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

#### **Maryland (Eastern Shore)**

Prepared by the National Evaluation Team, April 2012





## **Instruments Reported in This Report**

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

Caregiver	Youth (11 years and older)
<ul><li>Enrollment and Demographic Information Form (EDIF)</li><li>Caregiver Information Questionnaire, Revised (CIQ-R)</li></ul>	Youth Information Questionnaire, Revised (YIQ-R)
Living Situations Questionnaire (LSQ)	
•Child Behavior Checklist 6 to 18 (CBCL 6-18)	<ul> <li>Revised Children's Manifest Anxiety Scale, 2nd edition (RCMAS-2)</li> <li>Reynold's Adolescent Depression Scale (RADS-2)</li> </ul>
<ul><li>Columbia Impairment Scale (CIS)</li><li>Education Questionnaire-Revision 2 (EQ-R2)</li></ul>	Substance Use Survey-Revised (SUS-R)  Delinquency Survey-Revised (DS-R)
•Behavioral and Emotional Rating Scale (BERS-2C)	Behavioral and Emotional Rating Scale (BERS-2Y)
•Caregiver Strain Questionnaire (CGSQ)	
Multi-Sector Service Contacts (MSSC-R)	

#### **Number Table**

	BERS-2C	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	34	30	32	0		34	34	33	30	94	34	8	30	34	34	30	30	30	0	0	0	0	28		
6 Month	7	5	8	0	7	7	7	7	5	45	7	0	5	7	7	5	5	5	0	0	0	0	5	7	5
12 Month	3	3	3	0	3	3	3	3	3	9	3	0	3	3	3	3	3	3	0	0	0	0	3	3	3
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-2C	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	7	5	7	0		7	7	7	5	45	7	0	5	7	7	5	5	5	0	0	0	0	5		
int + 12 Month	3	3	3	0		3	3	3	3	9	3	0	3	3	3	3	3	3	0	0	0	0	3		
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	3	3	3	0		3	3	3	3	9	3	0	3	3	3	3	3	3	0	0	0	0	3		
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.

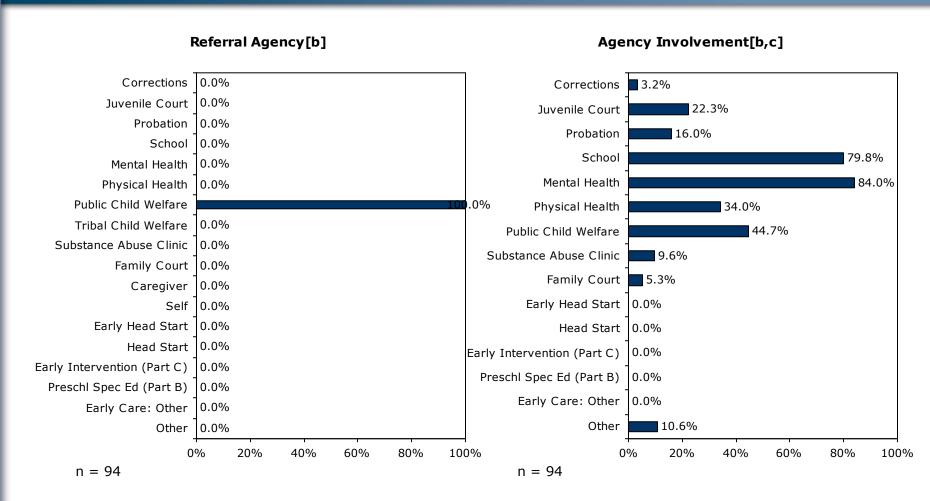
**Youth Information Questionnaire Revised-Intake (YIQ-R-I):** The YIQ-R-I is a youth version of the CIQ-I. It is administered to youth 11 years and older who are enrolled in the Longitudinal Child and Family Outcome Study.

## **Demographic Characteristics of Children Served**[a]

Demographics	
Gender (n = 94)	
Male	64.9%
Female	34.0%
Don't Know/Not sure	0.0%
Average Age at Intake (n = 94)	
Average Age	14.6 years
Age Group (n = 94)	
Birth to 3 years	0.0%
4 to 6 years	0.0%
7 to 11 years	13.8%
12 to 14 years	39.4%
15 to 18 years	45.7%
19 to 21 years	1.1%
Race/Ethnicity (n = 84)	
American Indian or Alaska Native	1.2%
Asian	0.0%
Black or African American	42.9%
Native Hawaiian or Other Pacific Islander	0.0%
White	48.8%
Hispanic/Latino	1.2%
Multi-Racial	6.0%

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

#### Intake Referral Information and Agency Involvement[a]

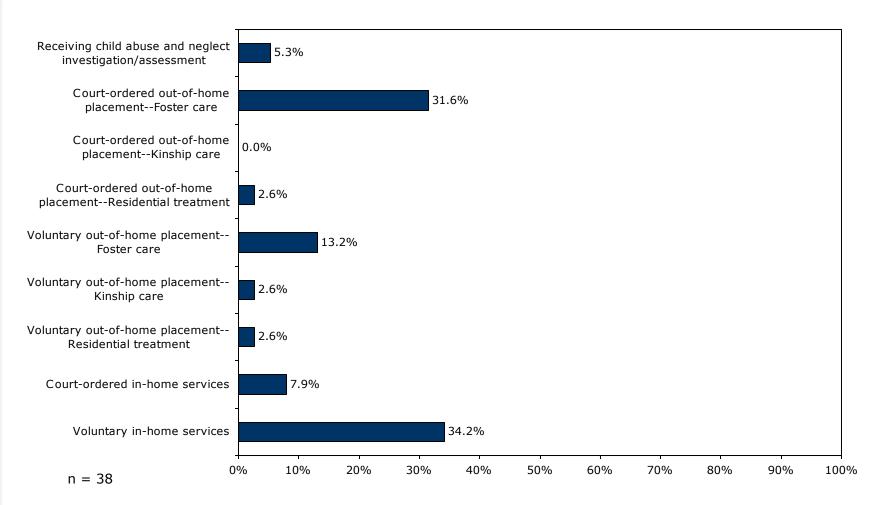


<sup>[</sup>a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

<sup>[</sup>b] Mental health = Mental health agency, clinic or provider; Physical health = Physical health care agency, clinic, or provider.

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

#### Child Welfare Involvement[a]



[a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF). Percentage reported is based on those who were involved with public child welfare.

