



SARAH GODLEWSKI'S PLAN TO ADDRESS THE MENTAL HEALTH CRISIS

It's been [called](#) "America's shadow epidemic." From seniors, moms, and kids to farmers and veterans to so many others, the mental health crisis in America touches millions of lives. A lack of federal funding and a shortage of mental health care providers have made it difficult for people to get the help they need.

No matter where she is or who she is talking to, Sarah Godlewski hears about the mental health crisis in Wisconsin. The system is broken. Families need resources to address these issues, but unfortunately quality and affordable services are too far and few between in our state — 55 of Wisconsin's 72 counties have a [significant shortage](#) of psychiatrists and almost [25%](#) of Wisconsin adults with mental illness report having unmet treatment needs. This path is not sustainable — Wisconsinites need a lifeline now.

Sarah is committed to helping Wisconsin families get the support and resources they need to achieve the quality of life they deserve. She knows that the federal government has to devote more research, more energy, and more resources to take care of those who are suffering. Sarah wants to be a mental health champion in the Senate — that's why she developed a plan to address the ongoing mental health crisis in Wisconsin and across the U.S.

Sarah's plan focuses on:

- Expanding access to behavioral health services and providers
- Confronting the youth mental health crisis
- Supporting veterans' access to mental health care
- Tackling the farmers' mental health crisis
- Addressing the maternal mental health crisis
- Providing resources for addiction recovery and holding Big Pharma accountable
- Safeguarding our seniors' mental health

I. EXPANDING ACCESS TO BEHAVIORAL HEALTH SERVICES AND PROVIDERS

Streamlining licensing procedures for mental health professionals

We can't respond to a mental health crisis unless we have a corps of therapists, social workers, and psychiatrists available to work with those in need. Yet Wisconsin's [licensing barriers](#) are holding up the ability of therapists to get licensed to practice and meet the demands of patients. And Wisconsin is not alone — significant licensing backlogs are found [across the country](#). That's why Sarah wants to streamline the [licensing](#) process, by digitizing licensing application requirements and providing more resources to hire additional licensing staff.

Helping communities identify those in need of treatment and connect them with the help they need

We have to do a better job training physicians, religious and community leaders, EMTs, and [law enforcement](#) so that they can identify common mental health and substance use problems, refer for

treatment, and, when possible, de-escalate crises to avoid entry into the criminal justice system. Sarah would support federal grants to state and local communities to get training to better equip community leaders and professionals.

Not everyone has time to find, or access to, far away mental health services, especially outside of metropolitan areas. That's why Sarah wants to get creative in reaching Wisconsinites where they are. We saw during the pandemic a surge in creative solutions for getting people tested and vaccinated. That model should be used to help provide mental health services. Whether it's [expanding funding](#) for [mobile outreach teams like CARES](#) in Madison to help connect people with treatment, or leveraging safe public spaces like [libraries](#) and community centers to better serve communities, Sarah will fight to get folks the help they need.

Fully funding and implementing the new 988 Suicide Prevention Lifeline

The Federal Communications Commission is preparing to roll out the new national "988" Suicide Prevention Lifeline number this summer. Because there is already a [concern](#) that the already in-high-demand hotline won't be able to meet the new demand without necessary federal funding, this would be a priority of Sarah's. Additionally, to ensure that the hotline is able to provide the support to those who need it most, a robust public service campaign has to be part of the rollout. In the U.S. Senate, Sarah would support the bipartisan [988 Implementation Act](#) to increase public awareness, expand access to crisis workforce development and provide other technical assistance.

Providing parity in insurance coverage for mental health care

We can't expect folks in need to seek out help if they can't afford it. That's why Sarah is committed to achieving parity for health insurance coverage of behavioral health. Legislation like the bipartisan [Parity Implementation Assistance Act](#) would build on the efforts of the 2008 Mental Health Parity and Addiction Equity Act (MHPAEA) to make sure that insurance companies are acting in compliance with parity law.

Expanding broadband and telemedicine

Telemedicine benefits all communities across Wisconsin, and it has been particularly instrumental with respect to the administration of mental health care. We must ensure that telemedicine accessibility remains available even once the pandemic is behind us. To do that, Sarah [will make sure](#) broadband [is available](#) in every corner of our state.

