsonh@dhfs.state.wi.us    Sinikka Santala, Administrator
Division of Disability & Elder Services
1 West Wilson Street
PO Box 7851
Madison, WI 53707-7851
Email: santass@dhfs.state.wi.us

Legislators:
Contact your state legislators, tell them why you think WFT’s work is important and ask them to earmark funding for our program. To find the name and contact information for your senator or assembly representative, call (800) 362-9472 (local number 266-9960 in Madison), or go to the website www.legis.state.wi.us/waml/.

County Board or Human Services Board:
Contact your local officials and ask them to explore a contractual relationship with WFT to provide family support services in your county.

Volunteer
Contact the WFT office at (608) 267-6888 or via email at info@wifamilyties.org if you’re interested in any of the following opportunities.

Volunteer at the WFT Office in Madison:
For those who live in the Madison area, you may wish to help out in the WFT office located on the capitol square. In addition to office administration tasks (e.g., filing, copying, ordering supplies, organizing resource materials), we have opportunities in event planning, newsletter editing, research, library maintenance, updating databases and taking initial calls from families WFT serves.

Volunteer to Lead a WFT Support Group:
WFT will provide training and ongoing consultation for parent leaders willing to run a support group in your area.

Volunteer to Serve on WFT Committees:
The WFT Board of Directors has several committees that advise the board in various areas. Opportunities exist on the following:

■ Finance Committee – Ensures accurate and complete financial records are maintained, reviews the annual budget, and recommends financial policies for the organization.

■ Development Committee – Works with staff to develop a fundraising plan, evaluates and cultivates potential sources of funding, ensures board involvement in fundraising activities.

■ Outreach Committee – Develops plan to raise awareness of children’s mental health and of WFT’s services by appropriate means for families, state and local elected officials, policymakers, potential donors and the general public.

■ Public Policy Committee – Helps develop WFT’s public policy agenda and works to educate and inform elected officials and policy decision-makers at the national, state and local levels.

Provide In-kind Services:
Periodically, WFT needs the services of professionals such as attorneys and accountants. You may wish to volunteer to provide some of these services at no cost to the organization.

Put your money where your heart is.
Help bring hope to Wisconsin families. Please give generously.

Name

Address

City/State/Zip

Amount of gift: $ _

All gifts to WFT are tax-deductible.
Please make checks payable to Wisconsin Family Ties and send to:
Wisconsin Family Ties
16 N. Carroll Street, Suite 640
Madison, WI 53703

Make a Tax-Deductible Contribution…or Ask a Friend To

We understand that we are not alone; these are difficult economic times for many. For those who are able, we could use your financial support of our work. If each person receiving this newsletter contributed just $10, it would increase our current budget by 20% and ensure that all of our popular programs like Family Fun Day, in-person family support and parent training scholarships would be able to continue in the future. A donation form is provided on this page for your convenience.

If you are unable to give a gift at this time, perhaps you have friends, family or business contacts who may be willing to do so. Many of these individuals regularly contribute to groups providing a valuable public service and may be interested in hearing about organizations you think are worthy of their consideration.

In Conclusion

Many of you have told us the service we provide is necessary and beneficial. As one family member said, “The concept of WFT is simple, but it sure works.” It is because of the many comments like this that we decided to share openly with you, our extended family, the financial challenges before us. We look forward to the great things we will do together in the future and thank you for considering ways in which you can help us continue to bring hope to Wisconsin families.

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WFT Salutes its 2003 Volunteers!

Mary Adams, Marinette
Eve Altizer, Waukesha
Blaine Amstadt, Rhinelander
Karen Amstadt, Rhinelander
Maggi Bain, Kenosha
Andrea Baughman, Eagle River
Jodi Bellile, Rhinelander
Sandy Bergman, Rhinelander
Andrea Betchner, New London
Sheila Betchner, New London
Krysti Bink, Rhinelander
Alex Bontz, Rhinelander
Christie Cirilli, Rhinelander
Monica Cline, Lake Tomahawk
Linda Cole, Waukesha
Alissa Condra, Rhinelander
Qui Dang, Madison
Jeff Daniels, Waukesha
Mary Deicher, Evansville
Casy Dumphy, Eagle River
Dorothy Duwe, Wautoma
Carole Feige, Kenosha
Amy Ferguson, Rhinelander
Ann Flegel, Racine
Virginia Forsythe, Kenosha
Richie Franke, Delafield
Shaun Franke, Delafield
Herman Gates, Milwaukee
Cindy & Ron Godbold, Pleasant Prairie
Natalie Golden, Rhinelander
Val Golden, Rhinelander
Scott Gray, Minocqua
Sandra Hack, Milwaukee
Michael Hager, La Crosse
Tryten Hager, La Crosse
Wylliam Hager, La Crosse
Sarah Hau, Rhinelander
Kahlie Hauser, Rhinelander
Annie Hazelton, Kenosha
Theresa Herr, Kenosha
Jeanneane Jackson, Wautoma
Megan Jackson, Rhinelander
Samantha Jefferson, Rhinelander
Darci Joslin, Rhinelander
Laurie Kohler, Waukesha
Patti Laessig, Merrill
Arial Larson, Rhinelander
Jessica Martin, Madison
Nancy Marz, Monona
Judy McKay Burkey Hiles
Kathy Meyer, Pleasant Prairie
Maggie Mezera, Madison
Milana Millan, Eagle River
Sue Orlebeke, Allenton
Anita Osgood, Kenosha
David & Denna Patelski, Red Granite
Bobbie Pohnl, Rhinelander
Toni Reid, Rhinelander
Cheryl Riihimaki, Phelps
Jay & Patrice Roder, Waukesha
Lix Schirra, Rhinelander
Susan Schissel, Sussex
Susan Schoenmarklin, Wauwatosa
Michael Singer, Madison
Jenny Steinmetz, Rhinelander
Tina Stevens, St. Germain
Annie Sykes, Rhinelander
Shauna Vanden Huevel Rhinelander
Amy Waldhart, Rhinelander
Courtney Wilder, Rhinelander
Sara Wittl, Madison
A Picture of Children’s Mental Health

