National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program Data Profile Report

Maryland(Baltimore City)

Prepared by the National Evaluation Team, August 2011







Instruments Reported in This Report

This report is based on data provided by caregivers and youth on the instruments listed below:

Caregiver
 Enrollment and Demographic Information Form (EDIF) Caregiver Information Questionnaire, Revised (CIQ-R)
Living Situations Questionnaire (LSQ)
•Child Behavior Checklist 6 to 18 (CBCL 6-18)
 Columbia Impairment Scale (CIS) Education Questionnaire-Revision 2 (EQ-R2)
•Behavioral and Emotional Rating Scale (BERS-2C)
•Caregiver Strain Questionnaire (CGSQ)
•Multi-Sector Service Contacts (MSSC-R)
 Preschool Behavioral and Emotional Rating Scale (PreBERS) Devereux Early Childhood Assessment (DECA -C)
•Youth Services Survey for Families (YSS-F)

Number Table

	BERS-20	BERS-2Y	CBCL-O	CBCL-Y	CCSP	CGSQ	CIQ	CIS	DS-R	EDIF[a]	EQ-R	PSI	GAIN	LSQ	MSSC-R	RADS-2	RCMAS	SUS-R	PreBERS	DECA-I	DECA-T	DECA-C	YIQ	YSS-F	YSS-Y
intake	11	9	11	0		11	11	11	9	75	11	2	8	11	11	9	8	9	0	0	0	0	9		
6 Month	8	5	8	0	8	8	8	8	5	31	8	2	5	8	8	5	5	4	0	0	0	0	5	8	5
12 Month	1	1	1	0	1	1	1	1	1	7	1	0	1	1	1	1	1	1	0	0	0	0	1	1	1
18 Month	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24 Month	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	BERS-20	BERS-2Y	CBCL-O	CBCL-Y	CCSP	CGSQ	CIQ	CIS	DS-R	EDIF[a]	EQ-R	PSI	GAIN	LSQ	MSSC-R	RADS-2	RCMAS	SUS-R	PreBERS	DECA-I	DECA-T	DECA-C	YIQ	YSS-F	YSS-Y
int + 6 Month	3	1	3	0		3	3	3	1	31	3	0	0	3	3	1	0	0	0	0	0	0	1		
int + 12 Month	1	0	1	0		1	1	1	0	7	1	0	0	1	1	0	0	0	0	0	0	0	0		
int + 18 Month	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
int + 24 Month	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
int+6m+12m	1	0	1	0		1	1	1	0	7	1	0	0	1	1	0	0	0	0	0	0	0	0		
int+6m+12m+18m	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
int+6m+12m+18m+24m	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		

[a] The CIUF is considered to be the follow-up instrument to the EDIF, so they are presented together.

Data Explanations

- The number of cases reported in each slide varies, depending on the data available.
- Summary statistics based on fewer than 10 cases are not reported. When all summary statistics on a slide are based on fewer than 10 cases, the entire slide is not included.
- When data for follow-up timeframes are reported, the number of cases reported include only cases with complete follow-up data for all timeframes.
- When the number of cases reporting data for a timeframe is less than 30, that timeframe is not included.

Section I: Child and Family Status at Intake

This section provides a detailed description of the children and families being served by CMHS-funded systems of care. Information in this section was gathered at intake using the following instruments:

Enrollment and Demographic Information Form (EDIF): The EDIF gathers demographic, diagnostic, and system of care enrollment information on all children receiving CMHS-funded system of care services. Information for the EDIF is gathered from record review and caregiver report.

Caregiver Information Questionnaire Revised–Intake (CIQ–RC-I): The CIQ-RC–I is administered to caregivers and gathers additional demographic information, as well as information on risk factors, family composition, custody status, service use history, and presenting problem(s) for children enrolled in the Longitudinal Child and Family Outcome Study.

Demographic Characteristics of Children Served[a]

