

Progress Towards Reducing Disparities in Mental Health Services



San Diego County Behavioral Health Services

Fiscal Years: 2001-2002; 2006-2007; 2009-2010; and 2012-2013



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Executive Summary

Children's System Findings

Adult System Findings

Progress Towards Reducing Disparities

Key Findings by Age

Key Findings by Race/Ethnicity

Executive Summary

The purpose of the Progress Towards Reducing Disparities report is to report progress towards the reduction of disparities across racial/ethnic groups and age groups. The report covers four time points spanning across 11 years (Fiscal Years 2001-02, 2006-07, 2009-10, and 2012-13) and notes disparities that exist in San Diego County for FY 2012-13.

The Mental Health Services Act (MHSA), which passed in 2004, allowed San Diego County to begin a large-scale implementation of programs in FY 2007-08. The influx of dollars made possible the creation of new services and, most importantly, the enhancement of current services and programs. This included the implementation of Full Service Partnership (FSP) services with a “whatever it takes” approach to address the clients’ path to recovery. FSP programs provide comprehensive services offered by a team of mental health professionals. Services under FSP may also include the availability of short term housing for adult clients. Overall, the additional MHSA funding enhanced the level and quality of care for San Diego County’s unserved and underserved populations.

This report assesses racial/ethnic and age group disparities in service utilization (penetration rates), engagement (retention rates), type of services used (e.g., Outpatient vs. Emergency), and diagnosis.

Utilization and other client data for this report were obtained from both the Anasazi and INSYST medical information systems (MIS). The INSYST MIS was replaced by the Anasazi MIS midway through FY 2008-09. Analyses of service utilization (penetration rates) required the calculation of a ratio consisting of behavioral health care system clients divided by the population eligible for services (target population) for a specific race/ethnicity or age segment. Eligible clients were defined as those individuals in San Diego County who were: Medi-Cal OR uninsured, AND under 200% of the Federal Poverty Level (FPL) that could potentially have a serious mental illness (SMI).

Children’s System Findings (CYF BHS):

For children and youth, comparisons across fiscal years demonstrated that service utilization for Hispanic clients increased from FY 2001-02 to FY 2012-13. There was a decreasing trend in service utilization over the studied time periods, with decreases in service utilization from FY 2001-02 to FY 2012-13 for all racial/ethnic groups except for Hispanics. Hispanic clients showed increasing service utilization across all time points.



The disparities found for racial/ethnic groups for clients ages 0-17 were similar to those found in the A/OA system. Hispanic, Asian/Pacific Islander, and Native American children utilized services less frequently than would be expected based on their proportion in the target population. However, it should be noted that 62% of children and youth clients were Hispanic. Engagement for extended services (10+) was lowest for the Asian/Pacific Islander group.

When examining types of services used, it was found that while a majority of clients (98%) used Outpatient services, there were some racial/ethnic groups that utilized a disproportionate share of more restrictive levels of service. In FY 2009-10 and FY 2012-13, the Asian/Pacific Islander group used Inpatient services without receiving any Outpatient services more than any other group. African American clients used more Juvenile Forensic Services (JFS) without receiving any Outpatient services compared to other groups.

Furthermore, several disparities were found when examining racial/ethnic differences in diagnoses. Native American clients had the highest rates of Adjustment Disorders (30%). Depressive Disorders were most common for Asian/Pacific Islander, Hispanic, and White clients. Oppositional/Conduct Disorders

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and Attention-Deficit/Hyperactivity Disorder (ADHD) were the most frequently diagnosed disorders among African American clients.

Service utilization decreased among clients ages 6-11, when comparing from FY 2001-02 to FY 2012-13. Service utilization slightly increased among clients ages 0-5 across the same 11-year time period. For the 12-17 age group, service utilization showed an increase from FY 2001-02 to FY 2012-13 (11.9% and 12.9%, respectively,) with rates peaking in FY 2006-07 at 13.3%. While there has been minimal change in the service utilization since 2001, it is important to note that these numbers do not reflect the addition of prevention and early intervention services and the enhancement of services through the Mental Health Services Act (MHSA). Additionally, the CYF system of care experienced a large influx of clients from 1997 through 2001 with the implementation of Early Periodic Screening, Diagnosis, and Treatment (EPSDT) and school-based services. Service utilization rates differed markedly by racial/ethnic and age groups. In addition, the type of service used varied notably by age group.

Adult System Findings (A/OA BHS):



For adults and older adults, the most notable pieces of evidence demonstrating progress towards reducing disparities were the steady increases in the total number of clients served from FY 2001-02 to FY 2012-13. There was an overall increase in service utilization for all non-White racial/ethnic groups from FY 2001-02 to FY 2012-13, with peak utilization rates observed in FY 2009-10. Also notable was the observed steady increase and stabilization in service utilization for those over the age of 60 across the four fiscal years examined in this report.

While service utilization generally increased for Hispanics, Asian/Pacific Islanders, and Native Americans, since FY 2001-02, the number of clients in these racial/ethnic groups who utilized services was less than would be expected based on

their proportion in the target population.

The most marked finding with regard to engagement with services (retention rates) was that for all racial/ethnic categories there was a substantial increase in the proportion of clients who were retained in services for 10 visits or more from FY 2006-07 to FY 2012-13. In FY 2012-13, lower levels of engagement were most pronounced for African American and Hispanic clients, who had the highest proportions of clients with only 1 service visit.

Furthermore, disparities were observed when examining racial/ethnic differences in diagnoses. African American clients had the highest prevalence rates of Schizophrenia and Schizoaffective Disorders. Asian/Pacific Islander clients also had high rates of Schizophrenia and Schizoaffective Disorders closely followed by high rates of the Major Depression Disorders. Major Depression Disorders were the most common diagnosis for Hispanic clients. The highest prevalence rates of Bipolar Disorders were seen in White and Native American clients.

There were also some notable trends evident in the age group analysis. Service Utilization for all age groups increased from FY 2006-07 to FY 2009-10 and rates remained relatively stable from FY 2009-10 through FY 2012-13 for Older Adult (OA) clients, while dropping slightly for Transition Age Youth (TAY) clients during the same period. However, the TAY group utilized fewer services than would be expected given the number of potential TAY age clients in the target population. As for engagement in services, there was an increasing trend in retention rates across all age groups from FY 2009-10 to FY 2012-13 for 10 or more visits. Notably, OA clients had large increases in engagement from FY 2006-07 to FY 2012-13 for 10 or more service visits.

A goal of A/OA BHS has been to encourage appropriate usage of the services to help stabilize symptoms and progress towards recovery. Progress towards meeting this goal was observed in the TAY population and with clients ages 25-59. The proportion of TAY clients and clients ages 25-59 who used Out-



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patient services increased from FY 2009-10 to FY 2012-13 while the proportion of TAY who utilized Inpatient/Emergency services decreased over the same time period.

Progress Towards Reducing Disparities

Efforts to decrease barriers to behavioral healthcare among racial/ethnic minorities and clients in different age groups have been a focus for the County of San Diego Behavioral Health Services (SDCBHS) for many years. This process is complicated by the fact that the demographic breakdown of those eligible for services in the SDCBHS differs markedly from the demographic make-up of the county as a whole. For example, although persons of Hispanic origin makeup 30% of the adults in the population of San Diego County, this segment accounts for 60% of the target (eligible client) population. Therefore, efforts to increase service utilization often need to focus on specific groups disproportionately to their presence in the overall county population.

The key findings from this study indicated that improvements have been made; however, significant disparities still persist. A comparison of the San Diego County target population to those who received behavioral health services (pages 10 through 12) demonstrated that disparities continued; most notably for Hispanic adults. Hispanics comprised 60% of the adult target population* but only 25% of the adult clients who received behavioral health services. While the numbers were



much better for children, with Hispanic children and youth representing 71% of the population and 62% of the clients who received behavioral health services, there is still room for improvement.

Although Hispanic, Asian/Pacific Islander, and Native American individuals were less likely to utilize services than expected given the number of potential clients, their service utilization rates have varied across the four time periods examined. The most noticeable increases in service utilization from FY 2001-02 to FY 2012-13 were seen for Hispanic and African American clients for all services.