#### **DSM-IV** Axis I and Axis II Diagnoses<sub>[a]</sub>

Diagnosis[b] (n = 87)	%
Mood Disorders	73.6%
Attention-Deficit/Hyperactivity Disorders	55.2%
Oppositional Defiant Disorder	33.3%
PTSD and Acute Stress Disorder	14.9%
Anxiety Disorders	11.5%
Other	11.5%
Mental Retardation	11.5%
Impulse Control Disorders	9.2%
Personality Disorders	8.0%
V code[c]	6.9%
Pervasive Developmental Disorders	4.6%
Substance Use Disorders[d]	4.6%
Schizophrenia and Other Psychotic Disorders	4.6%
Learning, Motor Skills, and Communication Disorders	3.4%
Conduct Disorders	2.3%
Adjustment Disorders	2.3%
Disruptive Behavior Disorder	1.1%
Substance Induced Disorders	1.1%

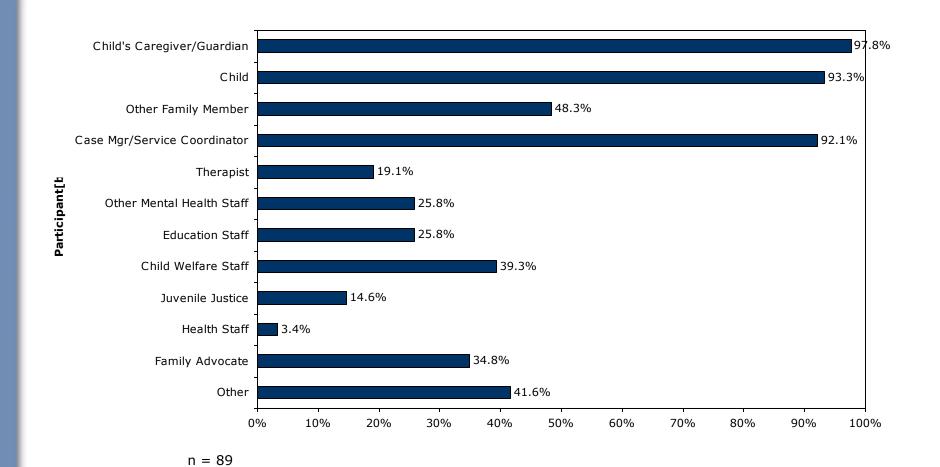
<sup>[</sup>a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

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

<sup>[</sup>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).

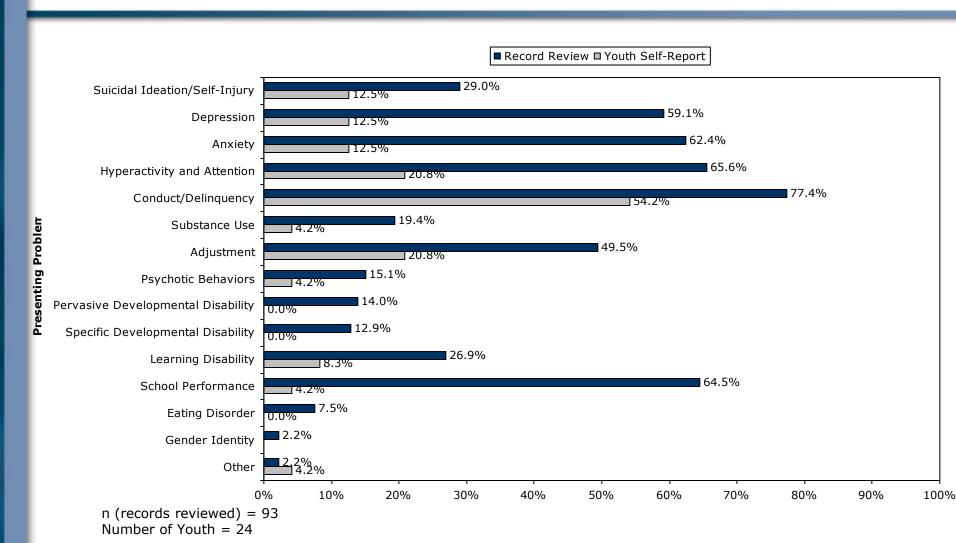
<sup>[</sup>d] Substance Use Disorders include caffeine intoxication.

#### 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.

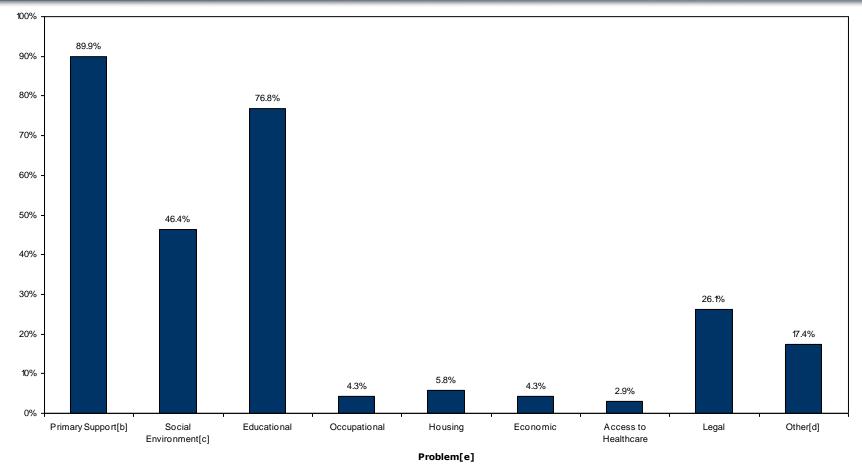
#### Presenting Problems[a] Reported



<sup>[</sup>a] Data reported were collected using the Enrollment and Demographic Information Form (EDIF) and Youth Information Questionnaire, Revised-Intake (YIQ-R-I)

<sup>[</sup>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<sub>[a]</sub> at Intake



n = 69

- [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%.

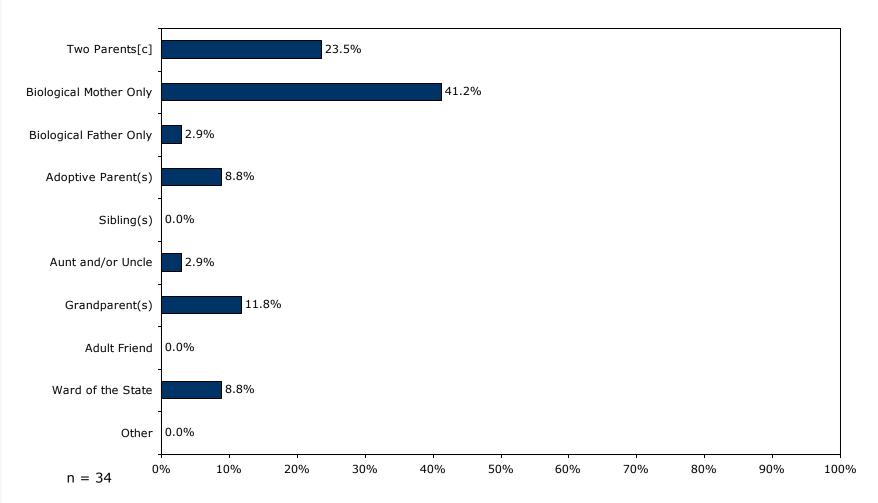
#### Family and Child History[a]

- 83% of caregivers reported a family history of depression (n = 30).
- 68% of caregivers reported a family history of mental illness, other than depression (n = 31).
- 78% of caregivers reported a family history of substance abuse (n = 32).