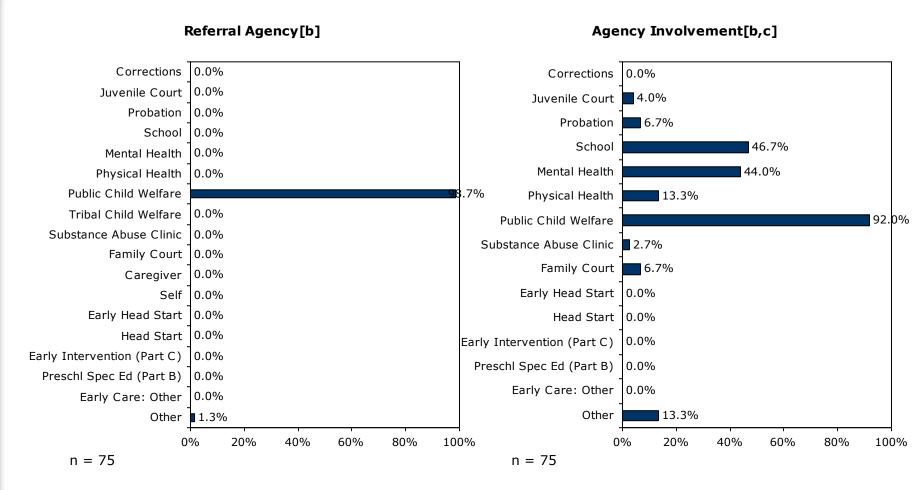
Demographics							
Gender (n = 75)							
Male	38.7%						
Female	60.0%						
Don't Know/Not sure	0.0%						
Average Age at Intake (n = 75)							
Average Age	14.6 years						
Age Group (n = 75)	-						
Birth to 3 years	0.0%						
4 to 6 years	1.3%						
7 to 11 years	22.7%						
12 to 14 years	24.0%						
15 to 18 years	50.7%						
19 to 21 years	1.3%						
Race/Ethnicity (n = 75)							
American Indian or Alaska Native	0.0%						
Asian	0.0%						
Black or African American	94.7%						
Native Hawaiian or Other Pacific Islander	0.0%						
White	2.7%						
Hispanic/Latino	1.3%						
Multi-Racial	1.3%						
Other							

[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

Data are from the CMHS National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program. This report is based on data submitted through August 10, 2011.

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Intake Referral Information and Agency Involvement[a]



[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

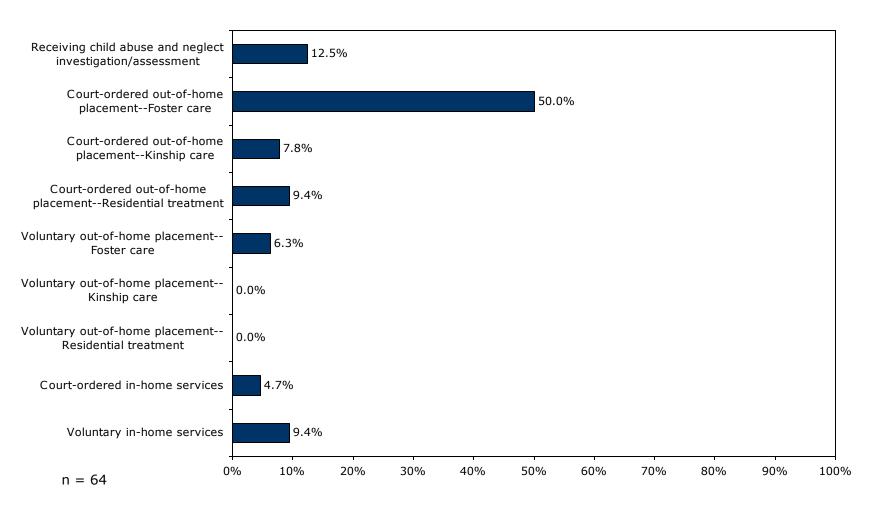
[b] Mental health = Mental health agency, clinic or provider; Physical health = Physical health care agency, clinic, or provider.

[c] Because individuals may report involvement in more than one agency, percentages may sum to more than 100%.

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Child Welfare Involvement[a]



[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF). Percentage reported is based on those whose Agency Involvement was public child welfare.

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DSM-IV Axis I and Axis II Diagnoses[a]

Diagnosis[b] (n = 58)	%
Mood Disorders	72.4%
Attention-Deficit/Hyperactivity Disorders	50.0%
V code[c]	25.9%
PTSD and Acute Stress Disorder	20.7%
Oppositional Defiant Disorder	19.0%
Mental Retardation	12.1%
Other	12.1%
Substance Use Disorders[d]	6.9%
Adjustment Disorders	5.2%
Conduct Disorders	5.2%
Disruptive Behavior Disorder	3.4%
Learning, Motor Skills, and Communication Disorders	3.4%
Personality Disorders	3.4%
Impulse Control Disorders	3.4%
Schizophrenia and Other Psychotic Disorders	3.4%
Pervasive Developmental Disorders	1.7%
Anxiety Disorders	0.0%
Substance Induced Disorders	0.0%