* The target population was defined as those eligible for services. Eligible clients were defined as those individuals in San Diego County who were: Medi-Cal OR uninsured, AND under 200% of the Federal Poverty Level (FPL) who may potentially have a SMI.



Key Findings by Age



Children and Youth

Ages 0-5:

- Had the lowest service utilization rates among age groups given the rarity of diagnosable mental health problems in this age category. However, service utilization rates increased slightly over time as a result of the implementation of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) and Mental Health Services Act-funded Prevention and Early Intervention (PEI) programs.
- Had the lowest retention rates among age groups, indicating they were more likely to receive only one visit. In addition to treatment programs, there are also assessment only programs for this age group, which may explain why many youth ages 0-5 have only one visit.

Ages 6-11:

- Penetration rates dropped from 8.1% in FY 2001-02 to a low of 6.3% in FY 2009-10, and increased to 7.1% in FY 2012-13.
- Were more likely to use Outpatient services than clients ages 12 and older, and about the same as clients ages 0-5.
- Were less likely to receive more than 10 services in FY 2012-13, which is consistent with the SDCBHS' shift to a short-term treatment model.

Ages 12-17:

- Had the highest service utilization rates among other children's age groups across all four time points, indicating they were more likely to utilize services.
- Use of Outpatient services increased and use of JFS only services decreased from FY 2006-07 to FY 2012-13.

Adults and Older Adults

Ages 18-24 (Transitional Age Youth):

- Had the lowest Outpatient service utilization rates among adult and older adult age groups. However, their service utilization to services increased from FY 2006-07 to FY 2012-13 as specific services for TAY clients were put into place.
- Had the lowest long term engagement rates among adult and older adult age groups, with 54% having had 10 or fewer visits.
- Were more likely to use Inpatient/Emergency services (27%) or only Jail services (20%) and were less likely to use Outpatient services than the other A/OA BHS age groups.
- Use of only Jail services decreased from 26.5% in FY 2006-07 to 20.4% in FY 2012-13.

Ages 25-59:

- Had higher penetration and retention rates than both TAY and older adult clients.
- Had lower usage of Inpatient/Emergency services than TAY or OA clients.
- Were less likely to use Inpatient/Emergency services (16%) and only Jail services (17%) and more likely to use Outpatient services (68%) than TAY.

Ages 60 and older (Older Adults):

- Had lower service utilization/penetration rates compared to clients ages 25-59. However, rates markedly increased in FY 2009-10 and were maintained through FY 2012-13.
- Higher retention rates were observed in OA clients with 10 or more visits from FY 2006-07 to FY 2012-13.
- Were the most likely age group to utilize Outpatient services, and least likely to utilize only Jail services than either of the other adult age groups.

Key Findings by Race/Ethnicity

Children and Youth

Hispanics:

- 62% of children and youth clients were Hispanic.
- Penetration rates increased from 2.8% in FY 2001-02 to 5.8% in FY 2012-13.
- Retention rates for 10 or more sessions (56.1%) were the second lowest of all the racial/ethnic groups, just higher than Asian/Pacific Islander clients (55.4%).

African Americans:

- Penetration rates decreased from 12.4% in FY 2001-02 to 9.3% in FY 2012-13.
- Had the largest proportions of clients diagnosed with Oppositional/Conduct Disorders or ADHD of all racial/ethnic groups.
- Were the highest users of JFS of all the racial/ethnic groups.

Asian/Pacific Islanders:

- Had among the lowest penetration rates compared to the other racial/ethnic groups (except for Native American), and the penetration rates decreased from 4.6% to 3.1% from FY 2001-02 to FY 2012-13.
- Were the most likely to have had 1 visit only (12.6%) compared to the other racial/ethnic groups.
- Were more likely to have had Inpatient/ESU only services compared to other racial/ethnic groups.

Native Americans:

- Penetration rates for Native American children and youth are the lowest among all the racial/ethnic groups and rates and decreased from 4.0% to 1.8% from FY 2001-2 to FY 2012-13.
- Retention rates were the highest among all the racial/ethnic groups for 10 or more sessions (61.5%).



Adults and Older Adults



Hispanics:

- Penetration rates went up slightly over the study time period. However, Hispanic adults and older adults were proportionally less likely to utilize services based on their presence in the target population.
- Retention rates for 10 or more visits went up from 45.4% to 54.4% since FY 2006-07 among the Hispanic clients.

African Americans:

- Penetration rates for Outpatient services and All Services (Excluding Jail) increased across all 4 fiscal years.
- Retention rates among the African American clients increased from 45.9% to 53.8% since FY 2006-07; however, they were the most likely to have had only one visit (9.9%).
- Were more likely to have had only Jail services (24%) than the other racial/ethnic groups.
- Had the highest rate of being diagnosed with Schizophrenia or Schizoaffective Disorder (38.0%).

Asian/Pacific Islanders:

- Retention rates for 10 or more visits increased greatly from 39.1% in FY 2006-07 to 55.6% in FY 2012-13.
- Were the least likely to use only Jail services than other racial/ethnic groups and the tendency continued to decrease from FY 2006-07 to FY 2012-13.
- A large majority (73%) of Asian/Pacific Islander clients were diagnosed with either Schizophrenia and Schizoaffective Disorders (37%) or Major Depression Disorders (36%).
- Were more likely to be insured than all of the other racial/ethnic groups.

Native Americans:

- There was a net increase in penetration rates for Native American clients over the 4 time points. However, Native American clients had the lowest penetration rates among racial/ethnic groups, indicating they were less likely to utilize services.
- Retention rates for Native American clients for 10 or more visits increased from 48.7% to 56.5% from FY 2006-07 to FY 2012-13.

Data Summary

General Population, Target Population, and BHS Client Populations for San Diego County

Children, Youth, and Families Behavioral Health Services Distribution Rates

Adult and Older Adult Behavioral Health Services Distribution Rates

Factsheets by Race/Ethnicity

General Population, Target Population, and BHS Client Populations for San Diego County

RACE/ETHNICITY	Estimates of San Diego County Population (age 0-17)*	Target Population Children and Youth**	Actual Clients CYF BHS (FY 2012-13)
White (non Hispanic)	35%	13%	23%
Hispanic	49%	71%	62%
African American	6%	9%	12%
Asian/Pacific Islander	10%	6%	3%
Native American	<1%	2%	1%

RACE/ETHNICITY	Estimates of San Diego County Population (age 18+)*	Target Population A/OA**	Actual Clients A/OA BHS (FY 2012-13)
White (non Hispanic)	53%	22%	53%
Hispanic	30%	60%	25%
African American	5%	8%	15%
Asian/Pacific Islander	12%	9%	6%
Native American	<1%	2%	1%

*Source: 2011-2012 California Health Interview Survey data.

**Estimates of target population (eligible clients) were derived from California Health Interview Survey (CHIS) estimates applied against 2013 census population data estimates for San Diego County. Eligible clients were defined as San Diego County Uninsured or Medi-Cal under 200% FPL that could potentially have a SMI.

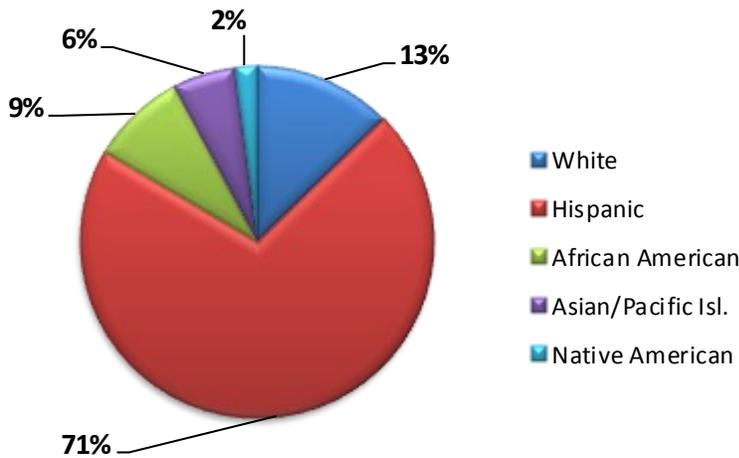
NOTE: Percentages may not add up to 100% due to rounding.