Has the child ever	
Witnessed domestic violence? (n = 32)	37.5%
Lived with someone who was depressed? $(n = 31)$	80.6%
Lived with someone who had a mental illness, other than depression? $(n = 31)$	64.5%
Lived with someone who was convicted of a crime? (n = 33)	57.6%
Lived with someone who had a substance abuse problem? $(n = 32)$	53.1%
Experienced physical assault? (n = 32)	28.1%
Experienced sexual assault? (n = 32)	21.9%
Run away? (n = 34)	44.1%
Had substance abuse problems? $(n = 34)$	11.8%
Attempted suicide? (n = 34)	20.6%

 $\hbox{[a] Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I)}.$ 

#### 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.

## Children's Physical Health Problems<sub>[a]</sub> at Intake

Caregiver report indicated that 61.8% of 34 children had recurring or chronic physical health problems

Type of recurring or chronic physical health problems [b] (n=34)	%
Allergies	26.5%
Asthma	29.4%
Cancer	0.0%
Cerebral palsy	0.0%
Diabetes	2.9%
Epilepsy	0.0%
Migraine headaches	2.9%
Heart condition	0.0%
High blood pressure	2.9%
Overweight	20.6%
Sickle cell anemia	0.0%
Spina bifida	0.0%
Thyroid problems	5.9%
Other	17.6%
No recurring or chronic health problem reported	38.2%
In the past 6 months percentage of (n=21)	
Children who took medication because of physical health problems	85.7%
Children whose regular activities (such as school, social activities, etc.) have been disrupted because of recurring or chronic physical health problems	42.9%

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

<sup>[</sup>b] Because children and youth may have more than one physical health problems, percentages may sum to more than 100%.

## **Visits to Primary Care Provider or Emergency** Rooms and Hospitalization at Intake[a]

In the past 6 months ...

Visits	
Average number of times child visited a doctor or other primary health care provider for a physical health problem (excluding an emergency room visit)	2.4 (n=33)
Average number of times child has to go to the emergency room to seek treatment for a physical health problem	0.5 (n=34)
Average number of times child has to go to the emergency room to seek treatment as a result of his/her behavioral or emotional problem	0.4 (n=34)
Hospitalization	
Average number of times child hospitalized for a physical health problem	0.1 (n=34)
Average number of days child hospitalized for a physical problem	0.4 (n=34)

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

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

Caregiver report indicated that 61.8% of 34 children had a routine physical health exam in the past 6 months.

Children with primary health care provider (n=34)	97.1%
Who is the provider of primary health care? (n=33)	
Pediatrician	90.9%
Physician other than a pediatrician	9.1%
Physician's assistant	0.0%
Nurse practitioner	0.0%
No consistent primary health care provider	0.0%
Tribal healer/alternative health practitioner	0.0%
Other	0.0%

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

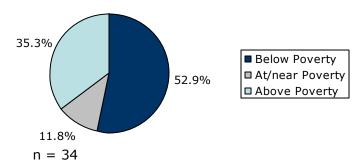
#### **Economic and Employment Status[a] at Intake**

#### Family/Household Annual Income

Family Income[b] (n = 34)								
Less Than \$5,000	11.8%							
\$5,000-\$9,999	8.8%							
\$10,000-\$14,999	8.8%							
\$15,000-\$19,999	20.6%							
\$20,000-\$24,999	14.7%							
\$25,000-\$34,999	8.8%							
\$35,000-\$49,999	11.8%							
\$50,000-\$74,999	8.8%							
\$75,000-\$99,999	5.9%							
\$100,000 and Over	0.0%							

#### **Poverty Level**

Poverty categories are based on the U.S. Department of Health and Human Services poverty guidelines, which are available for the 50 States. The categories take into account calendar year, State, family income, and household size. Specifically, if family income is less than the relevant poverty threshold, they are "below poverty", if income is 1 to 1.5 times the threshold, they are "at/near poverty", and if income is more than 1.5 times the threshold, they are "above poverty". In 2012, the poverty threshold for a family of four residing in the 48 contiguous States was \$23,050.

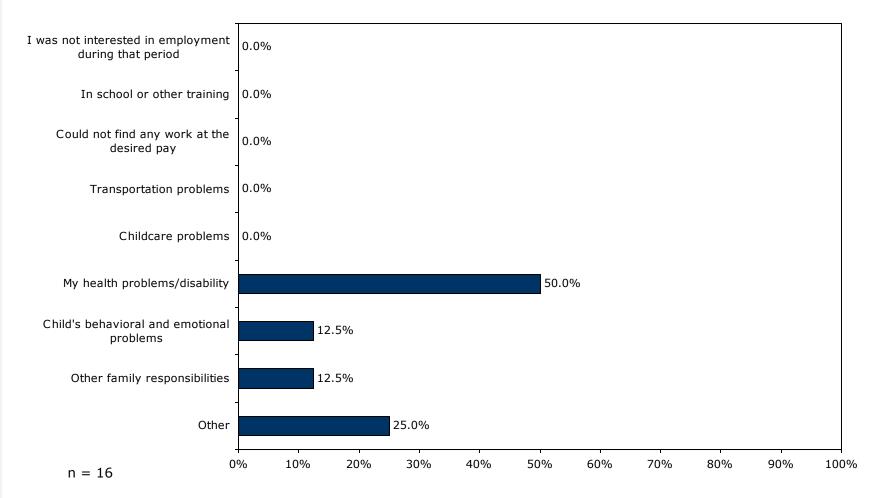


#### **Employment History**

Caregiver Employed in the Past 6 Months[c]	52.9% (n = 34)
Average Months of Employment in the Past 6 Months	5.6 (n = 18)
Average Hours Worked Per Week in the Past 6 Months	39.9 (n = 18)

- [a] Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I).
- [b] Family income is reported from the family with whom the child has lived with the most in the 6 months prior to data collection.
- [c] Only caregivers who reported being employed in the past 6 months were asked the average number of months and hours per week worked.