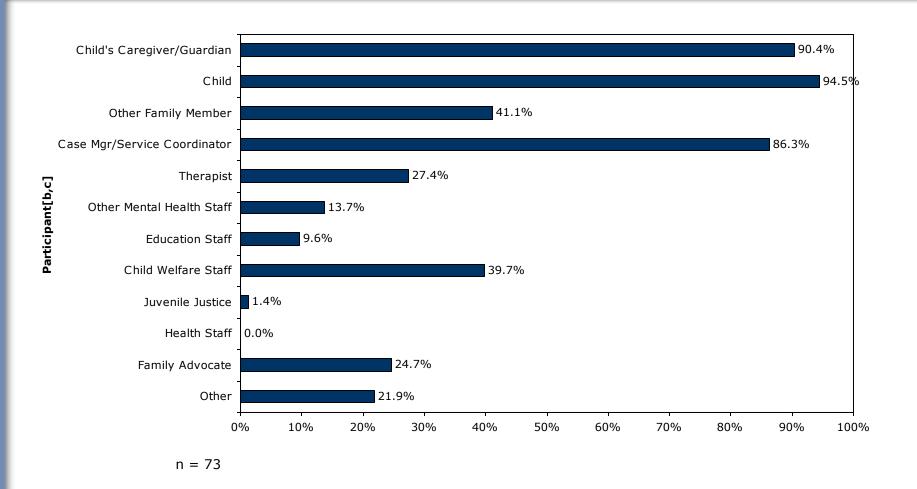
[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

[b] Because youth may have more than one diagnosis, percentages for diagnoses may sum to more than 100%.

[c] V Code refers to Relational Problems, Problems Related to Abuse or Neglect, and additional conditions. Percentage excludes V71.09 (No Axis I or II diagnosis).

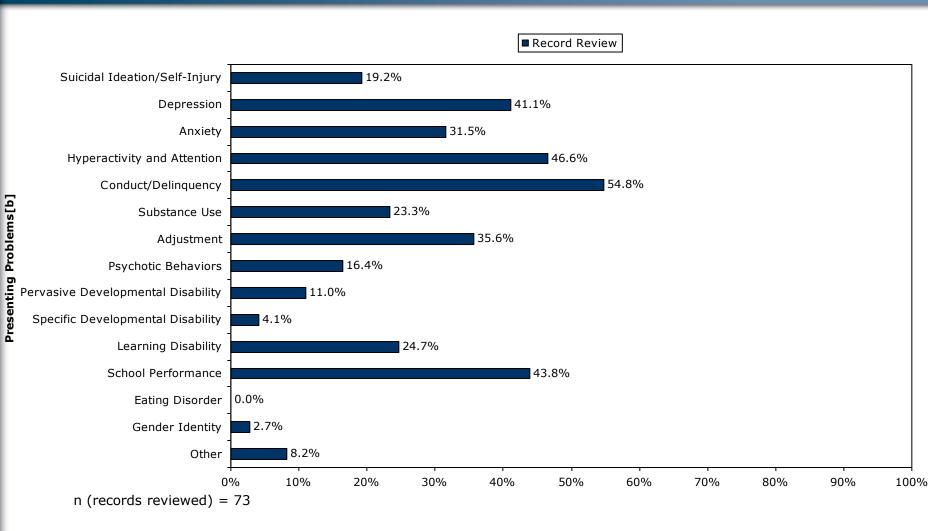
[d] Substance Use Disorders include caffeine intoxication.

Participation in Development of Service Plan[a]



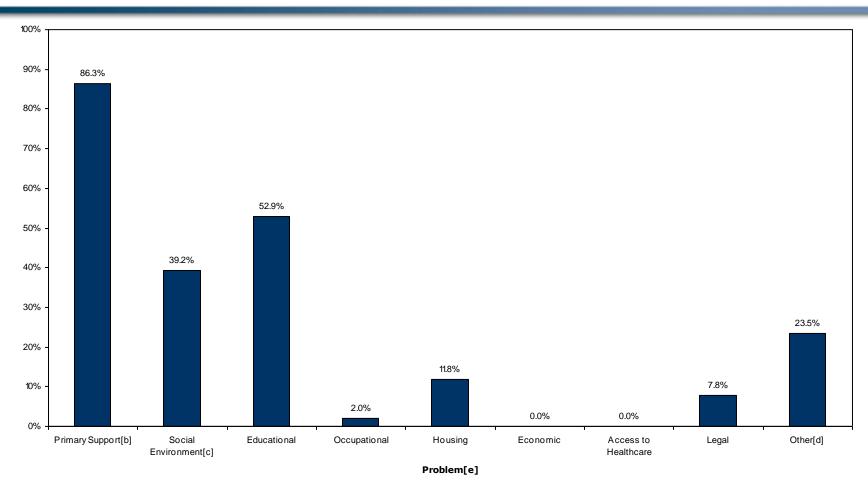
[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).
[b] Because more than one participant may be involved in the development of the service plan, percentagess may sum to more than 100%.
[c] Other includes School Resource Officer, Teacher, Psychiatrist, Youth Advocate, Foster Home Staff, AmeriCorp Worker, School Principal, and Big Brother.