- One in five young people have at least one diagnosable mental or addictive disorder, according to the U.S. Surgeon General. [U.S. Dept. of Health & Human Services, 2001]
- 79,996 Wisconsin children ages 9-17 suffer from a major mental illness that results in significant impairments at home, at school, and with peers. [Estimated prevalence in U.S. Surgeon General’s Report, 1999]
- In a recent Child & Family Services Review, Wisconsin failed to meet the benchmark for “children receive adequate services to meet their physical and mental health needs.” The report observes, “there is a problem accessing mental health services for children…because their families usually do not have medical insurance that will cover mental health services.” [U.S. Dept. of Health & Human Services, Wisconsin Child & Family Services Review, 2004]
- Only about twenty percent of children with mental illness receive needed treatment in any given year. Unmet need for services remains as high now as it was 20 years ago. [U.S. Surgeon General’s Conference on Children’s Mental Health, 2000]
- In response to health screenings conducted at admission to juvenile justice facilities, 73 percent of juveniles reported having mental health problems and 57 percent reported having prior mental health treatment or hospitalization. [Office of Juvenile Justice and Delinquency Prevention study, 1994]
- The high school non-completion rate for children with emotional and behavioral disorders is 56%, highest of all disability groups. [O’Leary, Wisconsin Statewide Transition Conference, 2004]
- Among 6 to 17-year-olds in foster care, about 40% meet the criteria for a mental illness diagnosis with moderate impairment. [U.S. Surgeon General’s Conference on Children’s Mental Health, 2000]
- Suicide is the second leading cause of death for Wisconsin young people. [Wisconsin Suicide Prevention Strategy, May 2002] More than 90 percent of adolescents who take their lives have a mental health disorder such as depression. [U.S. Surgeon General’s Conference on Children’s Mental Health, 2000]
- Child mental disorders persist into adulthood: 74% of 21-year-olds with mental disorders had prior problems. [U.S. Surgeon General’s Conference on Children’s Mental Health, 2000]

We’d Like to Hear From You!

The family ties newsletter is for families and about families. Share your story so others will know they’re not alone! Please consider contributing anything that might interest other families, including:
- Your family’s story
- A story or artwork by your child
- A poem, written by either a parent or child
- A story from a sibling’s perspective

If you’re not confident in your writing abilities, don’t worry – we can help you edit your story. Names also can be changed if you prefer to remain anonymous. Contact information for Wisconsin Family Ties, including your closest Family Advocate, can be found on the back page of this newsletter.

Position Available

Wisconsin Family Ties is seeking a Family Advocate to serve Dane County families as well as families with children at Mendota Mental Health Institute. Responsibilities include providing support, information and advocacy to families that include children with mental, emotional or behavioral disorders.

- 1/2-time position (approximately 20 hours per week)
- Need flexible schedule; some weekend work required
- Car, auto insurance and valid drivers license required
- Special consideration given to parents / caregivers of children with mental, emotional or behavioral disorders.

Please send a cover letter and resume to:
info@wifamilyties.org
or
Wisconsin Family Ties
16 N. Carroll St., Suite 640
Madison, WI 53703
Attn.: Human Resources

Wisconsin Family Ties is an equal-opportunity employer.
Wisconsin Family Ties (WFT) is a statewide organization run by families for families that include children and adolescents with emotional, behavioral, and mental disorders. An Equal Opportunity Employer, WFT is funded by individuals, corporations, grants and an allocation from Community Shares of Wisconsin. Contributions to WFT are tax deductible.

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Bonnie Howe, Waunakee

Wisconsin Family Ties Madison Office Staff
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Joan Maynard, Information & Referral Coordinator

Wisconsin Family Ties Family Advocates

Mendota Mental Health Institute:
Beryl Gibbon Fago, 608/301-1190

Lincoln County Support Group Leader:
Louise Doescher, 715/536-3094

Waukesha County:
Kathryn Jalas Franke, 262/646-4455

Forest County:
Alberta Hatmaker, 715/478-5965

Vilas County:
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