

School Nurse UPDATE

FEATURED STORIES

PRACTICE POINTS – What We All Need to Hear

DHS Comprehensive
Testing Program (p. 5)

LGBTQ Inclusivity Self-
Assessment Tool (p. 8)

Mental Health Across
Developmental Stages (p.
12)

NAMI Training for Parents
(p. 14)

SAVE THE DATE

NASN2021 Conference –
Transforming Student
Health: School Nurses
Leading the Way
June 21 – June 25, 2021.
Registration now open.

New School Nurse Virtual
Orientation – October 21-
22, 2021. **Registration will
open in August.**



#14 May 20, 2021

Greetings and Wishes for Respite!

I am intrigued by my own personal and professional reactions to the [new Centers for Disease Control and Prevention \(CDC\) guidance](#) on fully vaccinated individuals. While professionally I am thrilled with the [effectiveness of both the vaccines](#) and the vaccination roll out, I find myself personally hesitant to embrace/practice [the new guidance](#). Why? I have vulnerable individuals that I am committed to protecting. Being the state school nurse consultant, that commitment is not just to my infant granddaughter, but to all the children who remain susceptible to the SARS-CoV2 virus and its mutations.

As noted in both the Department of Health Services (DHS) and CDC sections of this newsletter, **neither agency recommends any relaxation of mitigation measures for schools at this time.** The Department of Public Instruction (DPI) will continue to support and encourage school districts to follow the recommendations of these health agencies.

The Future of Nursing 2020-2030 is now available for [free download](#). Please read The Relentless School Nurse blog for more information on how **school nursing is highlighted in this new report!** The Oral Health Program at the Division of Public Health shared [this article](#) on how Wisconsin Seal-A-Smile **safely provided dental care to students during COVID-19.**

This will be a **final DPI Update newsletter for the 2020-2021 school year.** I will be revising and updating the COVID-19 School Health Services webpage and creating abbreviated back-to-school guidance based on CDC and DHS recommendations. I will communicate those changes, and any other information throughout the summer, via the email list.

PRACTICE POINTS gives permission to create work/life balance this summer and beyond. I desire that for all of us! Take care! This newsletter will return in late August.

Louise

DPI News

DPI Recruiting Committee Members to review Academic Standards for Nutrition

The current Academic Standards for Nutrition are due to be updated during the 2021-22 school year. DPI Nutrition and Education Consultant, Alicia Dill, RDN, CD, is identifying potential members for this writing committee. Because nutrition education is provided by many different school staff members, including school nurses, Alicia would like to include school nurses on the committee. Preferably, the school nurses would have knowledge, experience, and/or interest in nutrition education. If you are interested in this opportunity to shape the academic standards, please contact Louise Wilson:

louise.wilson@dpi.wi.gov.

Please Provide Input on Revisions to Wisconsin DPI Sample IEP Forms

DPI has put together a stakeholder folder and survey to get feedback on revisions to IEP forms that will be updated for the 2021-22 school year. Specifically, the DPI is planning to revise two types of IEP forms. First are revisions to the current “disability worksheets” to turn them into “disability category criteria IEP forms.” Please note that the “criteria” language on these forms reflects Wisconsin state rule PI 11.36. Although we are not permitted to share the forms for disability categories that are currently undergoing PI 11.36 rule changes until the rule is finalized and filed with the Legislative Reference Bureau, we are sharing those that are not undergoing rule changes so that you have an opportunity to provide input on the templates. Second, we are revising the current evaluation report (ER-1) form. The rationale for this revision is to assist IEP teams with conducting a comprehensive special education evaluation as required in the Individuals with Disabilities Education Act (IDEA). In addition, these revisions were designed to ensure IEP teams are only making eligibility determinations if a student needs specially designed instruction. Please share this survey with your colleagues and stakeholders from your respective organization and thank you for your feedback.

Additional information about these revisions is included on a “Stakeholder Review Information” document in the folder.

[Here is the link to the Draft IEP Forms. Here is the link to the survey.](#)

Note: **Revisions to all worksheets are highlighted in yellow.** This folder and feedback form will be open through the end of day **May 20**.



Nutrition education is provided by many different school staff members, including school nurses.

DPI News



Updated Logistical Considerations for Hosting Student School-located Vaccination Clinics

This document was revised after the Pfizer vaccine was approved for use in adolescents 12+ years of age. Additionally, the term “school-located” versus “school-based” clinic is now the preferred term as it better describes the use of school buildings to host clinics. [Here is the link](#) to the updated document.

DPI Forwards DHS Letter to Superintendents

On May 18, 2021, the DPI forwarded a letter to Wisconsin school administrators signed by the Department of Health Services Deputy Secretary & State Health Officer. The letter highlights the need to continue with all mitigation measures including physical distancing and mask wearing. *“All students, teachers, school administrators, and staff, regardless of vaccination status, should continue to practice physical distancing and wear masks at school and on the school bus until more people, including children, have been fully vaccinated against COVID-19. We need to continue to protect those who are not fully vaccinated, including young children who are not yet eligible for a vaccine.”* A copy of that email is located on [this](#) DPI webpage.

Wisconsin Center for Resilient Schools

The Wisconsin Center for Resilient Schools (WCRS) is collaborating virtually with district and school teams. Our unique location within the Wisconsin Department of Public Instruction and the Wisconsin Safe and Healthy Schools Center allows us to help teams navigate the many high-quality resources available across the state and nationally. The center supports teams to bring comprehensive school mental health and trauma sensitive, Social Emotional Learning (SEL) to full-scale implementation. Coaching is a relationship and, through a partnership with WCRS, we can support your team with reflection, growth, and refining structures and practices to shape beliefs and culture toward the vision in your school or district for optimal student outcomes. Our center, in collaboration with districts and schools builds on the strengths inherent in your system to take it from good to great!

This FREE resource is open to all public, private, charter, and tribal schools in the state of Wisconsin. For additional information please visit our [website](#). If interested in exploring a partnership with the WCRS, please fill out this [Inquiry Form](#).

The term “school-located” versus “school-based” clinic is now the preferred term as it better describes the use of school buildings to host clinics.

We need to continue to protect those who are not fully vaccinated, including young children who are not yet eligible for a vaccine.



DHS Post-vaccination Guidance for Schools

DHS updated their [post-vaccination guidance for schools](#) document to reflect expanded eligibility for students and align with the updated CDC guidance on masking for fully vaccinated individuals in school settings.

Due to Effectiveness of COVID-19 Vaccine, Fully Vaccinated People Can Resume Activities Without Masks

On May 13, the [Centers for Disease Control and Prevention \(CDC\) released updated guidance](#) that fully vaccinated people can resume activities they did before the pandemic, including participating in indoor and outdoor activities—large or small—without wearing a mask or physically distancing.

The [science is clear](#): If you are fully vaccinated, you are protected, and you can start doing the things that you stopped doing because of the pandemic. The COVID-19 vaccines are working in the real world. Studies show they are about 90 percent effective at preventing COVID-19 disease, hospitalization, and death.

The Wisconsin Department of Health Services (DHS) supports the newly-released guidance and encourages everyone to [get vaccinated against COVID-19](#) so they may begin returning to the activities they enjoy.

Respiratory Report

[The Weekly Respiratory Report](#) (detailing influenza data) is available and updated bi-weekly.

DHS has launched a new [webpage for parents and guardians](#) featuring information about COVID-19 and mental health resources. This new webpage features information about COVID-19 in children, including factors that may put children at a higher risk for severe illness from COVID-19 and possible long-term effects, and resources from DHS and the CDC to help parents and guardians navigate the COVID-19 pandemic with their children.

The COVID-19 vaccines are working in the real world. Studies show they are about 90 percent effective at preventing COVID-19 disease, hospitalization, and death.

DHS News

Comprehensive COVID-19 Testing Services Now Available for K-12 Schools for Spring and Summer 2021

The Wisconsin Department of Health Services (DHS) received federal funding to develop a program to support school-based COVID-19 testing for teachers, staff, students, and their families. Participation in this program is voluntary but encouraged to help provide access to testing throughout the state.