### Primary Reason for not Working in the Past 6 Months[a]



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

## **Demographic Characteristics of Caregivers**[a]

Demographics	
Gender (n=34)	
Male	5.9%
Female	94.1%
Age in years (n=34)	
Less than 35 years	32.4%
35 - 49 years	47.1%
50 and above	20.6%
Race/Ethnicity (n=33)	
American Indian or Alaska Native	0.0%
Asian	0.0%
Black or African American	39.4%
Native Hawaiian or Other Pacific Islanders	0.0%
White	54.5%
Hispanic/Latino	0.0%
Multi-Racial	6.1%
Education (n=34)	
Below High School	29.4%
High School Diploma or GED	44.1%
Associate Degree/Some College	23.5%
College Degree (BA, MA, PhD,)	2.9%

<sup>[</sup>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)**.

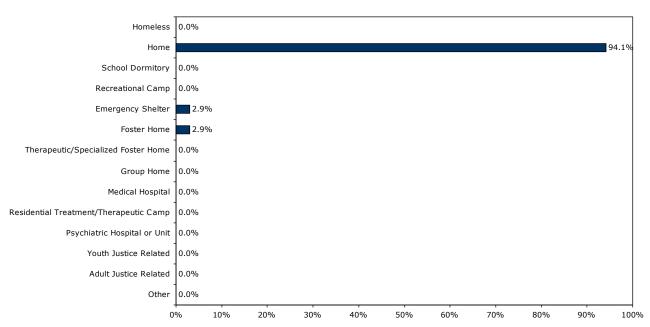
The LSQ is administered to caregivers and gathers information on where the child was living in the past 6 months, with whom the child was living, and number of days in each living situation.

#### Living Situations[a] at Intake

#### Child Lives With[b]

	Biological Family[c]	Adoptive Family[d]	Non-Parent Relative[e]	Non-Relative[f]	Independent Living[g]	
(n = 33)	63.6%	9.1%	21.2%	9.1%	3.0%	

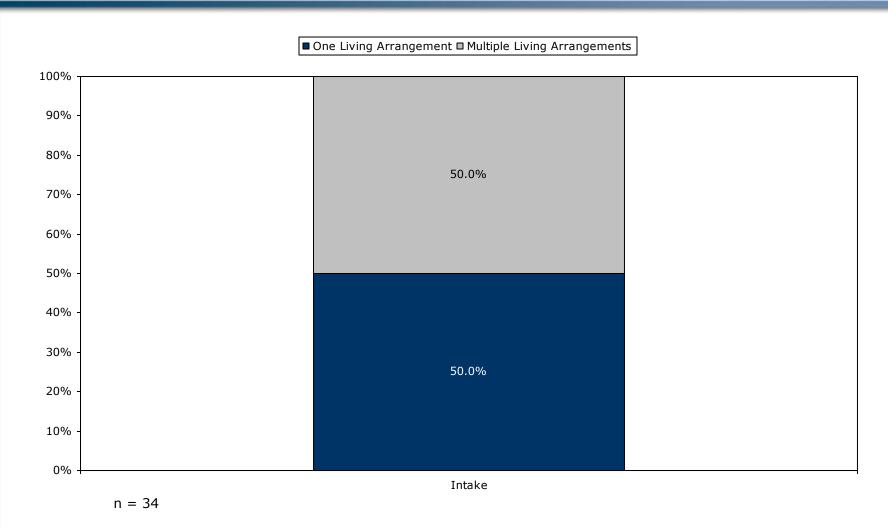
#### Type of Living Situation



- [a] Data reported were collected using the Living Situations Questionnaire (LSQ). The LSQ reflects living situations during the 6 months prior to data collection.
- [b] Since a child may have lived with more than one individual at intake, percentages may sum to more than 100%.
- [c] Includes both biological parents or one biological parent with or without a partner.
- [d] Includes two adoptive parents or one adoptive parent with or without a partner.
- [e] Includes two grandparents, one grandparent with or with a partner, or other relative with or without a partner.
- [f] Includes one or more foster parents, staff, or other caregiving adult.
- [g] Living alone, with a friend, or within a supervised living situation.

n = 34

### Stability of Children's Living Arrangements[a] at Intake



[a] Data reported were collected using the Living Situations Questionnaire (LSQ). This instrument collects data on the status of the child/family in the 6 months prior to the interview.

#### 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.

#### School Attendance[a] at Intake

- 100% of children aged 5–18 years attended school in the past 6 months (n = 33).
- 100% of children of all ages attended school in the past 6 months (n = 33).

Average Number of Excused and Unexcused Absences in the Past 6 Months ( $n = 31$ )		
Perfect Attendance	9.7%	
Less Than 1 Day Per Month	12.9%	
About 1 Day a Month	22.6%	
About 1 Day Every 2 Weeks	22.6%	
About 1 Day a Week	6.5%	
2 Days Per Week	19.4%	
3 or More Days Per Week	6.5%	

[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.

### School Performance[a] at Intake

School Performance at Intake (n=32)		
Grade Average A's	6.3%	
Grade Average A's and B's	21.9%	
Grade Average B's	6.3%	
Grade Average B's and C's	21.9%	
Grade Average C's	0.0%	
Grade Average C's and D's	15.6%	
Grade Average D's	6.3%	
Grade Average D's and F's	6.3%	
Grade Average F's	12.5%	
School Does Not Assign Grades	3.1%	
Other	0.0%	

[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.

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

Educational Placements	
Educational Placements in the 6 Months Prior to Intake[b] $(n = 32)$	
Regular Public Day School	90.6%
Regular Private Day/Boarding School	0.0%
Home Schooling[c]	0.0%
Home based instruction[c]	3.1%
Alternative/Special Day School	25.0%
School in 24-Hour psychiatric Setting[d]	0.0%
School in 24-Hour justice Setting[d]	3.1%
School in 24-Hour residential treatment Setting[d]	6.3%
Postsecondary School	0.0%
Preschool	0.0%
Head Start	0.0%
Other	0.0%

<sup>[</sup>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.

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

<sup>[</sup>c] Includes home-based instruction and combination of home schooling and home-based instruction.

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

<sup>[</sup>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%.

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

Individualized Educational Plans (IEP)	
Percent with IEP (n = 32)	
Individual Education Plan	75.0%
Main Reasons for IEP[e] (n = 24)	
Behavioral/Emotional Problems	75.0%
Learning Disability	16.7%
Developmental Disability or Mental Retardation	8.3%
Vision or Hearing Impairment	0.0%
Speech Impairment	0.0%
Physical Disability	0.0%
Other	0.0%

<sup>[</sup>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.