In Washington, Sarah will work to pass legislation to protect telehealth accessibility by passing bipartisan legislation that makes permanent Medicare and Medicaid reimbursements for telehealth care.

II. CONFRONTING THE YOUTH MENTAL HEALTH CRISIS

Equipping schools to provide early intervention screening and mental health support

Educators and school personnel have a front row seat to children's behavioral well-being. And for many young people, school is the [primary provider](#) of mental health resources. That means we have to equip school personnel to [identify and support children](#) who need help and to better coordinate with and integrate a professional support system.

The U.S. Surgeon General published [a report in 2021](#) that found "one in three high school students and half of female students reported persistent feelings of sadness or hopelessness, an overall increase of 40% from 2009." In Wisconsin, we have [71,000](#) children in K-12 with major depression, [36,000](#) of whom don't receive treatment. We need to be sure that we are training educators and school personnel on how best to deal with the wide range of student social, emotional, and behavioral challenges that schools

see. Sarah supports developing mental health screening programs in public schools, similar to how we do vision and hearing tests, and will work to ensure there is [federal funding available for screening and prevention programs in K-12 schools](#).

In the Senate, Sarah will fight to increase federal funding for hiring school counselors, nurses, and psychologists. For those families who lack insurance or resources to get their children mental health care outside of school during the work day, Sarah supports [legislation to require Medicaid to reimburse school-based mental health services](#) in all states, including Wisconsin, whose Medicaid program [does not cover school-based mental health services for all Medicaid-eligible students](#).

Sarah will also work to expand [suicide prevention training](#) and policies for public schools, particularly for [communities of color](#). While suicide attempt rates are decreasing among White children, suicide attempts for Black children [increased](#) by 73% from 1991 to 2017.

Supporting universities and their students

College students – many of whose educational experiences were interrupted or put on hold because of COVID – are experiencing a surge in [depression and anxiety](#). And while young people are reaching out for therapy more than ever before, our universities and colleges remain unequipped to handle the surge of need. There [simply aren't enough](#) college counselors. [Months-long](#) waits throughout college health services create a dangerous dynamic, propelling students to delay care, end up in the emergency room, or worse yet, consider suicide.

Sarah is committed to supporting federal [legislation to help colleges](#) and universities sufficiently train and hire campus counselors. Sarah plans to increase funding through grants for mental health and addiction services at colleges and universities—and require colleges that receive federal financial assistance to invest in these critical programs.

Sarah also supports efforts to ensure [timely mental health reporting](#) by colleges and universities, as we did with COVID on campuses, to hold higher education accountable and appropriately provide mental health services.

Making sure youth have the right place for treatment

Hospital emergency departments [have become holding spots](#) for teenagers who pose too great a risk to themselves or others to go home. The best place for adolescents in distress isn't a crowded, chaotic emergency room in a hospital, but rather inpatient treatment centers, which provide calmer, more stabilizing spaces for individual and group therapies. Sarah supports increasing the availability of resources like [Certified Community Behavioral Health Clinics](#) – CCBHCs – which expand access to evidence-based substance use treatment, diverting people in crisis from hospitals, expensive emergency departments and jails.

Holding social media companies accountable for their role in youth mental health crisis

In 2021, the [U.S. Surgeon General found](#) that while behavioral health issues stem from a range of factors, including genetic disposition, brain chemistry, and socioeconomic factors, the rise of technology platforms and social media have exacerbated and amplified the problem. Whether [facilitating bullying, contributing to eating disorders, interfering with sleep, encouraging children to negatively compare themselves to others, or leading to depression, anxiety, or self-harm](#), social media bears some responsibility for the mental health challenges that children and young adults are facing.

Facebook's [own research](#) showed that, on Instagram, "the over-sexualization of girls as something that weighs on the mental health of the app's users." And search engine companies like Google [continue to steer](#) users to websites that promote self-harm.

These companies are profiting off the harm their platforms cause their users, and that has to stop. Sarah will support laws like the bipartisan [Kids Online Safety Act of 2022](#) which would require social media companies to prevent and mitigate harm to minors, require independent reviews of risk to minors and whether the company is "taking meaningful steps to prevent those harms."