DHS Resources Currently Available to Support School-Based COVID-19 Testing

NEW: Comprehensive COVID-19 Testing Services

Comprehensive COVID-19 testing services are now available through approved partners during the Spring and Summer, ending August 31, 2021. These partners have worked with DHS to provide community testing to Wisconsin residents in the past year and are able to provide support for registration, specimen collection, result reporting, and patient notification. Schools should **not** be charged any amount by program participants.

To access this federally funded resource:

1. View the list of approved K-12 testing partners on the [DHS website](#). This list will be continuously updated as additional partners opt to make their services available.
2. Contact a testing partner serving your area to coordinate testing operations. Schools should work with testing partners to ensure they meet any necessary background check requirements and comply with FERPA regulations.
3. If you have any questions about this process, please contact dhsk12covidtesting@dhs.wisconsin.gov.

Order Point-of-Care Antigen Testing Supplies

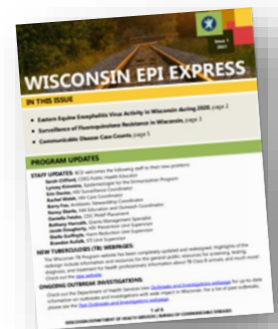
DHS is excited to share that our service offering to K-12 schools has expanded to include confirmatory PCR diagnostic services for schools with a CLIA Certificate of Waiver. A confirmatory PCR is required following a point-of-care antigen test in which a symptomatic individual tests negative or an asymptomatic individual tests positive.

If you are interested in receiving point-of-care antigen and/or accompanying confirmatory PCR testing supplies through DHS, please submit an order through <https://covid19supplies.wi.gov/Testing>. To order PCR testing supplies:

1. Select "Other Organization"
2. Under PCR Testing Supplies, select "Collection Supplies and Laboratory Services."
3. DHS suggests ordering a volume of PCR testing supplies equal to 25 percent of point-of-care antigen tests received.

Continued on next page

DHS News (cont.)



Order Point-of-Care Antigen Testing Supplies continued...

Upon receipt of your school's order DHS will contact you to answer clarifying questions and/or establish a relationship with a lab.

Directions for obtaining a CLIA Certificate of Waiver are available from the [Centers for Medicare and Medicaid Services](#). Confirmatory PCR testing is also available at health care providers and [community testing sites](#) across the state for schools who do not wish to offer this service on site.

Planning for Fall

DHS is developing a menu of testing options for the 2021-2022 school year. More information will be made available in June.

If you have any questions about this initiative, please reference the information on [Testing Support for Wisconsin Schools](#) provided on the [DHS COVID-19 Schools and Child Care page](#) or contact dhsk12covidtesting@dhs.wisconsin.gov.

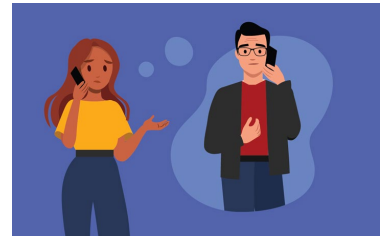
Wisconsin Epi Express (WEE) Newsletter is Here!

The WEE newsletter is a report on current communicable disease issues and program updates from the Bureau of Communicable Diseases (BCD). This newsletter is distributed electronically. Check out the [new issue!](#) For previous issues, please view the [Epi Express webpage](#)

Check out the Resilient Wisconsin Coloring Pages

Taking time to relax, reflect, and do something fun (like coloring!) can help people of all ages build resiliency. [Five Resilient Wisconsin coloring pages are available on the DHS website](#). Use them as a self-care tool. Share them with your friends, family, and clients. Post a photo of your completed coloring sheet(s) on your social media accounts using #ResilientWisconsin

DHS is developing a menu of testing options for the 2021-2022 school year. More information will be made available in June.



Important Update for Schools

CDC recently released guidance on the ability of [fully vaccinated people](#) to resume pre-pandemic activities without wearing a mask or physically distancing, except where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance. This guidance has raised questions for schools about how to proceed in the current school year. **CDC recommends schools continue to use the COVID-19 prevention strategies outlined in the current version of [CDC's Operational Strategy for K-12 Schools](#) for at least the remainder of the 2020-2021 academic school year.**

Recommendation for continuation with these prevention strategies is based on:

- ❑ **Students will not be fully vaccinated by the end of the 2020-2021 school year.** Youth under the age of 12 are not yet eligible for vaccination. Youth between the ages of 12 and 15 became eligible for vaccination on May 12, 2021. Because people are not fully vaccinated until two weeks after their second dose of the Pfizer vaccine, students in this age group will not be fully vaccinated before the end of current school year.
- ❑ **The time needed for schools to make systems and policy adjustments.** Systems and policy adjustments may be required for schools to change mask requirements for students and staff while continuing to ensure the safety of unvaccinated populations.

CDC will update its guidance for schools in the coming weeks. Updated guidance can inform school planning for the 2021-2022 academic year.

How to Talk About COVID-19 Vaccines with Friends and Family

COVID-19 vaccines are new, and it's normal for people to have questions about them. The sheer amount of information—and misinformation—about COVID-19 vaccines can be overwhelming to anyone. You can help by listening without judgment and identifying the root of their concerns. Acknowledge their emotions so they know they have been heard. Ask open-ended questions to explore their concerns, ask permission to share information, and help them find their own reason to get vaccinated. [More information.](#)

CDC recommends schools continue to use the COVID-19 prevention strategies outlined in the current version of CDC's Operational Strategy for K-12 Schools for at least the remainder of the 2020-2021 academic school year. CDC will update its guidance for schools in the coming weeks. Updated guidance can inform school planning for the 2021-2022 academic year.

CDC



Use of Cloth Face Masks Updated

The CDC has recently updated their [scientific brief](#) on the use of cloth face masks to control the spread of COVID-19. Data were added to further demonstrate that mask wearing reduces new infections and illustrate the importance of mask fit to improve performance and reduce exposure. A section was also added on the health effects of mask wearing.

CDC's [Operational Strategy for K-12 Schools through Phased Prevention](#) has not changed since the new CDC guidance on mask wearing, quarantining, and physical distancing for fully vaccinated individuals was published May 12, 2021.

When You've Been Fully Vaccinated [Webpage](#) Updated 5/16/2021

What We Know

- COVID-19 vaccines are effective at preventing COVID-19 disease, especially severe illness and death.
- COVID-19 vaccines reduce the risk of people spreading COVID-19.

What We're Still Learning

- How effective the vaccines are against variants of the virus that causes COVID-19. Early data show the vaccines may work against some variants but could be less effective against others.
- How well the vaccines protect people with weakened immune systems, including people who take immunosuppressive medications.
- How long COVID-19 vaccines can protect people.

As we know more, CDC will continue to update our recommendations for both vaccinated and unvaccinated people.

LGBTQ Inclusivity Self-Assessment Tool

This [self-assessment tool](#) provides a way for school staff to enhance supports for LGBTQ students by quickly assessing LGBTQ inclusivity across school environments. The tool, developed as a part of the [Survey of Today's Adolescent Relationships and Transitions \(START\) Project](#), also provides a collection of resources to help schools improve inclusivity after completing their assessments.

CDC's [Operational Strategy for K-12 Schools through Phased Prevention](#) has not changed since the new CDC guidance on mask wearing, quarantining, and physical distancing for fully vaccinated individuals was published May 12, 2021.

NASN News



Help Your School Nurses Do Their Job Better

As students return to school for the 2021-22 year, there will be challenges, and opportunities. The five-day agenda is filled with quality content that will help your school nurses respond. Leading the way in implementing return to school protocols and policies, addressing mental health challenges, and responding to and addressing health inequities are just a few of the key topics that will be addressed.