Children, Youth and Families Behavioral Health Services Distribution Rates

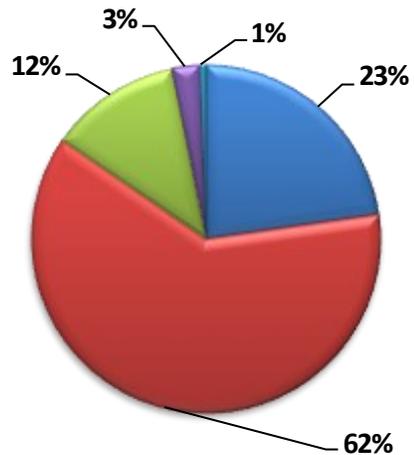
Target Population (Eligible Clients*) versus CYF BHS Clients FY 2012-13

Race/Ethnicity**	FY 2012-13			
	Eligible Clients*		Actual Clients	
	San Diego County Uninsured or Medi-Cal under 200% FPL for 2013		CYF BHS Clients	
	Number	%	Number	%
White	31,855	13%	3,805	23%
Hispanic	177,589	71%	10,346	62%
African American	22,007	9%	2,044	12%
Asian/Pacific Isl.	14,179	6%	437	3%
Native American	5,109	2%	91	1%
Total Clients	250,739	100%	16,723	100%

Eligible Clients: Estimates of San Diego County Uninsured or Medi-Cal under 200% FP for 2013



Actual Clients: CYF BHS Clients FY 2012-13



* Estimates of target population (eligible clients) were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population data estimates for San Diego County. Eligible clients were defined as San Diego County Uninsured or Medi-Cal under 200% FPL that could potentially have a SMI.

** For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

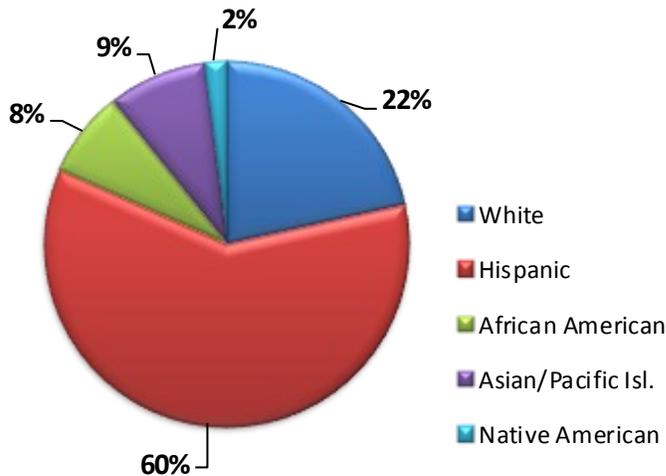
NOTE: Percentages may not add up to 100% due to rounding.

Adult and Older Adult Behavioral Health Services Distribution Rates

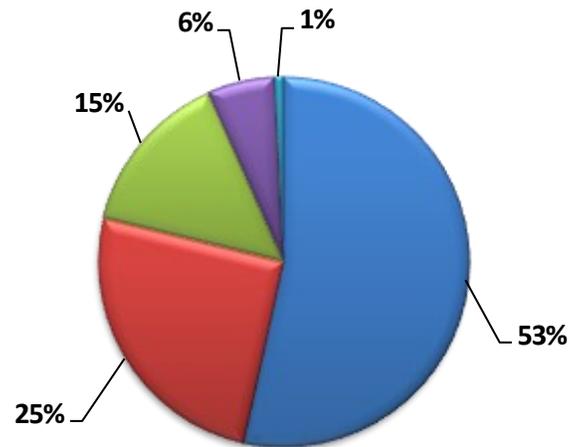
Target Population (Eligible Clients*) versus A/OA BHS Clients FY 2012-13

Race/Ethnicity**	FY 2012-13			
	Eligible Clients*		Actual Clients	
	San Diego County Uninsured or Medi-Cal under 200% FPL for 2013		A/OA BHS Clients	
	Number	%	Number	%
White	75,783	22%	19,619	53%
Hispanic	211,751	60%	9,294	25%
African American	26,911	8%	5,348	15%
Asian/Pacific Isl.	30,668	9%	2,147	6%
Native American	6,954	2%	276	1%
Total Clients	352,068	100%	36,684	100%

Eligible Clients: Estimates of San Diego County Uninsured or Medi-Cal under 200% FPL for 2013



Actual Clients: A/OA BHS Clients FY 2012-13



* Estimates of target population (eligible clients) were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population data estimates for San Diego County. Eligible clients were defined as San Diego County Uninsured or Medi-Cal under 200% FPL that could potentially have a SMI.

** For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories are reported (36,684). An additional 4,440 (11%) were of 'other' or 'unknown' race/ethnicity.

NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: White Children and Youth

Total Clients Served:

3,805 White children and youth clients were served by CYF BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, over half of the White children and youth clients (52%) were 12-17; however, the proportion of this age group has decreased since FY 2009-10. The proportion of White males has decreased since FY 2009-10.

Preferred Language:

The vast majority of White children and youth clients (99%) reported English as their preferred language.

Top 3 Diagnoses:

1. Depressive Disorders (19%)
2. Adjustment Disorders (18%)
3. Attention-Deficit/Hyperactivity Disorder (ADHD; 17%)

Service Utilization (Penetration Rates):

FY 2001-02:	28.2%
FY 2006-07:	15.6%
FY 2009-10:	13.7%
FY 2012-13:	11.9%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	26.4%
	10+ visits	63.1%
FY 2009-10:	<6 visits	26.3%
	10+ visits	61.5%
FY 2012-13:	<6 visits	29.2%
	10+ visits	58.4%

Type of Service Used in FY 2012-13:

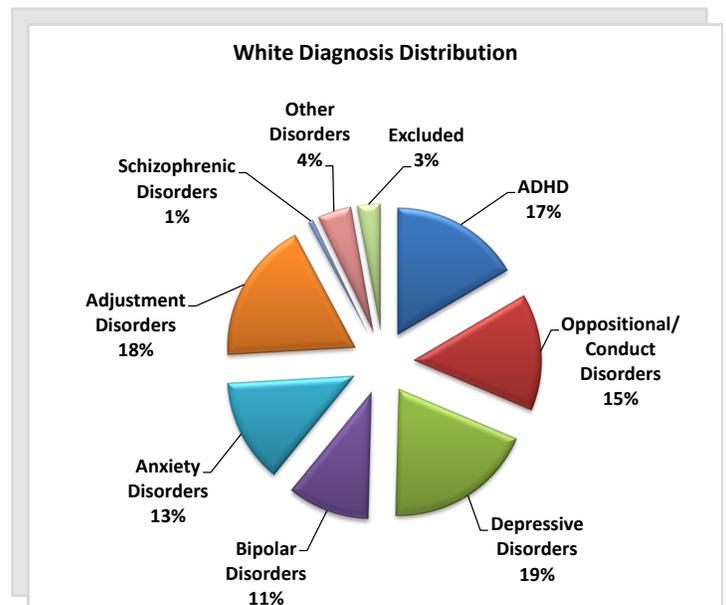
White children and youth predominantly used Outpatient services (98%).

Insurance Status in FY 2012-13:

6% of White children and youth were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
0-5	10%	9%	10%
6-11	29%	30%	32%
12-17	57%	57%	52%
18+	5%	5%	5%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	39%	38%	43%
Males	60%	62%	57%
Other/Unknown	<1%	<1%	<1%



NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: White Adults and Older Adults

Total Clients Served:

19,619 White adult and older adult clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

The proportion of older adult clients (ages 60+) served in A/OA BHS has been gradually increasing from 9% in FY 2006-07 to 14% in FY 2012-13. There is an increasing trend in the proportion of White males served since FY 2006-07.

Preferred Language:

The vast majority of White clients (97%) reported English as their preferred language.