Presenting Problems_[a] Reported



[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF) and Youth Information Questionnaire, Revised-Intake (YIQ-R-I) [b] Because youth may present with more than one problem, percentages may sum to more than 100%.

DSM-IV Axis IV: Psychosocial and Environmental Problems[a] at Intake



n = 51

[a] Data reported were collected using the Enrollment and Demographic Information (EDIF).

[b] Primary support problems include health problems in family, removal from the home, remarriage or divorce of parent, and child abuse or neglect.

[c] Social environment problems include inadequate social support, death or loss of a friend, and adjustments to life-cycle transitions.

[d] Other problems include discord with non-family caregivers, unavailability of social service agencies, and exposure to disasters.

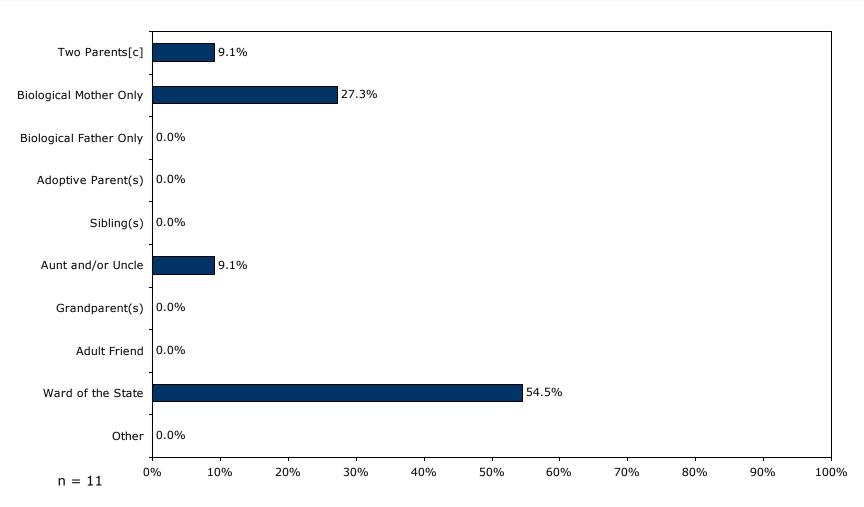
[e] Because youth may experience more than one psychosocial or environmental problem, problems may sum to more than 100%.

Family and Child History[a]

Has the child ever	
Witnessed domestic violence?	
Lived with someone who was depressed?	
Lived with someone who had a mental illness, other than depression?	
Lived with someone who was convicted of a crime?	
Lived with someone who had a substance abuse problem?	
Experienced physical assault? $(n = 11)$	27.3%
Experienced sexual assault? (n = 11)	9.1%
Run away? (n = 11)	45.5%
Had substance abuse problems? ($n = 11$)	18.2%
Attempted suicide? $(n = 11)$	27.3%

[a] Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I).

Custody Status[a,b] at Intake



[a] Data reported were collected using the Caregiver Information Questionnaire–Intake (CIQ–I).
 [b] Custody Status is collected on the CIQ and refers to legal custody. This may not reflect living arrangement, which is collected on the LSQ.
 [c] Includes two biological parents, or one biological parent and a step or adoptive parent.

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Children's Physical Health Problems_[a] at Intake

Caregiver report indicated that 54.5% of 11 children had recurring or chronic physical health problems

Type of recurring or chronic physical health problems [b] (n=11)	%
Allergies	27.3%
Asthma	9.1%
Cancer	0.0%
Cerebral palsy	0.0%
Diabetes	9.1%
Epilepsy	0.0%
Migraine headaches	0.0%
Heart condition	9.1%
High blood pressure	0.0%
Overweight	0.0%
Sickle cell anemia	0.0%
Spina bifida	0.0%
Thyroid problems	0.0%
Other	0.0%
In the past 6 months percentage of (n=6)	
Children who took medication because of physical health problems	83.3%
Children whose regular activities (such as school, social activities, etc.) have been disrupted because of recurring or chronic physical health problems	33.3%

[a] Data reported were collected using the Caregiver Information Questionnaire–Revised: Caregiver–Intake (CIQ–RC-I). [b] Because a child may have more than one physical health problem, percentages may sum to more than 100%.

Routine Physical Exam and Health Care Provider[a] at Intake

Caregiver report indicated that 90.0% of 10 children had a routine physical health exam in the past 6 months.