III. SUPPORTING VETERANS' ACCESS TO MENTAL HEALTH CARE

Eighteen veterans a day [die](#) from suicide, and while Wisconsin's veteran suicide rate has [decreased](#) for the first time in 20 years, other mental health struggles persist. Eight years ago, Stevens Point Marine Corps veteran Jason Simcakoski died from an overdose as the result of [improper medical care](#) he received at the Tomah VA Medical Center. Sen. Tammy Baldwin and Rep. Ron Kind succeeded in enacting [legislation](#) to improve veteran care, but there is still so much more that needs to be done to ensure veterans suffering from addiction and mental health challenges and their families have the resources they need.

Increasing mental health screenings and augmenting mental health personnel

Sarah supports the Department of Veteran Affairs meeting the growing mental health needs of veterans by expanding professional hiring to include Licensed Professional Mental Health Counselors (LPMHCs) and Marriage and Family Therapists (MFTs). Sarah will work to continue federal funding for this program, as the Government Accountability Office found adding these roles has resulted in [more qualified mental health staff](#) available for veterans in rural areas.

In the Senate, Sarah will support continued funding for Rural Access Network for Growth Enhancement (RANGE) Program [centers](#) to better serve veterans in rural areas who are experiencing mental illness.

She also supports legislation to [hire additional mental health personnel at the VA and expand training on mental health issues](#), study post-traumatic stress disorder and traumatic brain injuries, examine mental health impacts, and support for military families.

Supporting innovative pilot and peer-run programs to help veterans

Sarah knows that innovative work is being done to help veterans improve their mental health. That's why she supports federally funded pilot programs like the [PAWS Act](#) and the [Commander John Scott Hannon Veterans Mental Health Care Improvement Act](#). Both address critical gaps in veterans' healthcare, specifically in rural communities. Sarah will not only vote to fund more programs like them in the Senate; she will advocate for future important pilot programs to get their start right here in Wisconsin.

Wisconsin has been leading the way in peer-run support services, even opening up the [first peer-run respite](#) for veterans. However, there are still not enough programs to meet the needs of Wisconsin's veterans.

IV. TACKLING THE FARMERS' MENTAL HEALTH CRISIS

American farmers face unique challenges in their occupations, between their physically demanding and somewhat isolated jobs, navigating and responding to extreme weather events, aging, and the stresses of economic uncertainty. The suicide rate for male farmers is [58 percent higher](#) than the national average among men.

Ensuring farmers have access to treatment

As with other medical care, mental health care is difficult to access in rural communities while insurance coverage constantly fluctuates, both of which create direct obstacles to farmers' seeking help. Forty-six percent of farmers and farmworkers say it is difficult to access a therapist or counselor in their local community. That means that we need to do a better job at meeting farmers where they are – which oftentimes is in their homes or through their trusted primary care providers. It also means sending farmers to care providers who are trained to address their changes in behavior and sleep in a manner which specifically factors in the larger rural and farming life.

As noted in her [rural plan](#), Sarah will work to increase investments in affordable and accessible mental health care, crisis hotlines, [virtual support groups](#) for farmers and farm families, farm crisis programs, and suicide prevention training for agriculture communities, as well as retailers, bankers and others who work and interact directly with farmers.

Expanding suicide prevention programs for farmers

In recent years there have been a number of suicide prevention programs developed for the farming community that Sarah will work to continue in the Senate. The American Psychological Association has partnered with federal agencies to create a [Farmer Stress](#) program that [provides assistance](#) with stress management, finding help and specific training for mental health providers working in farming communities. Sarah is committed to continued funding for modern suicide prevention and treatment programs for both the farming community and their mental health care providers.

Supporting peer-to-peer programs

Peer-led programs like the Wisconsin Women in Conservation program [Changing Our Mental and Emotional Trajectory \(COMET\)](#) are specifically suited to rural communities with a shortage of licensed mental health care professionals. Programs like COMET are funded in part by the U.S. Department of Agriculture's National Institute of Food and Agriculture competitive [grants](#), which are distributed through four regional agricultural hubs. Sarah will work to secure more competitive federal grants from the Departments of Agriculture and Health and Human Services to fund community-based programs that connect the agriculture community to mental health counseling.

V. ADDRESSING THE MATERNAL MENTAL HEALTH CRISIS

Mental health is a major concern for women both during and after pregnancy. At least [one in seven](#) women experience postpartum depression, with some studies suggesting even higher numbers. When mothers suffer, their families and newborns suffer, as does their ability to work and contribute to their own economic security.