Top 3 Diagnoses:

1. Major Depression Disorders (27%)
2. Schizophrenia and Schizoffective Disorders (26%)
3. Bipolar Disorders (19%)

Service Utilization (Penetration Rates):

FY 2001-02:	33.7%
FY 2006-07:	28.2%
FY 2009-10:	30.2%
FY 2012-13:	25.9%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	33.0%
	10+ visits	47.2%
FY 2009-10:	<6 visits	33.1%
	10+ visits	47.7%
FY 2012-13:	<6 visits	26.9%
	10+ visits	56.4%

Type of Service Used in FY 2012-13:

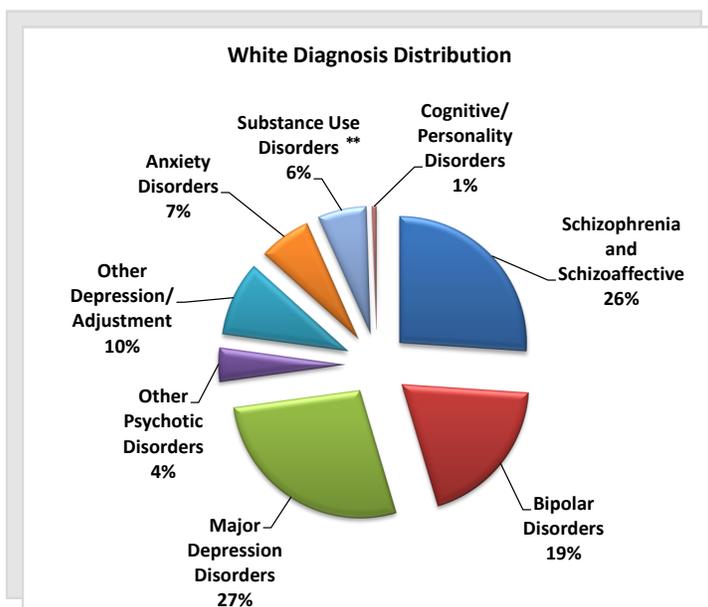
White clients used a higher proportion of Inpatient/Emergency services (21%) than any other racial/ethnic group.

Insurance Status in FY 2012-13:

45% of White clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18-24*	12%	13%	12%
25-59	79%	75%	74%
60+	9%	12%	14%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	48%	47%	45%
Males	51%	53%	55%
Other/Unknown	1%	<1%	<1%



* A small number of clients treated in A/OA BHS were under the age of 18.

** Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: Hispanic Children and Youth

Total Clients Served:

10,346 Hispanic children and youth clients were served by CYF BHS in FY 2012-13 (62% of the CYF BHS client population).

Age and Gender:

In FY 2012-13, half of the Hispanic children and youth clients (50%) served by CYF BHS were between the ages of 12 and 17 and 60% were male.

Preferred Language:

The majority of Hispanic children and youth clients (69%) reported English as their preferred language and 30% reported Spanish as their preferred language.

Top 3 Diagnoses:

1. Depressive Disorders (23%)
2. Adjustment Disorders (20%)
3. Oppositional/Conduct Disorders (19%)

Service Utilization (Penetration Rates):

FY 2001-02:	2.8%
FY 2006-07:	5.1%
FY 2009-10:	5.3%
FY 2012-13:	5.8%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	29.0%
	10+ visits	59.2%
FY 2009-10:	<6 visits	29.8%
	10+ visits	57.8%
FY 2012-13:	<6 visits	30.1%
	10+ visits	56.1%

Type of Service Used in FY 2012-13:

The majority of services utilized by Hispanic children and youth clients were Outpatient services (98%).

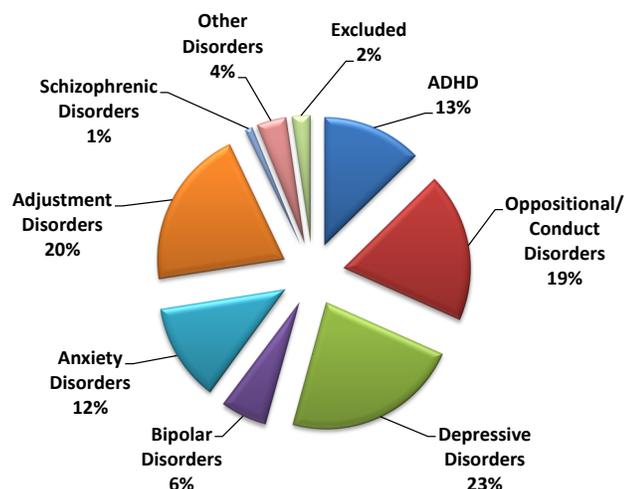
Insurance Status in FY 2012-13:

5% of Hispanic children and youth clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
0-5	10%	11%	11%
6-11	30%	30%	34%
12-17	57%	55%	50%
18+	4%	4%	5%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	38%	38%	40%
Males	61%	62%	60%
Other/Unknown	1%	<1%	<1%

Hispanic Diagnosis Distribution



Hispanic Ethnicity Categories	N	%
Mexican American/Chicano	8,466	82%
Other Hispanic/Latino	1,731	17%
Puerto Rican	76	1%
Dominican	35	<1%
Cuban	18	<1%
Salvadoran	20	<1%
TOTAL	10,346	100%

NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: Hispanic Adults and Older Adults

Total Clients Served:

9,294 Hispanic adult and older adult clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, 69% of Hispanic clients were between the ages of 25 and 59. There has been an increasing trend in the proportion of Hispanic males served since FY 2006-07.

Preferred Language:

The majority of Hispanic clients (70%) reported English as their preferred language and 28% reported Spanish as their preferred language.

Top 3 Diagnoses:

1. Major Depression Disorders (31%)
2. Schizophrenia and Schizoaffective Disorders (27%)
3. Other Depression/Adjustment Disorders (12%); and Bipolar Disorders (12%)

Service Utilization (Penetration Rates):

FY 2001-02:	3.5%
FY 2006-07:	4.2%
FY 2009-10:	4.3%
FY 2012-13:	4.4%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	34.0%
	10+ visits	47.7%
FY 2009-10:	<6 visits	35.5%
	10+ visits	46.5%
FY 2012-13:	<6 visits	31.3%
	10+ visits	54.4%

Type of Service Used in FY 2012-13:

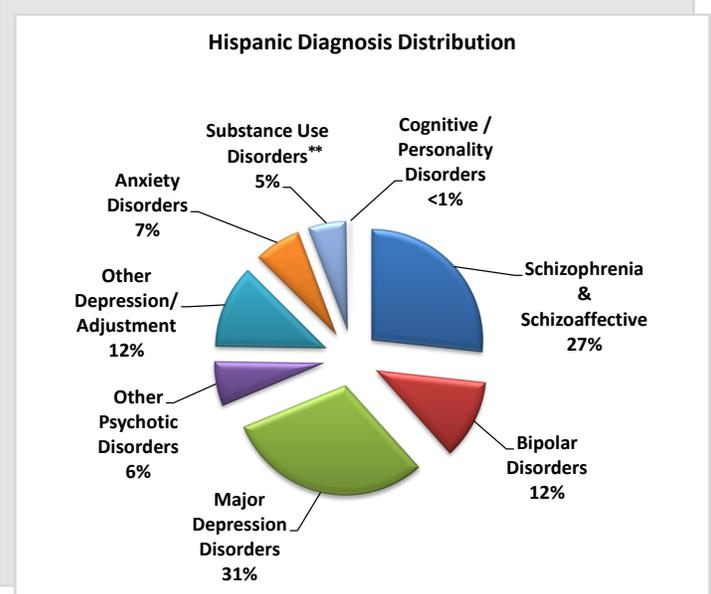
The majority of services utilized by Hispanic clients were Outpatient services (66%).

Insurance Status in FY 2012-13:

39% of Hispanic clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18-24*	19%	22%	24%
25-59	75%	71%	69%
60+	7%	6%	7%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	52%	50%	44%
Males	47%	50%	55%
Other/Unknown	1%	<1%	<1%



Hispanic Ethnicity Categories	N	%
Mexican American/Chicano	7,281	78%
Other Hispanic Latino	1,585	17%
Puerto Rican	223	2%
Cuban	97	1%
Dominican	69	1%
Salvadoran	39	<1%
Total	9,294	100%

* A small number of clients treated in A/OA BHS were under the age of 18.
 ** Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.
 NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: African American Children and Youth

Total Clients Served:

2,044 African American children and youth clients were served by CYF BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, the majority of the African American children and youth clients (53%) were between the ages of 12 and 17, and the proportion of clients ages 18 and over increased from FY 2006-07. Nearly two thirds of the clients were male (62%).