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

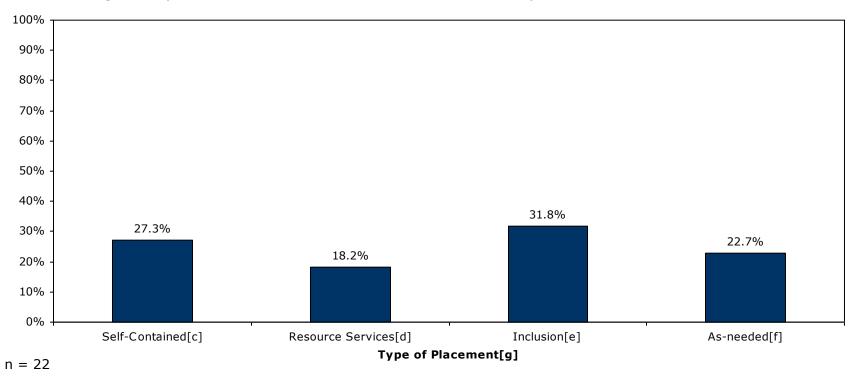
<sup>[</sup>c] Includes home-based instruction and combination of home schooling and home-based instruction.

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

<sup>[</sup>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%.

#### Special Education Placements<sub>[a]</sub> at Intake

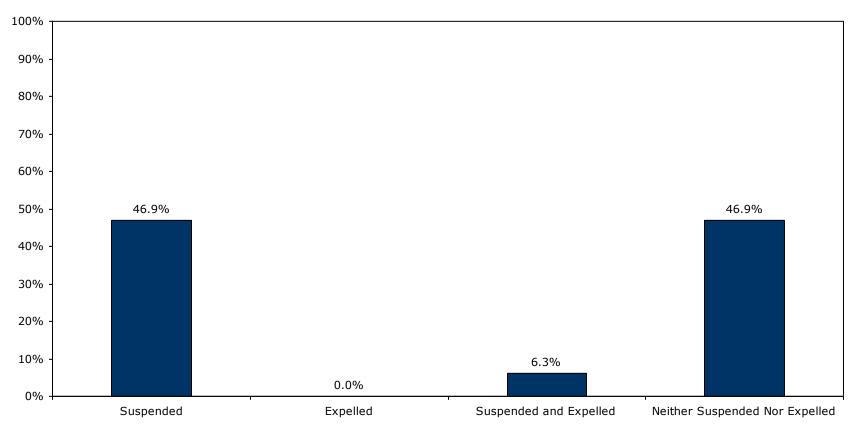
• Caregiver report indicated that 69% of 32 children took special education classes.[b]



- [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] This includes children who took special education classes in which either all children or only some children in the class were receiving special education, and children who received any other kind of special education.
- [c] Self-Contained refers to special education classes in which all the children in the class are receiving special education for all or most of the day.
- [d] Resource Services refers to special education classes in which all the children leave their general education class to receive special education instruction in specific subjects for a portion of the day.
- [e] Inclusion refers to special education provided in the general education class in which some children receive special education and others do not.
- [f] Children do not receive support on a regular basis.
- [q] Because children may have received more than one type of placement over the past 6 months, percentages may sum to more than 100%.

#### School Disciplinary Actions[a] at Intake

#### **Disciplinary Actions in the Past 6 Months**



n = 32

[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: Juvenile Justice Involvement**

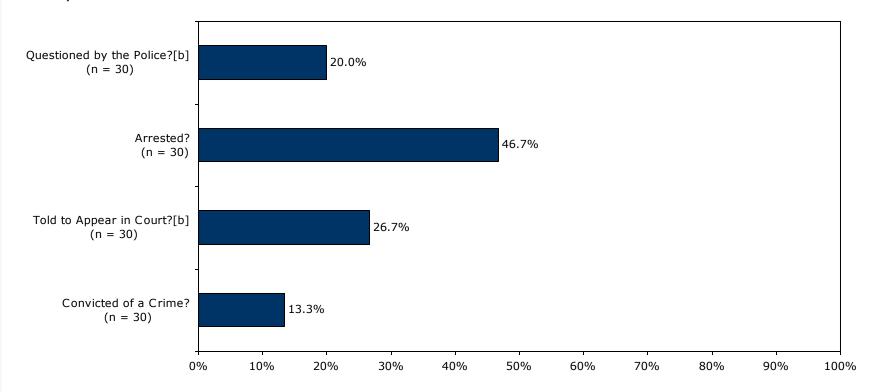
This section provides information on youth's contact with the criminal justice system. Information in this section was taken from the **Delinquency Survey-Revised (DS-R)**.

The DS-R gathers information on the types of illegal, violent, or delinquent activities youth have engaged in, along with the frequency of these acts. It also gathers information on law enforcement contacts and the results of those contacts. The DS-R is administered to youth 11 years and older who are enrolled in the Longitudinal Outcome Study. Since only youth who are 11 years or older complete the DS-R, the number of participants who responded to each item may be noticeably less than in previous slides.

## **Criminal Justice History**[a] at Intake

• 60% of youth reported some type of criminal justice contact prior to intake (n = 30).

Have you ever been . . .



<sup>[</sup>a] Data reported were collected using the Delinquency Survey-Revised (DS-R). Because participants may have had multiple criminal justice contacts, percentages may sum to more than 100%.

<sup>[</sup>b] Because you were suspected of committing a crime.

#### **Delinquent Behavior**[a] at Intake

• 60% of youth reported engaging in some type of delinquent or illegal behavior at intake (n = 30).

#### **Violent Crimes**

In the past 6 months, how many times have you	No Times	1 Time	2 or More Times
Been a bully or threatened other people without use of a weapon? $(n = 30)$	80.0%	6.7%	13.3%
Taken a purse, money, or other things from someone by force or threat? $(n = 30)$	100.0%	0.0%	0.0%
Been physically cruel to animals? $(n = 30)$	100.0%	0.0%	0.0%
Hit someone or got into a physical fight? $(n = 30)$	53.3%	23.3%	23.3%
Hurt someone badly enough they needed bandages or a doctor? $(n = 30)$	80.0%	13.3%	6.7%
Threatened someone with a weapon or used a weapon in a fight? $(n = 30)$	90.0%	10.0%	0.0%
Forced someone to have sex with you when they did not want to? $(n = 30)$	100.0%	0.0%	0.0%

[a] Data reported were collected using the Delinquency Survey-Revised (DS-R). This instrument collects data on the status of the youth age 11 years and older in the 6 months prior to the interview.