Participants will come away with these learning outcomes:

- Identify three emerging student health trends that impact their student population and a resource that can be used to learn more on those topics.
- Articulate three new evidence-based practices learned at conference that will be used to promote student health, social and academic success, or healthy communities.
- Identify three potential new partners/partnerships to collaborate with to advance student health and the role of the school nurse as a health leader in the school setting.
- Distinguish two ways current practice of care, data collection, or policy development differs from the information presented at conference and develop a plan to change at least one practice.
- Apply one new concept regarding advocacy and data that can be used to articulate to educators and decision-makers about the role of the school nurse in the 21st century.

Two Registration Options Give You Choices for Attending NASN2021

We are once again offering two registration options for NASN2021. Learn more below about the differences between the two:

Virtual NASN2021 | 24.25 CNE Contact Hours

- 14.5 + 6.0 CNE of sessions presented during a five-day schedule.
- If you miss the sessions when they are presented, you can still view them on your own time for 90 days following the conference.
- The + 6.0 CNE accounts for the six sets of concurrent sessions presented in the five-day schedule. You can view one when it is presented and still view the other on your own time for 90 days following the conference.
- 3.75 CNE of poster presentations you can view on your own time for 90 days (0.25 for each poster).

Virtual NASN2021 PLUS | 34.25 CNE Contact Hours

- All of the Virtual NASN2021 content (24.25 CNE contact hours described above).
- 10 CNE from additional courses you can view on your own time for 90 days.

[Register now.](#)

NASN News (cont.)

Podcast on Suicidality and Mental Health Among LGBTQ Youth

Martha Dewey Bergren, editor of The Journal of School Nursing, interviews author April Ancheta to discuss the article, "The Impact of Positive School Climate on Suicidality and Mental Health Among LGBTQ Adolescents: A Systematic Review." [Listen to the Podcast.](#)



Asthma at School: Coordination of Care in the Context of COVID-19

Join NASN and the Allergy & Asthma Network for a free webinar Thursday, June 3, 2021, at 4 p.m. EST to help you prepare for the next school year. [Register for webinar.](#)

The Relentless School Nurse

[The Relentless School Nurse: The Future of Nursing 2030 Report is Here & it Includes School Nursing!](#)

by Robin Cogan, MEd, RN, NCSN

The Future of Nursing 2030 is tasked with envisioning what nursing will become over the next decade. To be exact: "This committee will extend the vision for the nursing profession into 2030 and it will chart a path for the nursing profession to help our nation create a culture of health, reduce health disparities, and improve the health and wellbeing of the U.S. population in the 21st century." - retrieved from [National Academies SEM: The Future of Nursing 2020-2030](#)

- Using an evidence-informed crystal ball, what does school nursing need to provide to the students we serve in 2030?
- What must we do as a specialty practice to prepare for this quickly changing world?
- How can we create a safety net for our most impacted students and families?
- How will we measure our outcomes?
- Imagine a world where policy, budget, and staffing needs were no object, what could the school nurse provide to our students?
- What is the greatest barrier to health that our children face?

The Future of Nursing 2030 is tasked with envisioning what nursing will become over the next decade. What is the greatest barrier to health that our children face?

Miscellaneous

Infection Prevention and Control: Keeping Our Schools Safe for In-person Learning **12 p.m. CST May 21**

An informational webinar hosted by Harvard's Edmond J. Safra Center for Ethics, Brown School of Public Health, New America, and the COVID Collaborative to discuss resources to support schools and districts with integrating effective infection prevention and control into schools for this school year and the fall. [Register.](#)

Request from Board of Nursing

Rose Dolatowski, a retired school nurse who now sits on the Board of Nursing (BON), has requested that school nurses contact her with suggestions for renaming the BON newsletter currently titled NURSING FORWARD. The BON, for copyright issues, can no longer use the term "forward." If you have suggestions, please email Rose directly at: rosemary.dolatowski@gmail.com.

Voices of Wisconsin Students Project

The **Voices of Wisconsin Students** project is run by Dr. Sharon Belton at UW-Madison's Wisconsin Institute for Public Policy and Service (UW-WIPPS). The project is based on focus groups with middle and high school students from across the state about their mental health, coping strategies, and learning experiences during the pandemic. WIPPS is committed to making information relevant and actionable and they have published multiple materials in the past few weeks (reports, webinars, etc.), with more to come. If you are interested in accessing any of the Voices of Wisconsin Students project materials, you can find them [through this page](#)

Prevalence of Visual Acuity Loss or Blindness in the US

Prevent Blindness is supporting the release of an important new study in the *Journal of the American Medical Association - Ophthalmology (JAMA-O)* - [Prevalence of Visual Acuity Loss or Blindness in the US](#), from our colleagues at the Centers for Disease Control and Prevention, NORC at the University of Chicago, and the Institute for Health Metrics and Evaluation. The study finds that more than seven million people are living with uncorrectable vision loss, including more than one million Americans who are living with blindness. Prevent Blindness distributed this [press release](#), and they have created a number of infographics and a brief video to support the release (all of which can be found, along with the study itself, on the [study page of their website](#)).



The project is based on focus groups with middle and high school students from across the state about their mental health, coping strategies, and learning experiences during the pandemic.

Miscellaneous

Blog Post Outlining Impact of Mental Health Across Four Developmental Stages

Behavioral health encompasses mental health and emotional and psychological wellbeing and can profoundly impact children's overall health. This has become even clearer amid the COVID-19 pandemic. It is against this backdrop that we recognize **Mental Health Awareness Month**. In a new blog post, members of PolicyLab's Behavioral Health Portfolio collaborated with partners in Children's Hospital of Philadelphia's (CHOP) Department of Child and Adolescent Psychiatry and Behavioral Sciences and the Center for Violence Prevention to offer a **unique perspective on youth mental health during the pandemic, outlining the impact across four developmental stages, including:**

- Infants and toddlers
- Young children from preschool to second grade
- Children in third to seventh grade
- Teens

In addition to exploring developmental nuances, the new post discusses ways to increase access to care and reduce disparities by investing in mental health research and services that span all ages. [Read blog post.](#)

Child Safety Network Blog Post on Addressing Mental Health Among Youth to Reduce Suicide Risk

Mental health challenges, including depression and anxiety, and previous suicide attempts are common risk factors in youth suicide, while access to mental health services serves as a protective factor against youth suicide. Learn about the role state governments, schools, and families play in implementing equitable suicide prevention strategies to ensure youth receive the information and supports they need in CSN'S new blog, [Addressing Mental Health Among Youth to Reduce Suicide Risk](#).

CSN and our CSN-A partners have also recently released a new resource [Suicide Prevention Fact Sheet: Means of Suicide](#) which shares data on the means or mechanisms of suicide (e.g., firearm, poisoning, and suffocation) and comprehensive suicide prevention recommendations.



Mental health challenges, including depression and anxiety, and previous suicide attempts are common risk factors in youth suicide, while access to mental health services serves as a protective factor against youth suicide.

Miscellaneous

Your Choice Prevention Education Hosting Summer Webinars

Your Choice is excited to announce our 2021 Your Choice Summer Webinar Series. Many people have been asking for tips on how to talk to their teens about marijuana or how to share information about marijuana. If that was you, make sure you check out our July 13 session! That session will be geared specifically for adults and teenagers. We also had many people wanting to know more about Delta 8 THC. If you are wanting more information about Delta 8 THC, make sure you attend July 21. See attached flyer for lineup of speakers. [Register here.](#)

Firearms Policies to Protect Youth

Firearms are one of the leading causes of death for children. Despite calls for gun safety measures, advancing firearm research that could spur action on evidence-based policies to protect youth has proven difficult.

In new PolicyLab and Center for Violence Prevention (CVP) [resources](#), our experts examined available research on preventing unintentional firearm injury and death among youth. This analysis identified [policies](#) with a strong evidence base that could provide immediate protection for children, as well as policy alternatives that may hold promise but need more research prior to widespread implementation. These findings and related recommendations can inform discussions on how to move the needle on policies that have enough evidence behind them, and how we can build out research to fill in gaps for others.