Children with primary health care provider $(n=11)$	100.0%
Who is the provider of primary health care? $(n=11)$	
Pediatrician	72.7%
Physician other than a pediatrician	9.1%
Physician's assistant	9.1%
Nurse practitioner	0.0%
No consistent primary health care provider	0.0%
Tribal healer/alternative health practitioner	0.0%
Other	9.1%

[a] Data reported were collected using the Caregiver Information Questionnaire-Revised: Caregiver-Intake (CIQ-RC-I).

Demographic Characteristics of Caregivers[a]

Demographics	
Gender (n=11)	
Male	9.1%
Female	90.9%
Age in years (n=11)	
Less than 35 years	18.2%
35 - 49 years	45.5%
50 and above	36.4%
Race (n=11)	
American Indian or Alaska Native	0.0%
Asian	0.0%
Black or African American	100.0%
Native Hawaiian or Other Pacific Islanders	0.0%
White	0.0%
Hispanic/Latino	0.0%
Multi-Racial	0.0%
Education (n=11)	
Below High School	45.5%
High School Diploma or GED	18.2%
Associate Degree/Some College	18.2%
College Degree (BA, MA, PhD,)	18.2%

[a] Data reported were collected using the Caregiver Information Questionnaire-Revised: Caregiver-Intake (CIQ-RC-I).

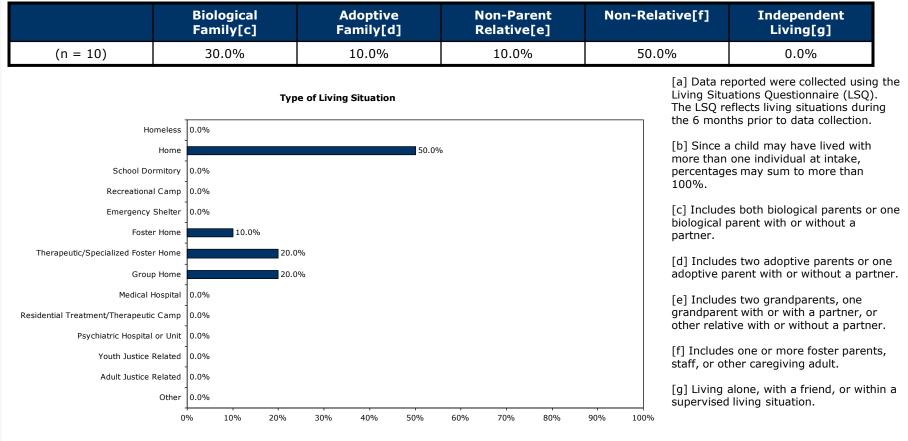
Section II: Living Situation

This section provides information on children's living situations. Information in this section was taken from the **Living Situations Questionnaire (LSQ)**.

The LSQ is administered to caregivers and gathers information on where the child was living in the past 6 months, with whom the child was living, and number of days in each living situation.

Living Situations[a] at Intake

Child Lives With[b]



n = 10

Section III: Education

This section provides information on children's education status and experiences in school. Information in this section was taken from the **Education Questionnaire Revision 2 (EQ-R2)**.

The EQ–R2 is administered to caregivers. It gathers information on school attendance, grade level, academic performance, school settings, Individual Education Plans, extracurricular activities, and disciplinary actions for children and youth enrolled in the Longitudinal Outcome Study. The questions cover all levels of schooling from prekindergarten to postsecondary institutions such as colleges and vocational/trade schools.

Educational Placements and Individualized Educational Plans (IEP)[a] at Intake

Educational Placements						
Educational Placements in the 6 Months Prior to Intake[b] $(n = 10)$						
Regular Public Day School	60.0%					
Regular Private Day/Boarding School	0.0%					
Home Schooling[c]	0.0%					
Home based instruction[c]	0.0%					
Alternative/Special Day School	50.0%					
School in 24-Hour psychiatric Setting[d]	0.0%					
School in 24-Hour justice Setting[d]	0.0%					
School in 24-Hour residential treatment Setting[d]	0.0%					
Postsecondary School	0.0%					
Preschool	0.0%					
Head Start	0.0%					
Other	10.0%					

[a] Data reported were collected using the Education Questionnaire–Revision 2 (EQ–R2). This instrument collects data on the status of the child/family in the 6 months prior to the interview.

[b] Because individuals may have more than one educational placement, educational placements may sum to more than 100%.