Preferred Language:

2,036 out of 2,044 African American children and youth clients (nearly 100%) reported English as their preferred language.

Top 3 Diagnoses:

1. Attention-Deficit/Hyperactivity Disorder (ADHD; 20%)
2. Oppositional/Conduct Disorders (20%)
3. Depressive Disorders (16%); and Adjustment Disorders (16%)

Service Utilization (Penetration Rates):

FY 2001-02:	12.4%
FY 2006-07:	12.4%
FY 2009-10:	10.9%
FY 2012-13:	9.3%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	28.2%
	10+ visits	60.6%
FY 2009-10:	<6 visits	26.0%
	10+ visits	61.8%
FY 2012-13:	<6 visits	28.5%
	10+ visits	59.9%

Type of Service Used in FY 2012-13:

African American children and youth clients predominantly used Outpatient services (97%) and were the largest racial/ethnic group to utilize JFS Only services (2.2%).

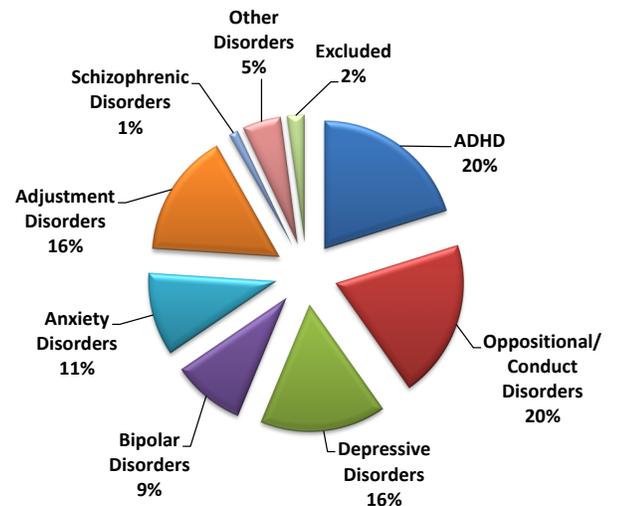
Insurance Status in FY 2012-13:

4% of African American children and youth clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
0-5	9%	9%	9%
6-11	29%	28%	29%
12-17	58%	57%	53%
18+	5%	6%	8%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	38%	38%	38%
Males	61%	61%	62%
Other/Unknown	1%	<1%	<1%

African American Diagnosis Distribution



NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: African American Adults and Older Adults

Total Clients Served:

5,348 African American adult and older adult clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, the largest majority (75%) of African American clients were between the ages of 25 and 59 and were male (61%).

Preferred Language:

Most African American clients (98%) served by A/OA BHS reported English as their preferred language.

Top 3 Diagnoses:

1. Schizophrenia and Schizoaffective Disorders (38%)
2. Major Depression Disorders (22%)
3. Bipolar Disorders (11%); and Other Depression/Adjustment Disorders (11%)

Service Utilization (Penetration Rates):

FY 2001-02:	17.9%
FY 2006-07:	19.0%
FY 2009-10:	20.5%
FY 2012-13:	19.9%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	34.4%
	10+ visits	45.9%
FY 2009-10:	<6 visits	33.3%
	10+ visits	47.6%
FY 2012-13:	<6 visits	31.4%
	10+ visits	53.8%

Type of Service Used in FY 2012-13:

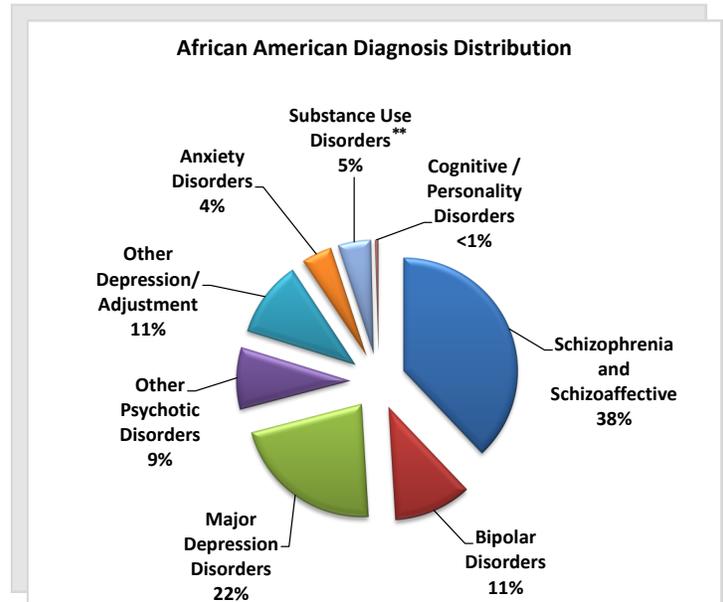
African American A/OA clients had the highest proportion of Jail Only services (24%), 6% higher than the second highest group that used Jail Only services (Hispanic, 17%).

Insurance Status in FY 2012-13:

38% of African American clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18-24*	13%	17%	17%
25-59	82%	76%	75%
60+	5%	7%	8%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	47%	43%	38%
Males	53%	56%	61%
Other/Unknown	<1%	<1%	<1%



* A small number of clients treated in A/OA BHS were under the age of 18.

** Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: Asian/Pacific Islander Children and Youth

Total Clients Served:

437 Asian/Pacific Islander children and youth clients were served by CYF BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, over half of the Asian/Pacific Islander CYF clients (53%) were between the ages of 12 and 17, but the proportion of that age group has decreased since FY 2006-07. The proportion of clients ages 6-11 has increased over three fiscal years. Nearly two thirds of the clients were male (61%).

Preferred Language:

85% of Asian/Pacific Islander children and youth clients reported English as their preferred language, 4% preferred Vietnamese and 4% preferred Tagalog.

Top 3 Diagnoses:

1. Depressive Disorder (25%)
2. Adjustment Disorders (19%)
3. Anxiety Disorders (14%)

Service Utilization (Penetration Rates):

FY 2001-02:	4.6%
FY 2006-07:	3.2%
FY 2009-10:	3.4%
FY 2012-13:	3.1%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	33.8%
	10+ visits	54.1%
FY 2009-10:	<6 visits	28.7%
	10+ visits	56.8%
FY 2012-13:	<6 visits	33.6%
	10+ visits	55.4%

Type of Service Used in FY 2012-13:

Asian/Pacific Islander children and youth clients predominantly used Outpatient services (94%). They also used Inpatient/ESU Only services the most out of all other racial/ethnic groups (5%).

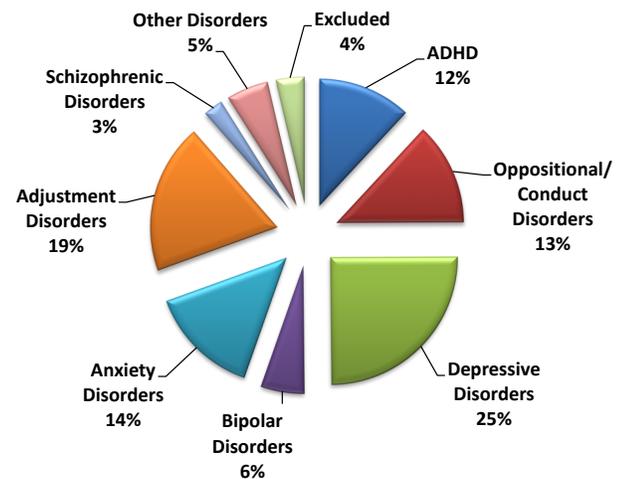
Insurance Status in FY 2012-13:

7% of Asian/Pacific Islander children and youth clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
0-5	11%	8%	8%
6-11	25%	28%	32%
12-17	59%	59%	53%
18+	5%	5%	6%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	39%	38%	39%
Males	60%	62%	61%
Other/Unknown	1%	<1%	<1%

Asian/Pacific Islander Diagnosis Distribution



CYF BHS Asian Subcategories					
Description	N	%	Description	N	%
Filipino	140	32%	Samoan	19	4%
Vietnamese	76	17%	Korean	14	3%
Other Asian	35	8%	Guamanian	13	3%
Cambodian	33	8%	Asian Indian	12	3%
Laotian	23	5%	Hawaiian Native	7	2%
Other Pacific Islander	23	5%	Hmong	2	<1%
Japanese	21	5%			
Chinese	19	4%	Total	437	100%

NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: Asian/Pacific Islander Adults and Older Adults

Total Clients Served:

2,147 Asian/Pacific Islander adult and older adult clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, a large majority (73%) of Asian/Pacific Islander clients were between the ages of 25 and 59 and more than half were female (56%).