Join PolicyLab and CVP on Thursday, May 27 from 12:30-1:45 p.m. ET for “Firearm Policies to Protect Youth: Building on Research to Inspire Action,” a virtual conversation with health care providers and policy and research experts to discuss questions such as: How can research advance firearm safety policy and how can leaders overcome challenges to get results? What role do pediatric settings and providers play and how would policy changes make a difference in initiatives like promoting safe firearm storage? How can community leaders shape research and policy to protect children from the dangers of firearms? [Register here.](#)

Summer Camp Nurse Positions

Contact Rick Whisenhunt of WhizResources at 214-709-5559 or www.whizresources.com if interested in their opportunities. WhizResources has several camps still looking for nurses for the upcoming summer! Rick says this is a great year to be a camp nurse:

- Money: Many camps are paying more than in previous years
- Duration: The session dates are as low as one or two weeks
- Children: Several camps allow the nurse to bring her children free of tuition
- Extras: Camps pay round-trip transportation, meals and lodging and license fees

Miscellaneous



NAMI Basics happening SATURDAYS, JUNE 12 - JULY 24, 9:00-11:30 A.M.

This virtual class is intended to reach parents and caregivers in more rural areas of Wisconsin that do not have a NAMI affiliate near them, or if their NAMI affiliate does not offer NAMI Basics.

What is NAMI Basics?

It is a six-session education program for parents, caregivers, and other family who provide care for youth (ages 22 and younger) who are experiencing mental health symptoms. This program is free to participants, 99 percent of whom say they would recommend the program to others. This class is taught by a trained team with lived experience raising a child with a mental health condition. They know what parents are going through because they've been there too.

NAMI Basics Covers:

- The impact mental health conditions can have on your entire family
- Different types of mental health care professionals, available treatment options and therapies
- An overview of the public mental health care, school, and juvenile justice systems and resources to help you navigate these systems
- How to advocate for your child's rights at school and in health care settings
- How to prepare for and respond to crisis situations (self-harm, suicide attempts, etc.)
- The importance of taking care of yourself
- Much, much more

See the flyers attached to this newsletter for the Virtual NAMI Basics class announcement, please share! **REGISTRATION REQUIRED.** If you register by June 2nd, you will receive class materials on time. We can take registrations after that time; the class materials just may not arrive before the first class date. Register **BY JUNE 2ND** in order to receive materials on time. For any specific questions or if a parent would like to register for this class, please have them contact Denise Fischer at 262.409.2723 or dfischer@namisoutheastwi.org.

This class is taught by a trained team with lived experience raising a child with a mental health condition. They know what parents are going through because they've been there too.

Wisconsin Asthma Coalition

WAC May Webinars

Registration is open for our May webinars:

- [“It’s Only a Test”](#) – Thursday, May 20, 12:00 p.m. – 12:30 p.m., presented by Jayne Windham, Livable Housing, Inc.
- [“The Evolving Science of Asthma”](#) – Tuesday, May 25, 1:00 p.m. – 2:00 p.m., presented by Allan T. Luskin, MD, Allergist and Immunologist, SSM Health and Dean Medical Center

Updated COVID-19 and Asthma Toolkit for Schools

The Asthma and Allergy Foundation of America (AAFA) has updated their [COVID-19 and Asthma Toolkit for Schools](#) based on new guidance from the Centers for Disease Control and Prevention (CDC). This resource supplements current district, state, and federal guidelines. It contains resources to help schools better manage asthma while addressing COVID-19 prevention.

CDC Updated Guidance for People with Moderate to Severe Asthma and COVID-19

The CDC has provided [updated guidance](#) for people with moderate to severe asthma and COVID-19, including information on vaccines and how to reduce your chance of an asthma attack while cleaning your home or business facility.



It contains resources to help schools better manage asthma while addressing COVID-19 prevention.

School Based Health Alliance

The School-Based Health Alliance and the National Association of School Nurses released the following statement: “School Nursing & School-Based Centers Working Together for Student Success.” [Read the statement here.](#)

CDC New Releases

When You've Been Fully Vaccinated How to Protect Yourself and Others

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>

Choosing Safer Activities <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/pdfs/choosingSaferAct.pdf>

Pediatric Healthcare Professionals COVID-19 Vaccination Toolkit
<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/pediatrician.html>

SARS-CoV-2 Variant Classifications and Definitions
<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/variant-surveillance/variant-info.html>



Immunization Action Coalition

CDC published [The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine in Adolescents Aged 12–15 Years—United States, May 2021](#) in the May 14 issue of *MMWR Early Release*.

The Food and Drug Administration has approved a new [estrogen](#) for the first time in more than 50 years.

Medscape Nurses

FDA Approves Oral Contraceptive With New Estrogen

The Food and Drug Administration has approved a new [estrogen](#) for the first time in more than 50 years. The novel combined oral [contraceptive](#), marketed as Nextstellis, contains 3 mg [drospirenone](#) (DRSP) and 14.2 mg of estetrol (E4) in tablet form. Estetrol is an estrogen that is naturally produced during pregnancy but will now be produced from a plant source; it has not previously been used in oral contraceptives. [Read more.](#)

PRACTICE POINTS

By Louise Wilson

What We All Need to Hear

I could have given this blog numerous titles (Relaxation and Respite for School Nurses, How to Unwind After the COVID School Year, Relax- Really?). I am curious what ideas will be shared during the May 12th School Nurse Network meeting DPI hosts with School Health Associates and Val Hon, Portage school nurse. I bet there will be some great ideas shared! Ideas on how school nurses can structure their time, assign (not delegate) to others tasks that don't need advanced nursing knowledge to create capacity to do tasks and manage those responsibilities that do require a registered nurse's expertise and perspective. I hope you join the discussion or listen to the recording.

It seems as a nurse I never relax. I always have best case/worst case scenarios playing in my head. As a consultant there is always a meeting to attend, guidance to write or revise, emails to respond to, or phone calls to make. But, as a nurse, I understand how critically important it is for me to manage my workload so that I can truly relax (at least for a while!). The largest roadblock, hurdle, or barrier for me to "let go" and relax is giving myself permission to do so. Synonyms are allowance, authorization, consent, and sanction. So, after these unprecedented past 15 months (synonyms are novel, unheard-of, strange, crazy) we need to give ourselves and each other, permission to step away from the work, responsibilities, and duties our jobs and roles entail. No need to feel like you are not doing enough or need to always stay on top of every new piece of information. No need to look over your shoulder at what someone else is doing in their district. We have all done a [good job](#). If it helps, as the state school nurse consultant, I am giving you permission and sanctioning that **Wisconsin school nurses have earned a respite this summer!**

Of course, there will be things to do to prepare for the fall. Novel and evolving recommendations will need to be written, read and digested, decisions made, plans implemented. But, for a time over the summer, [Let It Go!](#)



Of course, there will be things to do to prepare for the fall. Novel and evolving recommendations will need to be written, read and digested, decisions made, plans implemented. But, for a time over the summer Let It Go!

This publication is available from:
Learning and Support
Student Services Prevention and Wellness Team
(608) 266-8857
<https://dpi.wi.gov/sspw/pupil-services/school-nurse>
May 2021 Wisconsin Department of Public Instruction

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School Nursing & School-Based Health Centers in the United States

Working Together for Student Success



School nurses and school-based health centers working together share a critical mission: protecting and advancing the health and well-being of our nation's school-age children. One does not replace the need for the other. Each has a distinct and complementary function.

What happens when school nurses and school-based health centers work together?