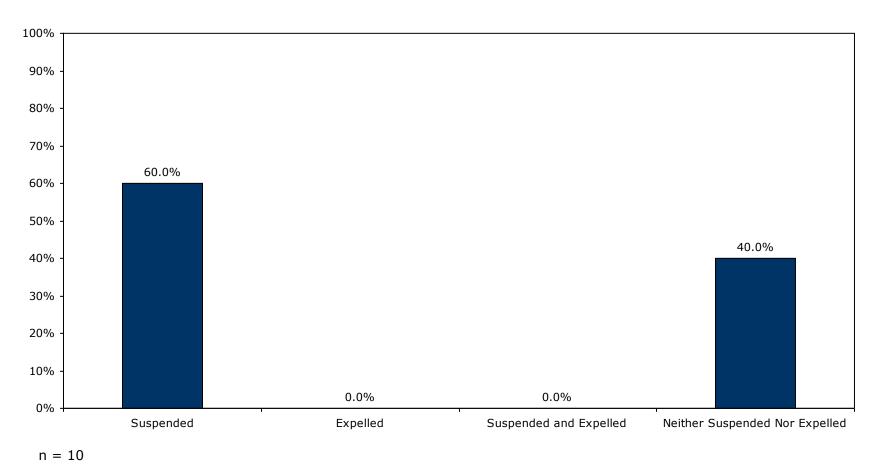
[c] Includes home-based instruction and combination of home schooling and home-based instruction.

[d] Includes hospital, juvenile justice facility, residential treatment center, group home, and group shelter.

[e] Because individuals may have more than one reason for having an IEP, the reasons for having an IEP may sum to more than 100%.

School Disciplinary Actions[a] at Intake

Disciplinary Actions in the Past 6 Months



[a] Data reported were collected using the Education Questionnaire–Revision 2 (EQ–R2). This instrument collects data on the status of the child/family in the 6 months prior to the interview.

Section IV: Child Clinical Measures

This section provides clinical information on the children participating in the Longitudinal Outcome Study. Information on functional impairment, depression, and anxiety is presented, along with information on children's behavioral and emotional problems. Finally, measures of children's behavioral and emotions strengths are included in addition to measures of adaptive behaviors. Information in this section was taken from the following instruments:

Columbia Impairment Scale (CIS): The CIS, administered to caregivers, provides a global measure of impairment. CIS scores range from 0 to 52. Higher scores indicate a greater level of impairment. A score of 15 or higher is considered clinically impaired.

Section IV: Child Clinical Measures, continued

Child Behavioral Checklist (CBCL 6–18): The CBCL 6–18 is administered to caregivers and measures behavioral and emotional problems in children aged 6 to 18. The CBCL 6–18 produces eight narrow-band syndrome scores: anxious/depressed, withdrawn/depressed, somatic complaints, social problems, thought problems, attention problems, rule-breaking behavior, and aggressive behavior; two broadband syndrome scores: internalizing and externalizing; and a total problem score. T-scores between 65 and 69 (93rd and 97th percentile) on the narrow-band syndrome scales are in the borderline clinical range. T-scores 70 or above are in the clinical range. On the internalizing, externalizing, and total problem scales, T-scores between 60 and 63 (84th and 90th percentile) are in the borderline clinical range. T-scores 64 or above are in the clinical range.

The CBCL is also comprised of three competence subscales, as well as a Total Competence scale. Higher scores on the competence scales indicate greater competence. The three competence subscales have a T-score range from 20 to 65, with scores under 30 in the clinical range (i.e., less competence) (2nd percentile), scores between 31 and 36 in the borderline clinical range, and scores over 36 below the clinical range (i.e., greater competence). The Total Competence scale has a T-score range from 10 to 80, with scores under 37 in the clinical range (i.e., less competence), scores between 37 and 40 in the borderline clinical range (i.e., greater competence).

Section IV: Child Clinical Measures, continued

Behavioral and Emotional Rating Scale–Second Edition, Parent Rating Scale (BERS–2C): The BERS–2C is administered to caregivers. It measures children's emotional and behavioral strengths in six different areas: interpersonal strength, family involvement, intrapersonal strength, school functioning, affective strength, and career strength. Scaled scores on the strength subscales range from 1 to 16, with an average score between 8 and 12. Higher scores indicate greater strengths.

A strength index can be calculated and is based on the sum of the subscale scores, excluding career strength. The strength index ranges from 38 to 161, with an average index in the 90–110 range. A higher index indicates greater overall strengths.

Child Impairment and Anxiety and Adolescent Depression at Intake

Measure	Average Score	Clinical Impairment Range						
Columbia Impairment Scale[a]								
Overall Level of Impairment $(n = 11)$	17.8	15.0 - 52.0						

[a] Data reported were collected using the Columbia Impairment Scale (CIS), the Revised Child's Manifest Anxiety Scale, Second Edition (RCMAS-2), and the Reynolds Adolescent Depression Scale, Second Edition (RADS-2).