Preferred Language:

54% of Asian/Pacific Islander clients reported English as their preferred language with 19% preferring Vietnamese and 15% preferring 'Other Asian' languages.

Top 3 Diagnoses:

- Schizophrenia and Schizoaffective Disorders (37%)
- Major Depression Disorders (36%)
- Bipolar Disorders (8%)

Service Utilization (Penetration Rates):

FY 2001-02:	6.1%
FY 2006-07:	7.9%
FY 2009-10:	8.3%
FY 2012-13:	7.0%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	33.6%
	10+ visits	39.1%
FY 2009-10:	<6 visits	37.5%
	10+ visits	37.0%
FY 2012-13:	<6 visits	24.4%
	10+ visits	55.6%

Type of Service Used in FY 2012-13:

Asian/Pacific Islander A/OA clients had the lowest proportions of Jail Only services (7%) and Inpatient/Emergency services (14%), and the highest proportion of Outpatient services (79%) than any other racial/ethnic group.

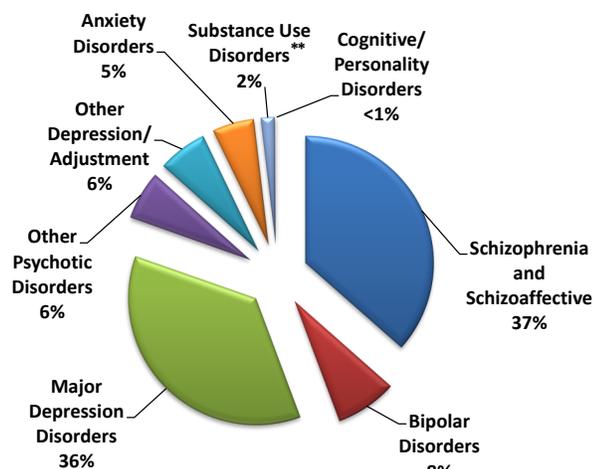
Insurance Status in FY 2012-13:

31% of Asian/Pacific Islander clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18-24*	10%	11%	10%
25-59	75%	73%	73%
60+	15%	15%	17%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	54%	54%	56%
Males	46%	45%	44%
Other/Unknown	1%	<1%	<1%

Asian/Pacific Islander Diagnosis Distribution



A/OA BHS Asian/Pacific Islander Subcategories					
Description	N	%	Description	N	%
Filipino	638	30%	Other Pac.Isl.	56	3%
Vietnamese	557	26%	Asian Indian	43	2%
Other Asian	178	8%	Hawaiian Native	40	2%
Cambodian	177	8%	Samoan	31	1%
Chinese	118	5%	Guamanian	29	1%
Laotian	95	4%	Hmong	3	<1%
Korean	92	4%	Total	2,147	100%
Japanese	90	4%			

* A small number of clients treated in A/OA BHS were under the age of 18.
 ** Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add to 100% due to rounding.

Factsheet: Native American Children and Youth

Total Clients Served:

91 Native American children and youth clients were served by CYF BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, slightly less than half (47%) of the Native American children and youth clients were ages 12-17, and 51% were female.

Preferred Language:

98% of Native American children and youth clients reported English as their preferred language.

Top 3 Diagnoses:

1. Adjustment Disorders (30%)
2. Oppositional/Conduct Disorders (15%)
3. Depressive Disorders (15%)

Service Utilization (Penetration Rates):

FY 2001-02:	4.0%
FY 2006-07:	2.4%
FY 2009-10:	2.5%
FY 2012-13:	1.8%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	28.7%
	10+ visits	59.4%
FY 2009-10:	<6 visits	26.2%
	10+ visits	61.5%
FY 2012-13:	<6 visits	28.6%
	10+ visits	61.5%

Type of Service Used in FY 2012-13:

Native American children and youth clients predominantly used Outpatient services (99%). Only 1% of Native American clients used Inpatient/Emergency services and no Native American children or youth clients used Jail Only services (0%).

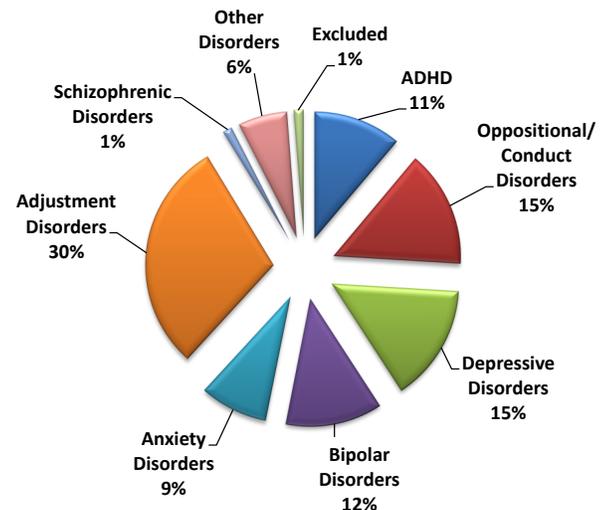
Insurance Status in FY 2012-13:

4% of Native American children and youth clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
0-5	7%	6%	11%
6-11	32%	34%	36%
12-17	54%	52%	47%
18+	6%	8%	5%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	44%	42%	51%
Males	56%	58%	49%
Other/Unknown	<1%	0%	0%

Native American Diagnosis Distribution



NOTE: Percentages may not add up to 100% due to rounding.

Factsheet: Native American Adults and Older Adults

Total Clients Served:

276 Native American adult and older adult clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

In FY 2012-13, a large majority (76%) of Native American clients were ages 25-59 and more than half were female (53%). The proportion of clients ages 60 and over has increased since FY 2006-07, while the proportion of clients ages 25-59 has decreased.

Preferred Language:

97% of Native American clients reported English as their preferred language.

Top 3 Diagnoses:

1. Schizophrenia and Schizoaffective Disorders (32%)
2. Major Depression Disorders (26%)
3. Bipolar Disorders (18%)

Service Utilization (Penetration Rates):

FY 2001-02:	3.6%
FY 2006-07:	3.5%
FY 2009-10:	4.7%
FY 2012-13:	4.0%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	34.2%
	10+ visits	48.7%
FY 2009-10:	<6 visits	33.8%
	10+ visits	45.9%
FY 2012-13:	<6 visits	23.0%
	10+ visits	56.5%

Type of Service Used in FY 2012-13:

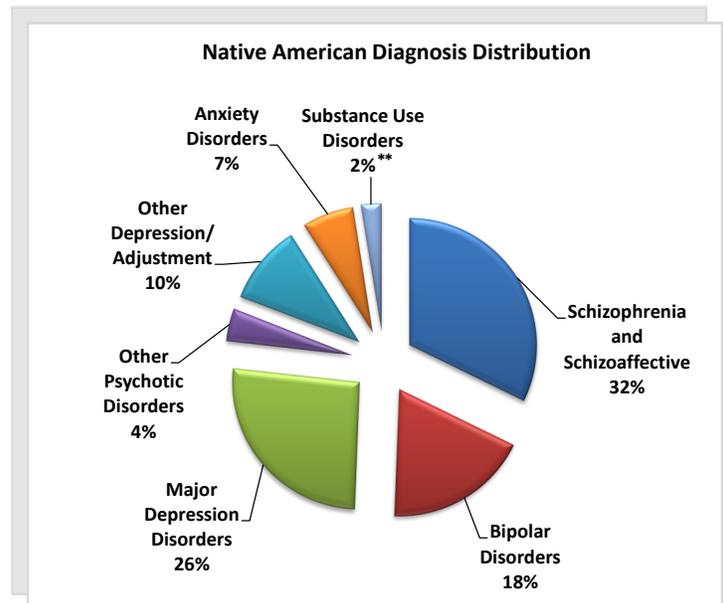
Native American A/OA clients utilized mostly Outpatient services (73%), and were the second least likely racial/ethnic group to utilize JFS Only services (11.2%).