### **Delinquent Behavior**[a] at Intake, continued

#### **Property Crimes**

In the past 6 months, how many times have you	No Times	1 Time	2 or More Times
Taken something from a store without paying for it? $(n = 30)$	96.7%	0.0%	3.3%
Bought, received, possessed, or sold any stolen goods? (n = 30)	100.0%	0.0%	0.0%
Broken into a house or building to steal something or just to look around? $(n = 30)$	100.0%	0.0%	0.0%
Taken a car, truck, or motorcycle that $didn't$ belong to you? (n = 30)	100.0%	0.0%	0.0%
Intentionally set a building, car, or other property on fire? (n = 30)	96.7%	3.3%	0.0%

[a] Data reported were collected using the Delinquency Survey-Revised (DS-R). This instrument collects data on the status of the youth age 11 years and older in the 6 months prior to the interview.

## Delinquent Behavior[a] at Intake, continued

#### **Other Behaviors**

In the past 6 months, how many times have you	No Times	1 Time	2 or More Times
Been in trouble with the police for skipping school? $(n = 29)$	100.0%	0.0%	0.0%
Been in trouble with the police for running away? $(n = 30)$	73.3%	16.7%	10.0%
Received a ticket or citation for a traffic violation? $(n = 30)$	100.0%	0.0%	0.0%
Driven a car or motorcycle while under the influence of alcohol or illegal drugs? ( $n = 30$ )	100.0%	0.0%	0.0%

[a] Data reported were collected using the Delinquency Survey-Revised (DS-R). This instrument collects data on the status of the youth age 11 years and older in the 6 months prior to the interview.

#### **Section V: Substance Use**

This section provides information on the types of substances used by youth and the frequency with which these substances are used. Information in this section was taken from the instruments listed below, which are administered to youth 11 years and older who are enrolled in the Longitudinal Outcome Study. Since only youth who are 11 years or older complete these instruments, the number of participants who responded to each item may be noticeably less than in previous slides.

**Substance Use Survey-Revised (SUS-R):** The SUS-R gathers information on youth's use of alcohol, tobacco, and other drugs (illegal, prescription, and over the counter). In addition to the types of substances used, information such as age of first use and frequency of use over the past 30 days is collected.

### **Substance Use[a] Prior to Intake**

• 47% of youth reported using at least one substance prior to intake (n = 30).

Substance[b]	Ever Used	Average Age of First Use (Years)
Alcohol	30.0% (n = 30)	
Cigarette	36.7% (n = 30)	12.5 (n = 11)
Chewing Tobacco/Snuff	0.0% (n = 30)	
Marijuana/Hashish	23.3% (n = 30)	
Cocaine (all forms)	3.3% (n = 30)	
Hallucinogenics (e.g., LSD, mushshrooms)	0.0% (n = 30)	
PCP	0.0% (n = 30)	
Ketamine (Special K)	0.0% (n = 30)	
MDMA (Ecstasy, X)	3.3% (n = 30)	
GHB	0.0% (n = 30)	
Inhalants	0.0% (n = 30)	
Heroin	3.3% (n = 30)	
Methemphetamine (crystal, ice, glass, etc.)	0.0% (n = 30)	
Amphetamines/Stimulants	0.0% (n = 30)	
Pain Killers (e.g., Darvocet, Vicodin)	13.3% (n = 30)	
Ritalin, Adderall, Desoxyn	0.0% (n = 30)	
Tranquilizers (e.g., Valium, Xanax)	3.3% (n = 30)	
Barbiturates/Sedatives (e.g., Seonol, Nembutal)	3.3% (n = 30)	
Non-Prescription/OTC (e.g., diet pills, No-Doz)	3.3% (n = 30)	

 $<sup>\</sup>hbox{\cite{thm-properties} [a] Information was gathered from the Substance Use Survey-Revised (SUS-R).}$ 

<sup>[</sup>b] Shaded areas indicate categories with fewer than 10 youth responses; data were not presented for these substances.

### Section VI: 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 participant with a score of 15 or higher is considered clinically impaired.

Revised Children's Manifest Anxiety Scale-2nd Edition (RCMAS-2): The RCMAS-2, completed by youth, measures anxiety. The RCMAS-2 is comprised of four subscales: Worry, Social Anxiety, Physiological Anxiety, and the Defensiveness score. The Defensiveness score measures inaccurate selfreport. A high Defensiveness score indicate that the respondent is unwilling to admit to common imperfections. Scores for each subscale are converted to standardized scores (T-scores). Higher scores indicate a greater level of anxiety. T-scores greater than 60 indicate respondent has some difficulties with anxiety.

Reynolds Adolescent Depression Scale-2nd Edition (RADS-2): The RADS-2, completed by youth, measures adolescent depression. RADS-2 is comprised of four subscales: Dysphoric Mood, Anhedonia/Negative Affect, Negative Self-Evaluation, and Somatic Complaints. Scores are converted to standardized scores (T-scores), and have varying ranges; minimum values range from 29 to 40 and maximum scores range from 76 to 90. Total T-scores of less than 61 represent Normal range, 61 to 64 represent Mild clinical depression range, 65 to 69 represent Moderate clinical depression range, and greater than or equal to 70 represent Severe clinical depression range.

### Section VI: 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, and scores over 40 below the clinical range (i.e., greater competence).

### Section VI: 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.

Behavioral and Emotional Rating Scale–Second Edition, Youth Rating Scale (BERS–2Y): The BERS–2Y is a youth version of the BERS–2C. It is administered to youth 11 years and older. As with the caregiver version, the BERS–2Y measures children's emotional and behavioral strengths in six different areas: interpersonal strength, family involvement, intrapersonal strength, school functioning, affective strength, and career strength. On the youth version, however, scaled scores on the strength subscales range from 1 to 18, but the average range remains the same at 8–12. The calculation, range, and average score of the strength index remain the same as well (i.e., 38 to 161, with an average index between 90 and 110). Higher subscale scores and strength indexes indicate greater overall strengths.

## Child Impairment and Anxiety and Adolescent Depression at Intake[a]

Measure	Average Score	Clinical Impairment Range[c]
Columbia Impairment Scale[b]		
Overall Level of Impairment (n = 33)	22.1	15.0 - 52.0
Revised Child's Manifest Anxiety Scale[b]		
Worry (n = 29)	47.6	
Social Anxiety (n = 27)	50.1	
Physiological Anxiety (n = 29)	47.9	
Total Anxiety Score (n = 27)	47.9	61.0 - 92.0
Reynold's Adolescent Depression Scale-2[b]		
Dysphoric Mood (n = 30)	46.5	
Anhedonia/Negative Affect (n = 29)	51.1	
Negative Self-Evaluation (n = 30)	49.0	
Somatic Complaints (n = 30)	47.7	
Total Depression Score (n = 30)	48.2	61.0 - 90.0

<sup>[</sup>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).