[b] The CIS collects data on the status of the child/family in the 6 months prior to the interview. The RCMAS-2 and the RADS-2 measure problems at the time of the interview and are administered to youth 11 years and above.

[c] Shaded cells indicate that no score ranges are applicable to these subscales.

Child Competence and Behavioral and Emotional Problems_[a] at Intake

Measure	CBCL 6-18 Average Score	Clinical Range				
Competence						
Social	43.2 (n = 10)	<30.0				
Activities	34.7 (n = 11)	<30.0				
School		<30.0				
Total Competence		<37.0				
Behavioral and Emotional F	Behavioral and Emotional Problems					
Social Problems	63.0 (n = 11)	>=70.0				
Thought Problems	63.7 (n = 11)	>=70.0				
Rule Breaking Behavior	66.1 (n = 11)	>=70.0				
Withdrawn	58.9 (n = 11)	>=70.0				
Somatic Complaints	58.4 (n = 11)	>=70.0				
Anxious/Depressed	58.6 (n = 11)	>=70.0				
Attention Problems	61.4 (n = 11)	>=70.0				
Aggressive Problems	64.8 (n = 11)	>=70.0				
Internalizing Problems	58.3 (n = 11)	>63.0				
Externalizing Problems	64.7 (n = 11)	>63.0				
Total Problems	63.3 (n = 11)	>63.0				

[a] The Child Behavior Checklist (CBCL) collects data on the status of the child/family in the 6 months prior to the interview.

Caregiver Report of Behavioral and Emotional Strengths[a] at Intake

Strength Subscale[b]	BERS-2C Average Score	BERS-2C n
Interpersonal Strength	6.7	10
Family Involvement	7.8	11
Intrapersonal Strength	9.4	10
School Functioning		
Affective Strength	8.3	11
Career Strength	10.7	11
Strength Index[c]		

[a] Data reported were collected using the Behavioral and Emotional Rating Scale–Second Edition, Parent Rating Scale (BERS–2C). This instrument collects data on the status of the child/family in the 6 months prior to the interview.

[b] Strength subscales on the BERS–2C range from 1 to 16. Average scores on both instruments range between 8 and 12. Higher scores indicate greater strength.

[c] Strength indexes for the BERS-2C range from 38 to 161, with an average index between 90 and 110. A higher index indicates greater overall strengths.

Section V: Caregiver and Family Measures

This section provides information on caregivers' perceptions of family functioning and the strain associated with caring for a child with behavioral and emotional problems. Information in this section was taken from the following instruments, which are administered to caregivers:

Caregiver Strain Questionnaire (CGSQ): The CGSQ assesses the extent to which caregivers are affected by the special demands associated with caring for a child with emotional and behavioral problems. The CGSQ is comprised of three subscales which range in severity from 0 to 5. Objective Strain refers to observable disruptions in family and community life (e.g., interruption of personal time, lost work time, financial strain). Subjective Externalized Strain refers to negative feelings about the child such as anger, resentment, or embarrassment. Subjective Internalized Strain refers to the negative feelings that the caregiver experiences such as worry, guilt, or fatigue. Higher scores on each of these scales indicate greater strain. A Global Strain score is calculated by summing the three subscales (i.e., Objective Strain, Subjective Externalized Strain, and Subjective Internalized Strain) to provide an indication of the total impact of the special demands on the family. Global Strain scores range from 0 to 15. As with the individual subscales, higher scores indicate greater strain.

Caregiver Strain at Intake

Caregiver Strain Questionnaire Subscales[a]	Average Score	Range
Objective Strain (n = 11)	1.9	1 to 5
Subjective Externalized Strain (n = 11)	1.7	1 to 5
Subjective Internalized Strain ($n = 10$)	3.0	1 to 5
Global Strain (n = 10)	6.6	1 to 15

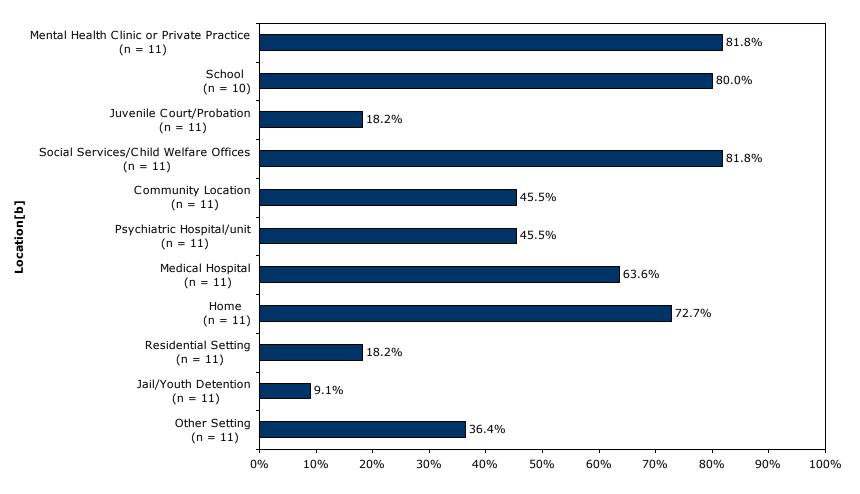
[a] Data reported were collected using the Caregiver Strain Questionnaire (CGSQ). The range in scores for each subscale is 1 to 5; the range in scores for the Global Strain scale is 1 to 15. Higher scores indicate greater strain. This instrument collects data on the status of the caregiver in the 6 months prior to the interview.