Insurance Status in FY 2012-13:

38% of Native American clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18-24*	13%	14%	14%
25-59	83%	79%	76%
60+	4%	7%	9%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	56%	52%	53%
Males	44%	48%	47%
Other/Unknown	<1%	0%	0%



* A small number of clients treated in A/OA BHS were under the age of 18.

** Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add to 100% due to rounding.

Service Utilization and Engagement

Disparities in Service Utilization: Analysis of Penetration Rates

Penetration Rates:
by Age
by Race/Ethnicity

Disparities in Engagement: Analysis of Retention Rates

Retention Rates:
by Age
by Race/Ethnicity

Disparities in Service utilization:

Analysis of Penetration Rates

Disparities in service utilization were identified by comparing the target population to the number who received San Diego County Behavioral Health Services (penetration rate). An algorithm—based on the 2007-2013 California Health Interview Survey (CHIS) estimates of the proportional representation of the population who were uninsured or Medi-Cal/Medi-Care, and were under 200% of the federal poverty level that could potentially have a serious mental illness—was used to estimate the eligible population for each ethnicity and age category. This resulted in a constant for each category that was applied against the population estimate from the most recent census data to derive the estimates for the eligible target population.

Penetration Rates: Children and Youth—Penetration Rates by Age

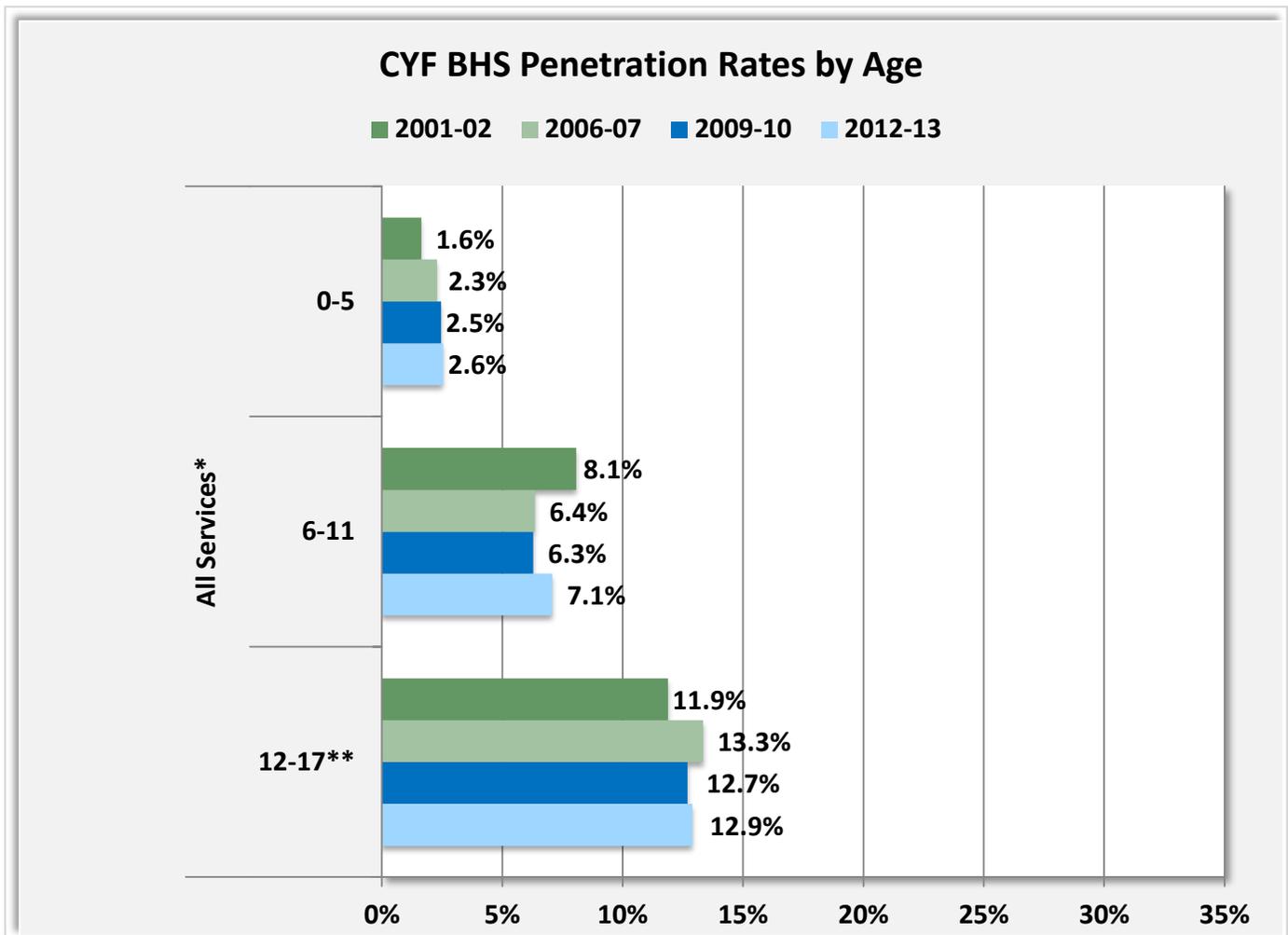
Penetration rates for CYF BHS clients were examined across three age groups: 0-5, 6-11, and 12-17. Penetration rates were calculated as the number of actual clients within a specific age group (i.e. 0-5, 6-11, and 12-17) who received services (CYF BHS clients) divided by number of potential clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries that could potentially have a SMI) within that age group (i.e. 0-5, 6-11, and 12-17).

Differences in penetration rates were examined across years by comparing penetration rates in FYs 2001-02, 2006-07, 2009-10, and 2012-13.

Detailed tabular data are provided in Appendix A, Table 1.

- Clients ages 12-17 had the highest penetration rates across all fiscal years.
- Clients ages 0-5 had the lowest penetration rates across all fiscal years.
- Penetration rates for clients ages 0-5 increased across all fiscal years.

*Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates.



NOTE: Percentages may not add up to 100% due to rounding.

* All CYF services were combined into the All Services so that the data would be comparable to how it was generated in previous fiscal years.

** This category includes the 9,191 clients ages 12-17, plus an additional 923 clients ages 18+ who although over 18 years of age also received services through CYF BHS.