- Students' health, overall well-being, and academic success improve.¹
- Students acquire the health knowledge and skills they need to become independent in providing self-care.
- School absence rates decrease and graduation rates increase.²
- Student access to equitable health care increases, including health promotion, disease prevention, and illness management.
- Continuity of care occurs when health professionals coordinate with each other about student health needs. This frees educators to focus on teaching and allows parents/caregivers to remain at work.³

School-Based Health Centers

Bring a multidisciplinary healthcare team from local health organizations to provide an array of services to the school, in person and/or via telehealth, which may include:

- Primary care
- Prevention and early intervention
- Behavioral health counseling
- Oral health services
- Health education and nutrition counseling
- Lab work and prescriptions

Represent a shared commitment between schools and healthcare organizations to support the health, well-being, and academic success of students.⁴

Partner with school nurses to increase access to healthcare services that help students succeed in school and life.

Create a culture of health within the school community to include students, families, and school staff.

Are recommended by the CDC Community Preventive Services Task Force as an evidence-based intervention to address disparities in health and education outcomes.

Provide access to 6.6 million K-12 students (13%) from more than 2,500 school-based health centers in approximately 10,500 (10%) of public schools.⁵

Are typically funded by:

- Healthcare systems
- Grants (public and private)
- Insurance reimbursement

Learn more at www.sbh4all.org

School Nurses

Bring a multidisciplinary healthcare team from local health organizations to provide an array of services to the school, in person and/or via telehealth, which may include:

- identifying and addressing mental health issues
- leveling the field on health disparities and promoting healthy behaviors
- enrolling children in health insurance and connecting families to healthcare providers
- handling medical emergencies.⁶

Advocate for equitable, student-centered school health policies, programs, and procedures.

Lead the school health services team to address actual or potential barriers to student health and academic success.

- Develop, implement, and evaluate a student's individualized healthcare plan and emergency care plan.
- Collaborate with health and education leaders to design systems that allow students and school communities to develop their full potential.

Serve as public health sentinels within and across school populations:

- Monitor for symptoms of disease
- Screen for early detection of conditions that can lead to adverse health and academic outcomes.
- Mitigate potential health issues and school emergencies.

Provide access to individual students and entire school population; more than 95,000 nurses are employed full time in 39.3% of schools.⁷

Are typically employed by schools and districts, and paid with regular or special education funds.⁸

Learn more at www.nasn.org

Why should schools have both a school nurse and a school-based health center?

School nurses and school-based health centers assume leadership roles to advocate for healthcare & education reform, which includes funding and reimbursement, policy development/implementation, as well as a uniform data set.

Communication that is reciprocal and respectful helps to ensure continuity of healthcare services inside and outside the school setting. This allows both the school nurse and the School Based Health Center to work together toward a common health goal for the student.

School nurses and school-based health centers coordinate care, thus providing the best student-centered care possible, and ensuring the student is healthy, safe, and ready to learn.

School nurses and school-based health centers work collaboratively to address both social needs and to advocate as partners for systems level changes to help alleviate social determinants to health and their causes. The "social determinants of health" refers to the conditions in which people are born, live, learn, play, work, age, and worship, as well as what kind of access they have to healthcare services. Together these affect a wide range of health functions and overall quality-of-life outcomes.

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4. Love HE, Schlitt J, Soleimanpour S, Panchal N, Behr C. Twenty Years Of School-Based Health Care Growth And Expansion. *Health Affairs (Millwood)*. 2019;38(5):755-764.
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YOUR CHOICE SUMMER SERIES

All events will be held virtually via Zoom Webinar from 11:30 am - 1:00 pm CST. Registration is FREE, but required. CEUS or certificates of completions are available for a fee of \$15.

Register at yourchoiceprevention.org/summerseries

June

29

“GROWING UP WITH CHRIS FARLEY: STORIES AND THE LESSONS LEARNED”



Tom Farley, Community Relations Coordinator, Rosecrance

Tom Farley talks about everything from having to share a bedroom with his younger brother and the environments they grew up in... to the pain of watching a family member struggle with addiction. Finally, Tom talks about the lessons learned, including his own journey to recovery.

July

6

YOUTH ADDICTION 101: MIND, BODY, AND FAMILY IMPACT



Aaron Weiner, PhD, ABPP

In a social ecosystem where nicotine and marijuana use rates continue to rise year after year, it's more important than ever for caregivers to understand addiction and what they can do to help protect, or to help, their children.

July

13

MARIJUANA: WHAT TEENS AND PARENTS SHOULD KNOW



Ben Cort, CEO Foundry Steamboat Springs

The need for continuing education regarding the evolution of cannabis and new forms of consumption as well as potential downsides is an extremely important conversation. This session, geared toward parents and teens, will be held in a nonpolitical and respectful manner.

July

21

EVERYTHING YOU WANTED TO KNOW ABOUT DELTA 8 THC



Nic Place, Police Officer/DRE Instructor

Delta 8 Tetrahydrocannabinol (THC) is the drug trend of 2021. Retailers advertise Delta 8 THC products as a lighter version of marijuana, and they have popped up everywhere, from gas stations to CBD stores. Despite its rise in popularity, there are still many questions about Delta 8 THC, from its pharmacodynamics to its legality.

July

27

DISAPPEAR FEAR: EFFECTIVE STRATEGIES TO COMBAT ANXIETY



Patric W. Mattek, Ph.D.

Anxiety is something that everyone experiences. Sometimes, however, anxiety can be extreme and significantly impact the daily functioning of children and adolescents. This talk will help participants understand the nature of anxiety and offer many practical strategies that can be utilized at home and in school to aid kids with anxiety issues.

Suicide is death caused by self-directed injurious behavior with intent to die.¹ Suicide is a complex and preventable multi-factor, multi-level health outcome. Effective prevention requires understanding data such as who is at risk and the factors associated with suicide. This fact sheet shares data on the means of carrying out a suicide act, also referred to as mechanisms of suicide (e.g., firearm, poisoning, and suffocation). Case fatality rates for means of suicide are also included. This fact sheet is intended to guide comprehensive suicide prevention programs and provides:

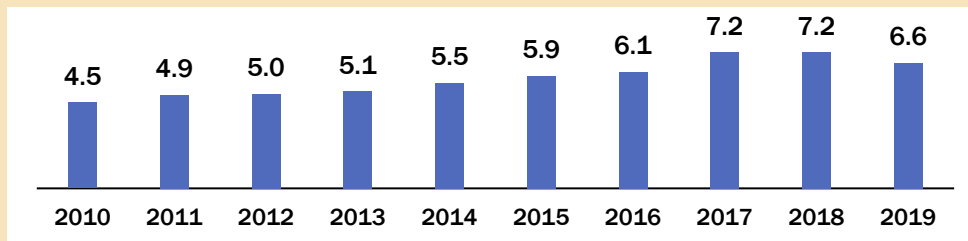
- Data on adolescent suicide rates among U.S. adolescents aged 10-19 years
- Data on means of suicide among U.S. adolescents aged 10-19 years
- Resources and guidance for adolescent suicide prevention

This fact sheet can help guide the work of prevention programming by informing where and how interventions may be targeted to reduce adolescent suicide.

Data on Adolescent Suicide

Suicide is the second leading cause of death in adolescents aged 10-19 years, claiming the lives of approximately 3,000 adolescents each year.² Death by suicide exerts a heavy emotional, physical, and economic toll on families and communities. According to one estimate, approximately 135 people are affected by each suicide death.³

Suicide Rate Per 100,000, U.S. Adolescents Aged 10-19



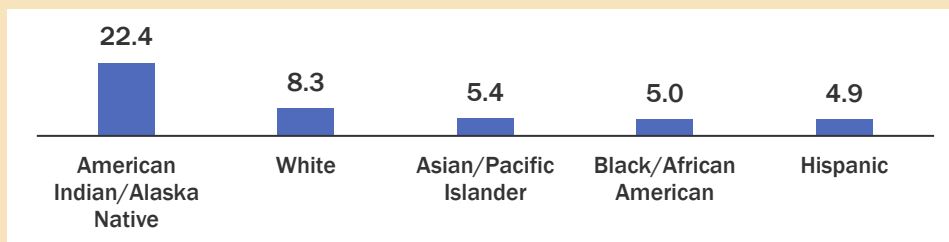
Data Source: National Center for Health Statistics (NCHS), Multiple Cause of Death, 2010-2019

The rate for adolescent suicide increased dramatically from 4.5 deaths per 100,000 in 2010 to 6.6 in 2019.