<sup>[</sup>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.

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

## Child Competence and Behavioral and Emotional Problems<sub>[a]</sub> at Intake

Measure	CBCL 6–18 Average Score	Clinical Range
Competence		
Social	39.3 (n = 32)	<30.0
Activities	39.8 (n = 32)	<30.0
School	37.3 (n = 30)	<30.0
Total Competence	34.5 (n = 30)	<37.0
Behavioral and Emotional F	Problems	
Social Problems	66.5 (n = 32)	>=70.0
Thought Problems	67.6 (n = 32)	>=70.0
Rule Breaking Behavior	67.3 (n = 32)	>=70.0
Withdrawn	68.3 (n = 32)	>=70.0
Somatic Complaints	61.8 (n = 32)	>=70.0
Anxious/Depressed	64.9 (n = 32)	>=70.0
Attention Problems	67.5 (n = 32)	>=70.0
Aggressive Problems	70.7 (n = 32)	>=70.0
Internalizing Problems	66.3 (n = 32)	>63.0
Externalizing Problems	68.5 (n = 32)	>63.0
Total Problems	69.6 (n = 32)	>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 and Youth Report of Behavioral and Emotional Strengths[a] at Intake

Strength Subscale[b]	BERS-2C Average Score	BERS-2C n	BERS-2Y Average Score	BERS-2Y n
Interpersonal Strength	6.3	34	7.2	30
Family Involvement	7.5	34	8.8	30
Intrapersonal Strength	7.4	34	9.1	30
School Functioning	7.1	32	8.6	28
Affective Strength	7.6	34	9.1	30
Career Strength	10.5	31	10.4	30
Strength Index[c]	80.1	32	90.9	28

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

<sup>[</sup>b] Strength subscales on the BERS-2C range from 1 to 16, and on the BERS-2Y from 1 to 18. Average scores on both instruments range between 8 and 12. Higher scores indicate greater strength.

<sup>[</sup>c] Strength Indexes for both BERS-2C and BERS-2Y range from 38 to 161, with an average index between 90 and 110. A higher index indicates greater overall strengths.

### **Section VII: 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 = 34)	2.7	1 to 5
Subjective Externalized Strain (n = 34)	2.5	1 to 5
Subjective Internalized Strain (n = 34)	3.8	1 to 5
Global Strain (n = 34)	9.1	1 to 15

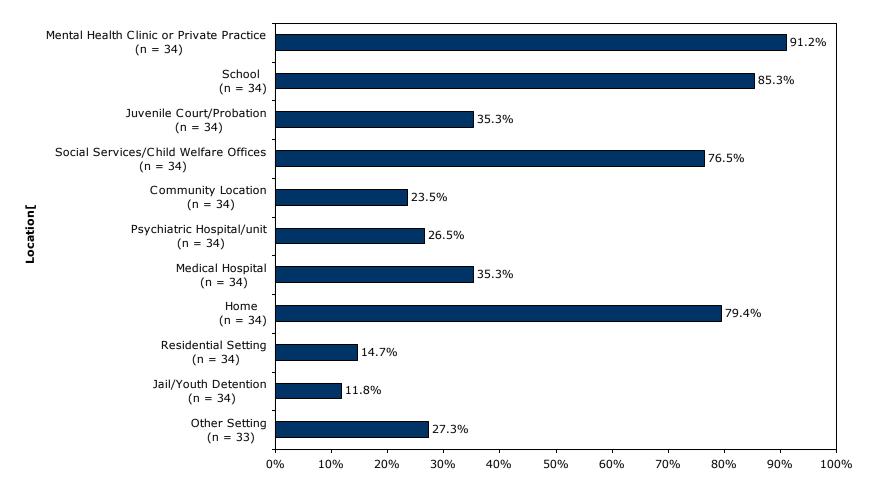
[a] Data reported were collected using the Caregiver Strain Questionnaire (CGSQ). The range in scores for each subscale is 1 to 5; the range in scores for the Global Strain scale is 1 to 15. Higher scores indicate greater strain. This instrument collects data on the status of the caregiver in the 6 months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

### **Section VIII: 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



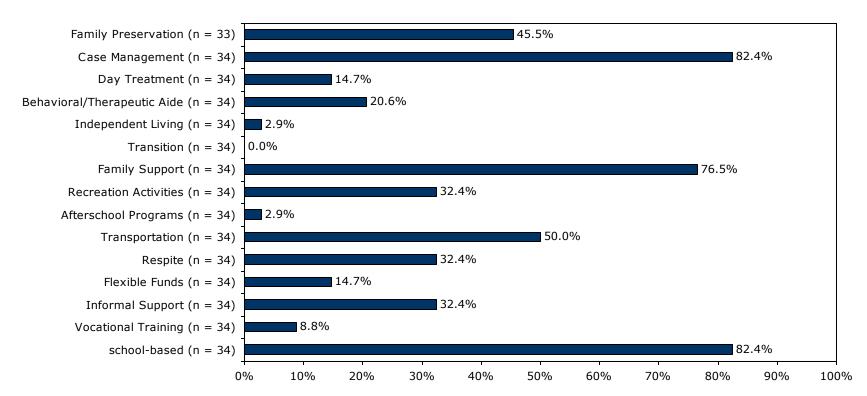
[a] Data reported were collected using the Multi-Sector Service Contacts-Revised (MSSC-R) questionnaire. This instrument collects data on the services received by the child/family in the 6 months prior to the interview.

[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 8.9 types of services at intake (n = 34).

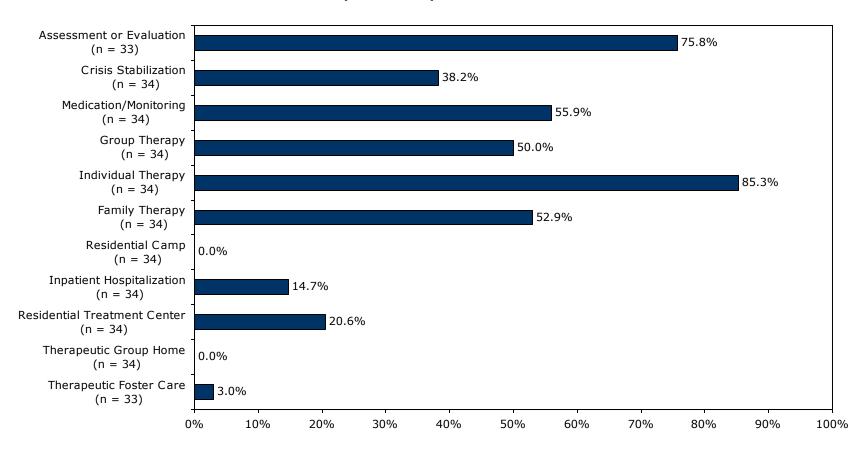
#### **Support Services**



[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.