Implementing national strategies to help new mothers

To help new mothers, Sarah supports creating [a federal taskforce and national strategy to improve maternal mental health outcomes and expand mental health resources for new mothers](#).

Sarah also supports making the [recently-launched](#) national Maternal Mental Health Hotline permanent. The [Into the Light for Maternal Mental Health and Substance Use Disorders Act of 2022](#) would codify the hotline to help pregnant and postpartum women affected by mental health and substance use disorders and would reauthorize and expand a grant program to screen and treat these individuals.

Providing support to new moms immediately after birth

Sarah also wants to be sure that hospitals and birthing centers are providing therapist or nurse mental health evaluations before new moms leave the hospital and one week after birth. Sarah would support legislation [requiring insurance companies to cover the cost](#) of maternal mental health screenings and in-home wellness visits for mothers within a week of giving birth.

She also wants to [increase home visiting programs](#) for new mothers, especially in rural and other at-risk geographic areas.

VI. PROVIDING RESOURCES FOR ADDICTION AND HOLDING BIG PHARMA ACCOUNTABLE

Opioids don't discriminate: the opioid epidemic affects [all genders, all races, and many age groups in both rural and urban communities](#). In 2020, Wisconsin saw [1,227 people die](#) from opioid-related causes. While the opioid crisis continues to rage across Wisconsin and the country, Wisconsin must also address the [most commonly used addictive substance in the state](#) - alcohol.

Treating opioid addiction

Sarah knows that families can't fight addiction alone. That's why she wants to enhance state [prescription drug monitoring programs](#) (PDMPs), which are databases which allow for tracking opioid prescriptions and responding to the opioid epidemic in real time. PDMPs vary tremendously from state to state in their accessibility and usability, which limits their efficacy. Sarah would support funding to integrate these programs with electronic health records, as well as improve PDMP accessibility, data analytics, and expand their scope to include more drugs than opioids.

She also wants to work to ensure that all first responders are able to carry the life-saving [overdose antidote naloxone](#).

More than [80 percent](#) of individuals who are incarcerated and have a history of opioid use do not receive treatment while in prison. That results in increased [opioid-related deaths and opioid-withdrawal syndromes](#) within correctional settings. To help curb the strain on prisoners and the correctional system, Sarah would work to remove barriers to [medication-assisted treatment](#) for opioid addiction.

Holding opioid manufacturers accountable

Drug overdoses kill more than 100,000 people in the U.S. every year. It's just wrong that the Sackler family made more than [\\$12 billion](#) in profit from OxyContin manufacturer Purdue Pharma. The economic toll of the opioid epidemic runs now more than [\\$1.3 trillion](#), and rising. In the Senate, Sarah will work to [hold opioid manufacturers civilly and criminally liable](#) for the damage they've caused to families across Wisconsin and the United States.

Tackling alcoholism

According to the University of Wisconsin Population Health Institute 2021 County Health Rankings, Wisconsin was "[the only state in the country where every county reported excessive drinking among 23% of its adult population or higher.](#)" Sarah will fight for increased funding for Substance Abuse and Mental Health Block Grants to provide more counseling and treatment for alcohol addiction.

VII. SAFEGUARDING OUR SENIORS' MENTAL HEALTH

As our population grows older and continues to live longer, [more seniors are living with serious mental illness](#) and our current health care systems are not prepared to handle our aging population. Older Americans are also [less likely to seek treatment](#) for mental health care for a variety of reasons, including

stigma, difficulties with access to trained providers, and misconceptions that depression and anxiety are simply a normal part of aging.

Expanding access to trained geriatric providers

Beyond the general lack of qualified mental health providers, there is also [a shortage of trained geriatric providers](#). Only a [very small percentage](#) of practicing psychologists and doctoral students specialize in aging and geropsychology. Sarah will work to provide incentives for psychologists and students to go into geriatric care. She also knows how important it is to meet seniors where they are and will work to expand telehealth and in-home healthcare.

Reducing the stigma surrounding mental health and misconceptions with aging

Sarah recognizes that the [stigma around mental health](#) can prevent seniors from getting treatment. Sarah also recognizes that older adults who are experiencing mental health issues may not receive the care they need due to misconceptions that those issues are a common part of aging. In the Senate, she will advocate for [funding for geriatric mental health and substance-use disorder research](#) across federal agencies.