This increasing trend is statistically significant, representing on average about 5.3 percent change annually.

Nationally, the suicide death rate is 6.6 per 100,000 adolescents. However, certain groups experience a disproportionate rate of suicide.

Suicide Rate Per 100,000, U.S. Adolescents Aged 10-19 by Race/Ethnicity



Data Source: NCHS, Multiple Cause of Death, 2017-2019

The suicide death rate is highest for American Indian/Alaska Native (AI/AN) adolescents at nearly 2.5 times the rate for White adolescents.

¹ National Institute of Mental Health, 2020

² Centers for Disease Control and Prevention, 2020

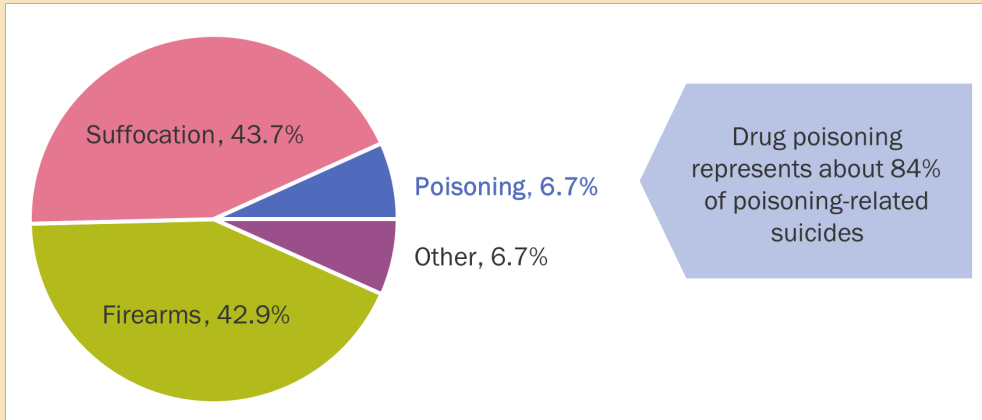
³ Cerel et al., 2019

Means of Adolescent Suicide

Among U.S. adolescents, the most common means of carrying out a suicide act are:

- Suffocation
- Firearms
- Poisoning

Adolescent Deaths by Suicide Mean



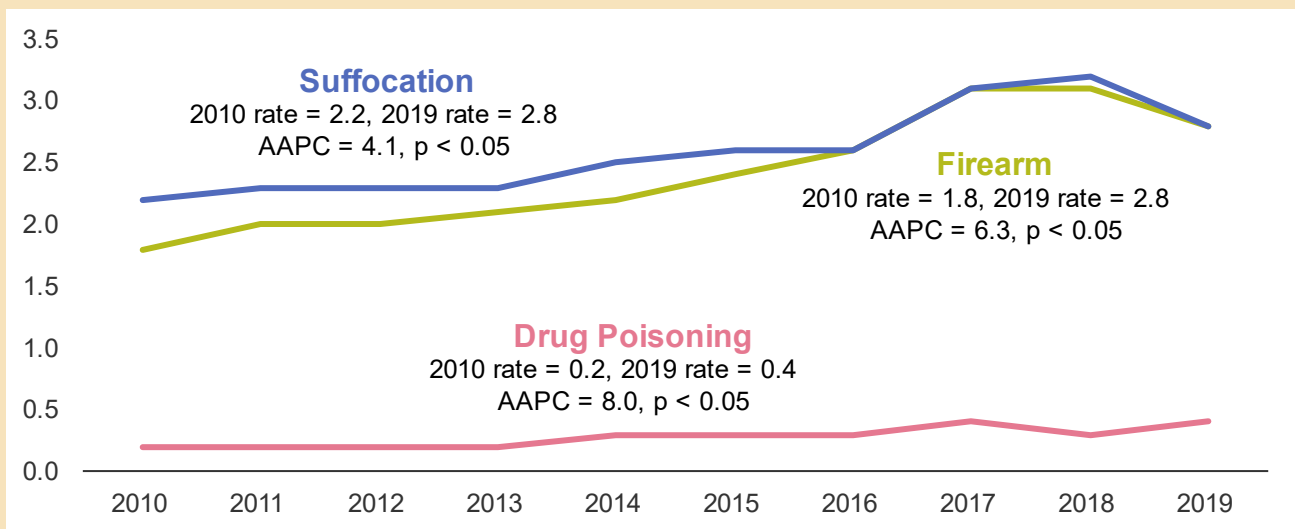
Slightly more than 93% of all adolescent suicides are attributable to three means—suffocation (43.7%), firearms (42.9%), and poisoning (6.7%).

Note: Other means of suicide include drowning, fall, and other specified or classified.

Data Source: NCHS, Multiple Cause of Death, 2017-2019

From 2010 to 2019, the suicide death rate by firearms increased 56% among adolescents in the U.S. The growth is about 6.3% per year on average. The rates have increased by approximately 27% for suffocation and doubled for drug poisoning. For suffocation, the growth rate is about 4.1% per year on average, and for drug poisoning it is about 8.0% per year on average.

Suicide Death Rate Per 100,000 Adolescents Aged 10-19, US 2009-2018



AAPC = Average Annual Percent Change; $p < 0.05$ denotes a statistically significant trend.

Data Source: NCHS, Multiple Cause of Death, 2017-2019

Case Fatality Rate by Suicide Means

Suicide Mean	Case Fatality Rate
Firearm	78.0%
Suffocation	57.1%
Drug Poisoning	0.2%

Data Sources: NCHS, Multiple Cause of Death, 2018;
Healthcare Cost and Utilization Project, 2018

Suicide death rates by mean are a function of several factors, including the lethality of means. Firearms are the most fatal method. Case fatality ratios (i.e., a measure of the proportion of cases that are fatal) were highest if suicidal means were firearms (78.0%) and suffocation (57.1%).

Guidance for Suicide Prevention

Comprehensive suicide prevention efforts are needed to address risk and protective factors at the levels of the individual, home/family, neighborhood, and larger social environment (e.g., schools, health care system).^{4,5,6}

Guidance for Preventing Adolescent Suicide

Focus on homes in prevention efforts. Common means used by adolescents to commit a suicide act often involve means found in the adolescents' homes.

Restrict access to lethal means. Lifesaving approaches may include:

- Safe storage of guns, which includes use of a gun safe or gun lock and bullets stored separately
- Disposing of leftover drugs, tracking family's medications, and blister-packing all opioids and other potentially lethal drugs, including prescribed and over-the-counter medications
- Installing break-away closet bars and lowering the height of anchor points to prevent suffocation

Train and support providers, hotline workers, practitioners, and caregivers around means of suicide, regular screening for suicide risk, and how to work with adolescents and caregivers on lethal means safety

Promote evidence-based practices, such as

- Social support and connectedness
- Access to health services
- Development of life skills
- Development of interpersonal social-emotional skills

Reduce stigma around help-seeking behavior

Focus on a comprehensive approach that uses multiple strategies to reduce risk factors and increase protective factors

Use an equity lens to address suicide disparities

⁴ Office of the Surgeon General and National Action Alliance for Suicide Prevention, 2012

⁵ Scott, Azrael, & Miller, 2018

⁶ Stone et al., 2017

Suicide Prevention Resources

[Suicide and Self-Harm Prevention Change Package \(Children's Safety Network\)](#)

This change package uses a driver diagram to identify key drivers and select evidence-based or evidence-informed strategies and programs to prevent adolescent suicide. The change package also provides recommended measures to monitor program improvement.

[Preventing Suicide: A Technical Package of Policies, Programs, and Practices \(Centers for Disease Control and Prevention\)](#)

This suicide prevention technical package includes strategies based on the best available evidence to prevent suicide. The package emphasizes the importance of providing access and delivery of suicide care, creating protective environments, promoting connectedness, teaching coping and problem-solving skills, identifying and supporting people at risk, and lessening harms and preventing future risk.