## Section IX: Youth Employment, Safe Neighborhood, and Bullying

This section provides information on employment, opinion regarding safety in the neighborhood, bullying, life-skills, and sexual orientation of the youth 11 and above. Information in this section was taken from the Youth Information Questionnaire (YIQ).

## Youth Employment Status[a] at Intake

Youth Employed in the Past 6 Months[b]	17.9% (n=28)
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Main reasons for not working in the past 6 months (n=16)		
I was trying to find a job but could not find one	43.8%	
I do not have time to work	0.0%	
My caregiver do not want me to work	6.3%	
I do not want to work	6.3%	
I am attending school	18.8%	
I am not able to work for physical or emotional reasons	6.3%	
Other	18.8%	

<sup>[</sup>a] Data reported were collected using the Youth Information Questionnaire-Intake (YIQ-I).

<sup>[</sup>b] Only youth who reported being employed in the past 6 months were asked the average number of months and hours per week worked.

### Interaction with Peers and Adults[a] at Intake

### Percentage of youth who answered "Usually" or "Always"

How often can you	%	n
Peer		
depend on having someone your own age to talk to?	33.3%	27
depend on having someone your own age to turn to for help and support, if a problem or emergency arises	25.0%	28
have someone your own age to have fun or hang out with when you want to?	42.9%	28
Adult		
depend on having an adult to talk to?	67.9%	28
depend on having an adult to turn to for help and support, if a problem or emergency arises?	71.4%	28
have an adult to have fun or hang out with when you want to?	21.4%	28

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

# Safety and Violence in the Neighborhood, and Bullying[a] at Intake

Youth report indicated that 14.3% of the 28 youth don't feel safe in their neighborhood

Neighborhood violence, in the past 6 months	% Yes	n
Have you seen any non-violent crime in your neighborhood, such as someone selling drugs or stealing?	7.1%	28
Have you seen any violent crimes taking place in your neighborhood, such as someone getting beat up?	17.9%	28
Have you known someone other than yourself who was a victim of a violent crime in your neighborhood?	3.6%	28
Have you been a victim of a violent crime in your neighborhood?	0.0%	28
Bullying		
Have you been bullied at school or in your neighborhood?	21.4%	28
Have you experienced online bullying or threats (cyberbullying)?	7.1%	28

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

# Coping with Emotional/Mental Health Challenges and Service Support at Intake

### Percentage of youth who answered "Mostly" or "Always"

	%	n
When problems arise with my mental health or emotions, I handle them pretty well	28.6%	28
I make changes in my life so I can live successfully with my emotional or mental health challenges	39.3%	28
I know how to take care of my mental or emotional health	46.4%	28
I work with providers to adjust my services or supports so they fit my needs	64.3%	28
When a service or support is not working for me, I take steps to get it changed	25.0%	28
I tell service providers what I think about services I get from them	46.4%	28
I help other young people learn about services or supports that might help them	14.3%	28
I tell people in agencies and schools how services for young people can be improved	10.7%	28

[a] Data reported were collected using the Youth Information Questionnaire, Revised-Intake (YIQ-R-I).

## Gender Identity and Sexual Orientation[a]

Gender Identity (n=28)	
Male	53.6%
Female	46.4%
Transgender (male to female)	0.0%
Transgender (female to male)	0.0%
I don't know/I'm not sure	0.0%
Other	0.0%
Sexual Orientation (n=28)	
Heterosexual/straight (attracted only to persons of the opposite sex)	78.6%
Mostly heterosexual/straight (attracted mostly to persons of the opposite sex)	7.1%
Bisexual (attracted to both males and females)	3.6%
Mostly homosexual/gay or lesbian (attracted mostly to persons of the same sex)	0.0%
Homosexual/gay or lesbian (attracted only to persons of the same sex)	0.0%
Other	0.0%
I don't know/I am not sure	3.6%
I don't understand this question	7.1%

[a] Data reported were collected using the Youth Information Questionnaire, Revised-Intake (YIQ-R-I).

## Youth Life-Skills[a] at Intake

### Percentage of youth who answered 'Very much like me'

Life skills [b]	%	n
I can arrange for new telephone service and utilities (such as gas, water, electricity).	7.1%	28
I can complete a rental agreement or lease.	7.1%	28
I can calculate the start-up costs for new living arrangements (for instance, rental deposits, rent, utilities, furnishings).	14.3%	28
I can explain how to prevent pregnancy.	35.7%	28
I can explain two ways to prevent sexually transmitted diseases (STDs) such as HIV/AIDS and syphilis.	46.4%	28
I can explain what happens to your body if you smoke or chew tobacco, drink alcohol, or use illegal drugs.	46.4%	28
I can explain how I am feeling (like angry, happy, worried, or depressed).	64.3%	28
I can get help if my feelings bother me.	42.9%	28
I ask for help when I need it.	17.9%	28

<sup>[</sup>a] Data reported were collected using the Youth Information Questionnaire, Revised-Intake (YIQ-R-I).

<sup>[</sup>b] Responses to these questions have 3 categories: 1=Not like me; 2=Somewhat like me; 3=Very much like me

## Youth Life-Skills[a] at Intake, Continued

#### Percentage of youth who answered 'Very much like me'

Life skills [b]	%	n
I am polite to others.	21.4%	28
I show appreciation for things others do for me.	42.9%	28
I respect other people's things.	50.0%	28
I get my work done on time.	25.0%	28
I get to school or work on time.	59.3%	27
I prepare for exams and presentations.	15.4%	26
I use things in the kitchen, like the microwave, electric mixer, and oven.	85.7%	28
I fix meals for myself on my own.	60.7%	28
I store food so it doesn't spoil or go bad.	60.7%	28

<sup>[</sup>a] Data reported were collected using the Youth Information Questionnaire, Revised-Intake (YIQ-R-I).

<sup>[</sup>b] Responses to these questions have 3 categories: 1=Not like me; 2=Somewhat like me; 3=Very much like me

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