Section VI: Service Experience

This section provides information on the service experiences of children, youth, and families in systems of care. Information from this section was taken from the instruments listed below. All instruments are administered to caregivers with the exception of the Youth Service Survey, which is administered to youth aged 11 and older. These instruments are administered only after the families had been enrolled in a system of care program for 6 months with the exception of Multi-Sector Service Contacts-Revised.

Multi-Sector Service Contacts–Revised (MSSC–R): The MSSC–R identifies the services received, the service setting/location, and satisfaction with services delivered. It captures information on services received by both youth and their families.

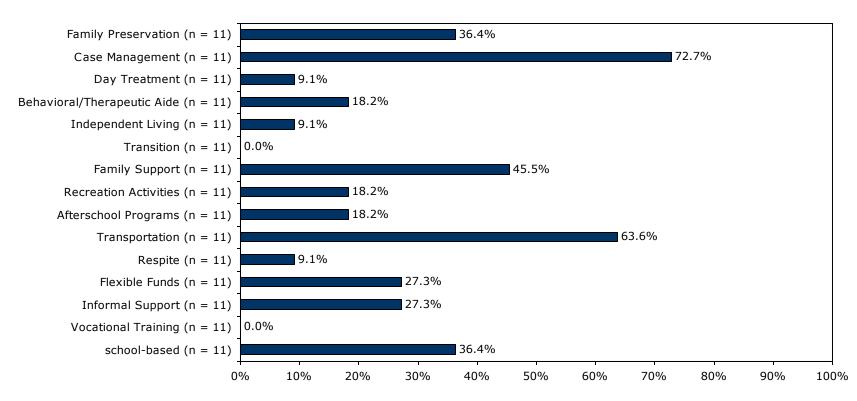
Service Setting/Location[a] at Intake



[a] Data reported were collected using the Multi-Sector Service Contacts-Revised (MSSC-R) questionnaire. This instrument collects data on the services received by the child/family in the 6 months prior to the interview.
 [b] Because participants can have received services in multiple settings, percentages may sum to more than 100%.

Child and Family Service Use[a] at Intake

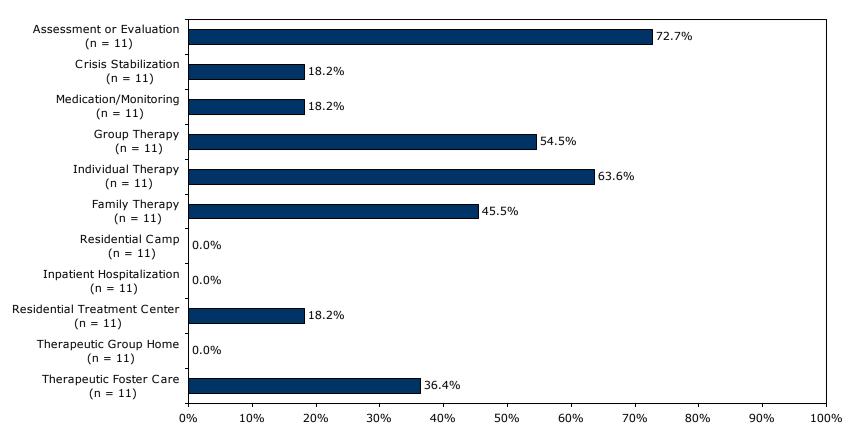
• Caregiver reports indicated that, on average, children received 7.2 types of services at intake (n = 11).



Support Services

[a] Data reported were collected using the Multi-Sector Service Contacts-Revised (MSSC-R) questionnaire. This instrument collects data on the services received by the child/family in the 6 months prior to the interview.

Child and Family Service Use[a] at Intake



Outpatient & Inpatient Services

[a] Data reported were collected using the Multi-Sector Service Contacts–Revised (MSSC–R) questionnaire. This instrument collects data on the services received by the child/family in the 6 months prior to the interview.

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