[Crisis Text Line:](#)

Text HOME to 741741

[National Strategy for Suicide Prevention \(Office of the Surgeon General, U.S. Department of Health & Human Services\)](#)

This report guides suicide prevention actions in the U.S. It focuses on four strategic directions with 13 goals and 60 objectives meant to work together in a synergistic way to prevent suicide in the nation.

[Suicide Best Practices: National Center Guidance Report \(National Center for Fatality Review and Prevention\)](#)

This resource highlights health equity consideration in suicide prevention work. It includes key questions and considerations for groups working to reduce suicide among children and adolescents.

[Suicide Prevention Resource Center](#)

Provides comprehensive resources and information on suicide prevention in diverse settings and populations, including extensive information on lethal means safety and youth suicide prevention.

[National Suicide Prevention Lifeline:](#)

800-273-TALK (8255)

References

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- Office of the Surgeon General and National Action Alliance for Suicide Prevention. (2012). *2012 National Strategy for Suicide Prevention: Goals and Objectives for Action: A Report of the U.S. Surgeon General and of the National Action Alliance for Suicide Prevention*. US Department of Health & Human Services (US).
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ATTENTION WISCONSIN PARENTS!

Want to know more about raising a child who has mental health or behavioral difficulties?



NAMI Basics is now available state-wide for parents and caregivers of children and adolescents living with mental health, emotional, and behavioral difficulties.

- explore the causes of behavioral difficulties
- discover the critical role families play in treatment
- learn effective coping skills for yourself and your child

This course is offered at no cost and taught by trained teachers with lived experience.

JUNE 12TH - JULY 24TH
SATURDAYS, 9:00-11:30 A.M.

NO CLASS JULY 3RD. REGISTRATION REQUIRED BY JUNE 2ND.

QUESTIONS? CONTACT DENISE:

262.409.2723 | DFISCHER@NAMISOUTHEASTWI.ORG



This virtual NAMI Basics class is made possible by [NAMI Wisconsin](#). Priority registration will be given to those living in parts of Wisconsin without a local NAMI affiliate or for those whose local NAMI affiliate does not offer NAMI Basics. Learn more:

WWW.NAMISOUTHEASTWI.ORG/BASICS





BEING TOGETHER



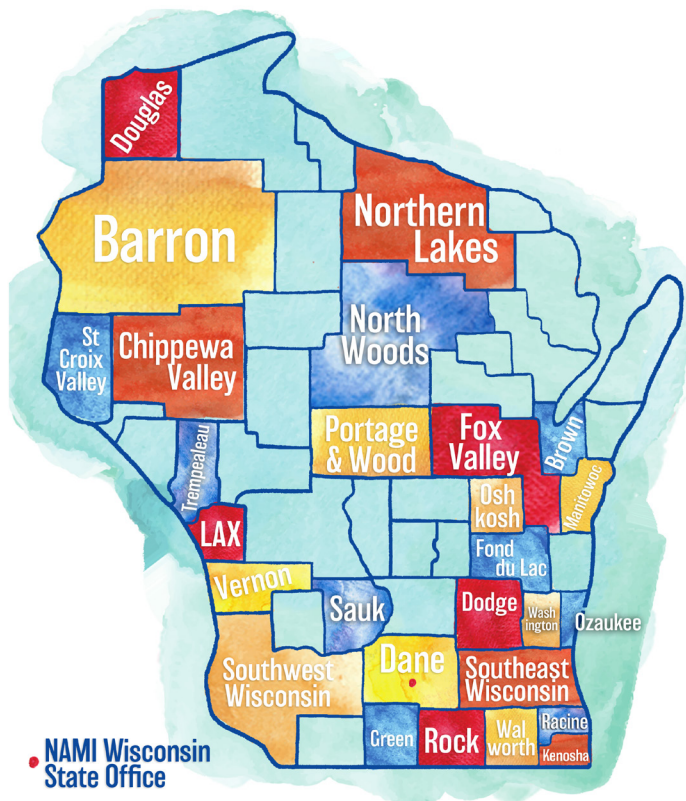
NAMI Wisconsin

State-wide virtual mental illness support groups

Welcome from NAMI Wisconsin. We would like to applaud you for seeking information on resources and support on behalf of yourself or a family member's mental health. NAMI Wisconsin is the state affiliate of the National Alliance on Mental Illness and we have 28 local affiliates across Wisconsin who serve their communities. The local NAMI affiliates offer support groups, resources and classes to help people living with a mental illness, family, friends and providers, whose goals are to improve the quality of life and care of those navigating the mental health system.

Being Together - NAMI Wisconsin, provides online support groups and classes for individuals across the state who do not have a local NAMI Affiliate or do not have certain support groups or classes provided by their local affiliate. This is a way to bring those in need of support together, regardless of their location. These support groups and classes are open to anyone in need within Wisconsin.

We recommend that if you have a local affiliate in your area, to start their first, so you can get connected with local resources in your county. Then, branch out if needed for support groups not available at your affiliate. You may register for the support group or class by using the link, email address, or phone number provided on this handout.



NAMI Wisconsin State Office

NAMI Wisconsin Affiliates with Virtual Support Groups

(updated 3/30/21)

- Brown County
- Dane County
- Douglas County
- Fond du Lac
- Fox Valley
- La Crosse
- Northwoods
- Portage-Wood Counties
- Racine
- Rock County
- Southeast Wisconsin
- St. Croix Valley
- Vernon
- Washington County



NAMI Wisconsin Peer Support Groups

NAMI Wisconsin Peer Support Group offers peer support in a safe and caring environment. Each support group is led by trained facilitators who have moved forward in their recovery journey with the support of their peers.

Every Monday

5:30 - 7:00 PM

NAMI La Crosse

zoom.us/j/98224185504

2nd Tuesday of the Month

6:00 - 7:30 PM

NAMI Rock County

lindsay@namirockcounty.org

4th Wednesday of the Month

6:00 - 7:00 PM

NAMI Northwoods

naminorthwoods@gmail.com

Every Monday

6:00 - 7:30 PM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

Every Wednesday

6:00 - 7:00 PM

NAMI Vernon

zoom.us/j/94431060817

Every Thursday

1:00 - 2:30 PM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

2nd & 4th Monday of the Month

6:00 - 7:30 PM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

Every Wednesday

6:00 - 7:30 PM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

1st Thursday of the Month

6:15 - 7:45 PM

NAMI Portage Wood Counties

kayjewellmd@gmail.com

4th Monday of the Month

6:15 - 7:45 PM

NAMI Portage Wood Counties

kayjewellmd@gmail.com

Every Wednesday

2:00 PM

NAMI Racine

nsmart@namiracine.org



Wisconsin Family Support Groups

Free, confidential, and safe 90-minute weekly support groups open to any family or friends of an individual living with a mental health diagnosis. Groups follow a flexible structure without an educational format. Join a caring group of peers that offer support through their learned wisdom. Participants can share as much or as little as they wish.

1st Monday of the Month

6:30 - 8:00 PM

NAMI Portage-Wood Counties

John: [715-326-0527](tel:715-326-0527)

2nd Monday of the Month

6:00 - 7:30 PM

NAMI Portage-Wood Counties

Carrie: [715-323-4437](tel:715-323-4437)

2nd Monday of the Month

6:00 - 8:00 PM

NAMI La Crosse

forms.gle/BcwwzRF9pdku6SQ87

2nd Monday of the Month

6:30 - 8:00 PM

NAMI Southeast Wisconsin

sschoenmarklin@namisoutheastwi.org

4th Monday of the Month

7:00 - 8:00 PM

NAMI Northwoods

naminorthwoods@gmail.com

Every Tuesday

9:30 - 11:00 AM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

1st & 3rd Tuesday of the Month

6:00 PM

NAMI Racine

nsmart@namiracine.org

2nd Tuesday of the Month

6:00 - 7:30 PM

NAMI Rock County

lindsay@namirockcounty.org

3rd Tuesday of the Month

6:30 - 7:30 PM

NAMI Southeast Wisconsin

dfischer@namisoutheastwi.org

3rd Tuesday of the Month

7:00 - 8:30 PM

NAMI St. Croix Valley

namiscv@gmail.com

2nd Wednesday of the Month

7:00 - 8:00 PM

NAMI Northwoods

naminorthwoods@gmail.com

4th Wednesday of the Month

6:30 - 8:00 PM

NAMI Southeast Wisconsin

sschoenmarklin@namisoutheastwi.org

Every Thursday

6:00 - 7:00 PM

NAMI Vernon County

Linpwood@yahoo.com

Every Thursday

6:30 - 8:00 PM

NAMI Chippewa Valley

www.namicv.org/our-programs.html

Every Thursday

7:00 - 8:30 PM

NAMI Fox Valley

forms.gle/BcwwzRF9pdku6SQ87

1st & 3rd Thursday of the Month

6:30 - 8:00 PM

NAMI Dane County

namidanecounty.org/covid19

3rd Thursday of the Month

6:30 - 8:00 PM

NAMI Fond du Lac

forms.gle/WDCaZwsjKJ1s5BGi8



NAMI Wisconsin Specialty Support Groups

Free, confidential, and safe 90-minute weekly support groups open to any family or friends of an individual living with a mental health diagnosis. Groups follow a flexible structure without an educational format. Join a caring group of peers that offer support through their learned wisdom and participants can share as much or as little personal information as they wish.

Adult Asperger's Support Group

NAMI Southeast Wisconsin
plucas@independencefirst.org

Bipolar/Depression Support Group

Every Monday
6:30 - 8:00 PM
NAMI Dane County
namidanecounty.org/covid19

Connecting Support Group

2nd & 4th Sunday of the Month
6:30 - 8:00 PM
NAMI Dane County
namidanecounty.org/covid19

Horizon Grief Resource Center

Thursdays
12:30 - 2:00 PM
NAMI Southeast Wisconsin
[414-586-8313](tel:414-586-8313)

Men's Support Group

1st Monday of the Month
6:00 - 7:30 PM
NAMI Fox Valley
forms.gle/BcwwzRF9pdku6SQ87

Overeaters Anonymous

NAMI Southeast Wisconsin
publicinformation@oamilwaukee.org

Parent/Caregiver Support Group

1st & 3rd Wednesday
6:30 - 7:30 PM
NAMI Fox Valley
dfischer@namisoutheastwi.org

Parent/Caregiver Support Group

1st & 3rd Thursdays
7:00 - 8:30 PM
NAMI Fox Valley
forms.gle/BcwwzRF9pdku6SQ87

Safe Harbour Peer Support Group

1st & 3rd Thursdays
10:00 - 12:00 PM
NAMI Southeast Wisconsin
safeharbor@hcl.org

Survivors Helping Survivors

2nd Tuesday
7:00 - 9:00 PM
NAMI Southeast Wisconsin
jsmith@namisoutheastwi.org

Teen Peer Group

Every Tuesday
4:30 - 6:00 PM
NAMI Fox Valley
forms.gle/BcwwzRF9pdku6SQ87

Teen Talk

1st & 3rd Wednesday
6:30 - 8:00 PM
NAMI Dane County
namidanecounty.org/covid19

Women's Depression/Anxiety Support Group

1st & 3rd Wednesday
6:30 - 8:00 PM
NAMI Dane County
namidanecounty.org/covid19

Women's Support Group

3rd Monday of the Month
6:00 - 7:30 PM
NAMI Fox Valley
forms.gle/BcwwzRF9pdku6SQ87

Young Adult Support Group

1st & 3rd Sunday
6:30 - 8:00 PM
NAMI Dane County
namidanecounty.org/covid19

Young Adult Support Group

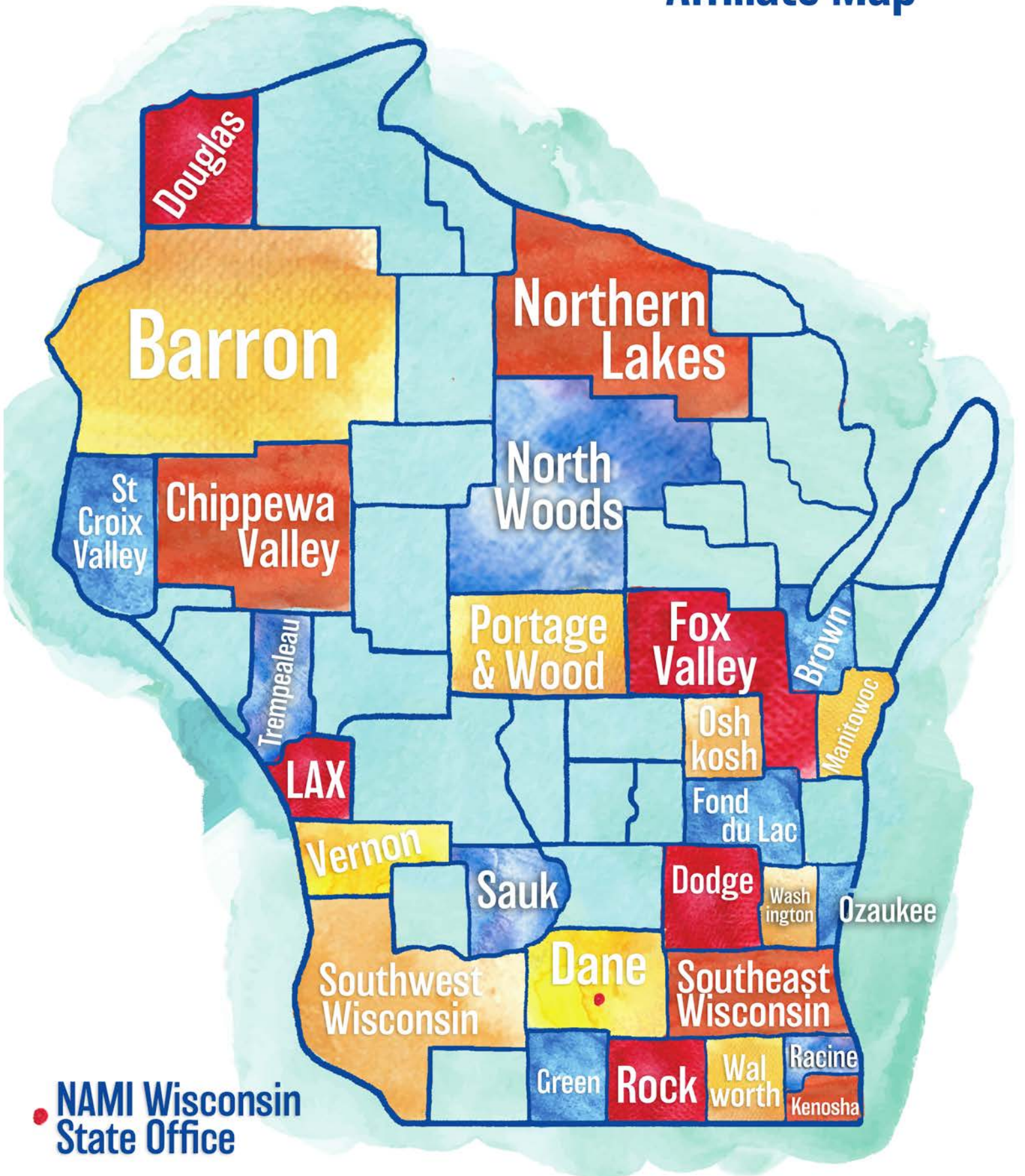
1st & 3rd Wednesday
6:00 - 8:00 PM
NAMI Fox Valley
forms.gle/BcwwzRF9pdku6SQ87



National Alliance on Mental Illness

Wisconsin

Affiliate Map



NAMI Wisconsin
State Office