Penetration Rates: Children and Youth—Penetration Rates by Race/Ethnicity

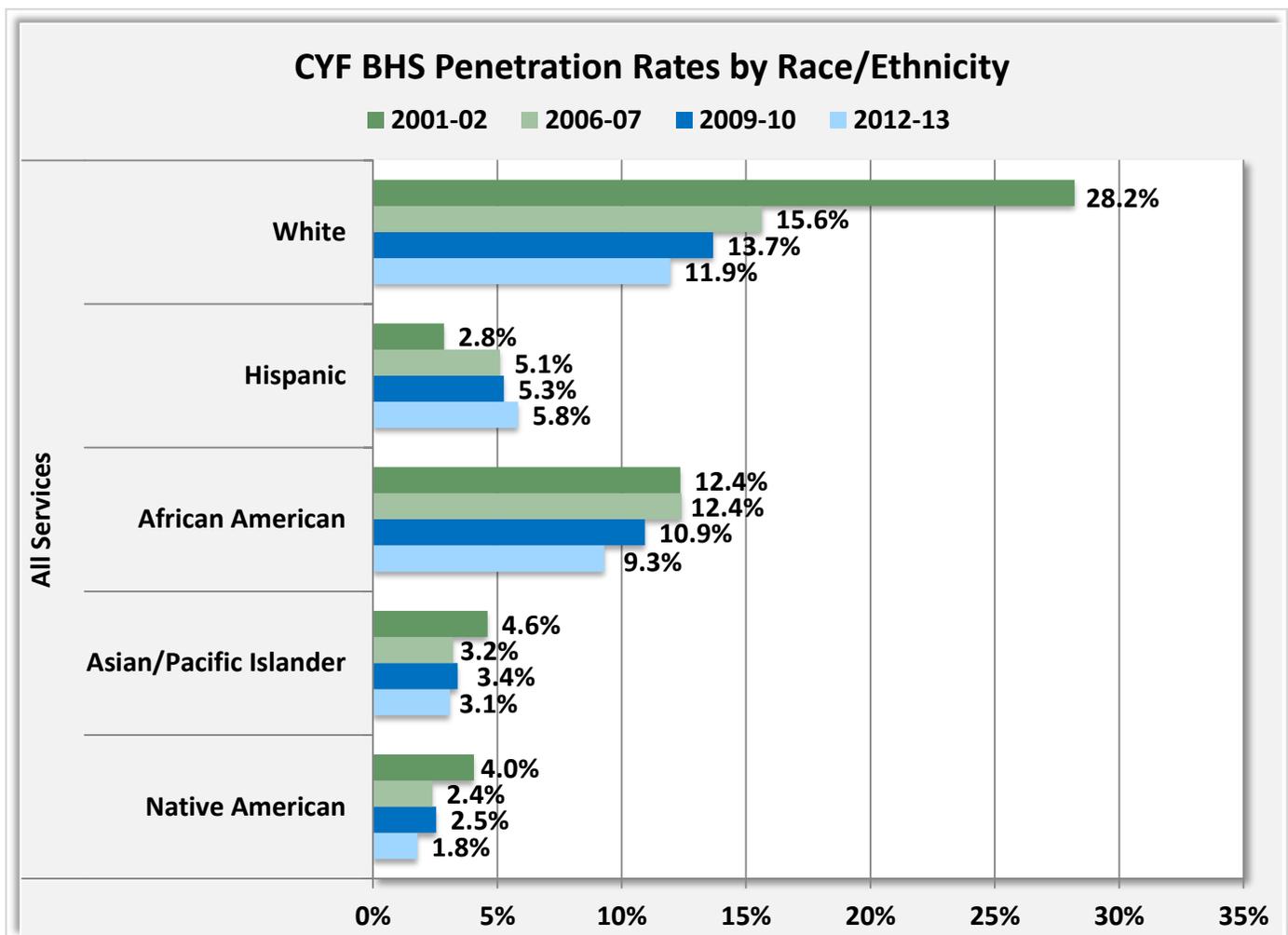
Penetration rates for CYF BHS clients were examined across five race/ethnicity groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Penetration rates were calculated as number of actual clients within a specific racial/ethnic group (i.e. Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans) who received services (CMHS clients) divided by number of potential clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries that could potentially have a SMI) within that racial/ethnic group.

Differences in penetration rates were examined across years by comparing penetration rates in FYs 2001-02, 2006-07, 2009-10, and 2012-13.

Detailed tabular data are provided in Appendix A, Table 2.

- Although White clients had the highest penetration rates across all the fiscal years, there was a steady decline in penetration rates for White clients over time.
- Hispanic, Native American, and Asian/Pacific Islander clients had the lowest penetration rates across all the fiscal years. While similarly low, the penetration rates for the Hispanic CYF clients have increased since FY 2001-02 to FY 2012-13 from 2.8% to 5.8%.

*Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates.



NOTE: Percentages may not add up to 100% due to rounding.

Penetration Rates: Adults and Older Adults—Penetration Rates by Age

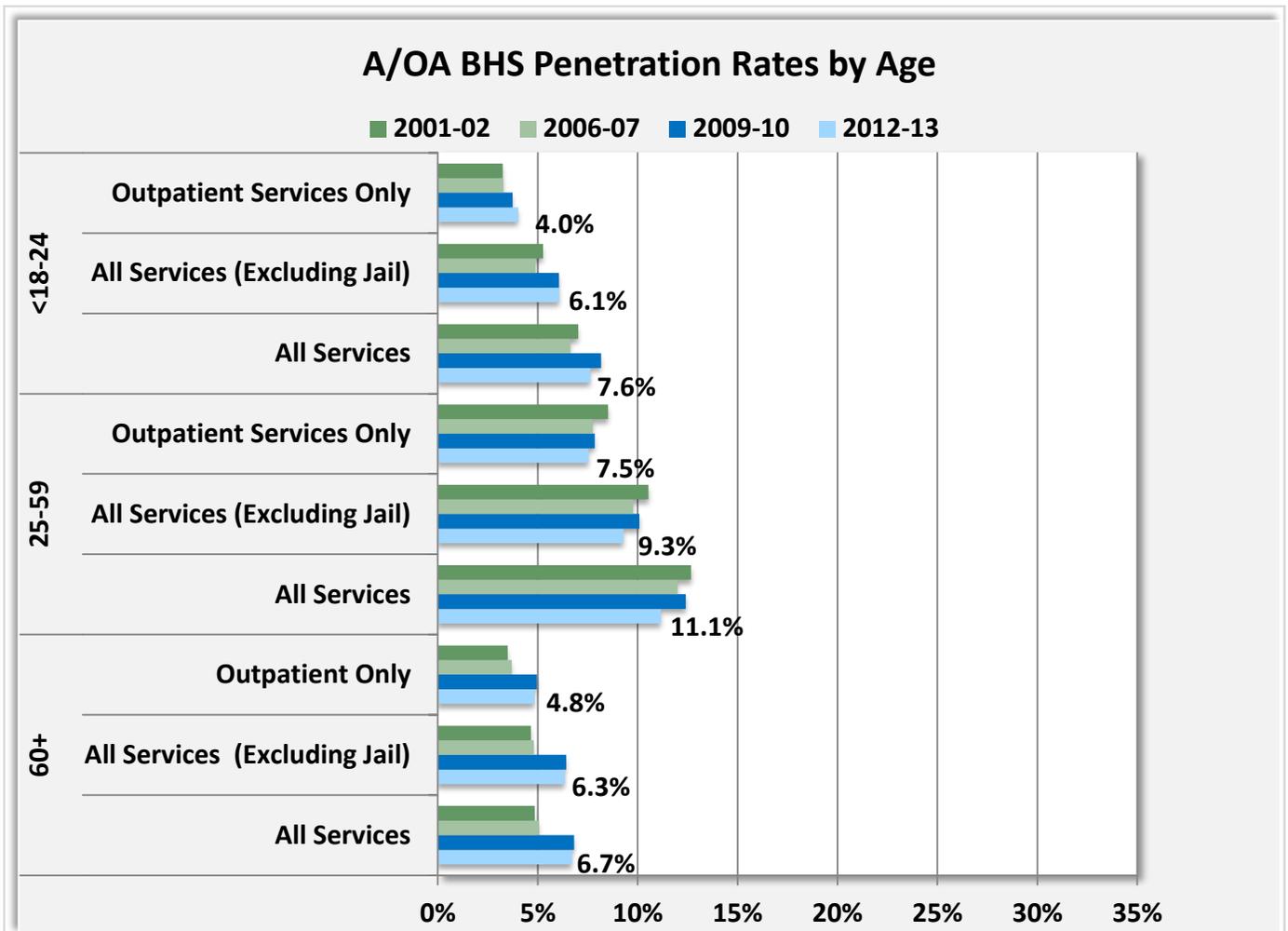
Penetration rates for Outpatient Services Only, All Services (Excluding Jail), and All Services, were examined across three age groups: <18-24, 25-59, and 60+. Penetration rates were calculated as number of actual clients within a specific age group (i.e. <18-24, 25-59, and 60+) who received services (A/OA BHS clients) divided by number of potential clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries that could potentially have a SMI) within that age group (i.e. <18-24, 25-59, and 60+). Each age grouping was further broken down by three service categories: (1) Outpatient Services Only, (2) All Services (Excluding Jail), and (3) All Services. The category excluding services provided while in Jail allows for the examination of penetration rates uninfluenced by mandatory services such as those provid-

ed as part of the justice system. Differences in penetration rates were examined across years by comparing penetration rates in FYs 2001-02, 2006-07, 2009-10, and 2012-13.

Detailed tabular data are provided in Appendix A, Table 3. The numbers displayed in the graph below are the penetration rates for FY 2012-13.

- Clients ages 18-24 had the lowest penetration rates for Outpatient Services for all four fiscal years.
- Clients ages 25-59 had the highest penetration rates for All Services for all four fiscal years.
- Clients ages 60+ had the lowest penetration rates for All Services combined for all four fiscal years.

*Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates.



NOTE: Percentages may not add up to 100% due to rounding.

Penetration Rates:

Adults and Older Adults—Penetration Rates by Race/Ethnicity

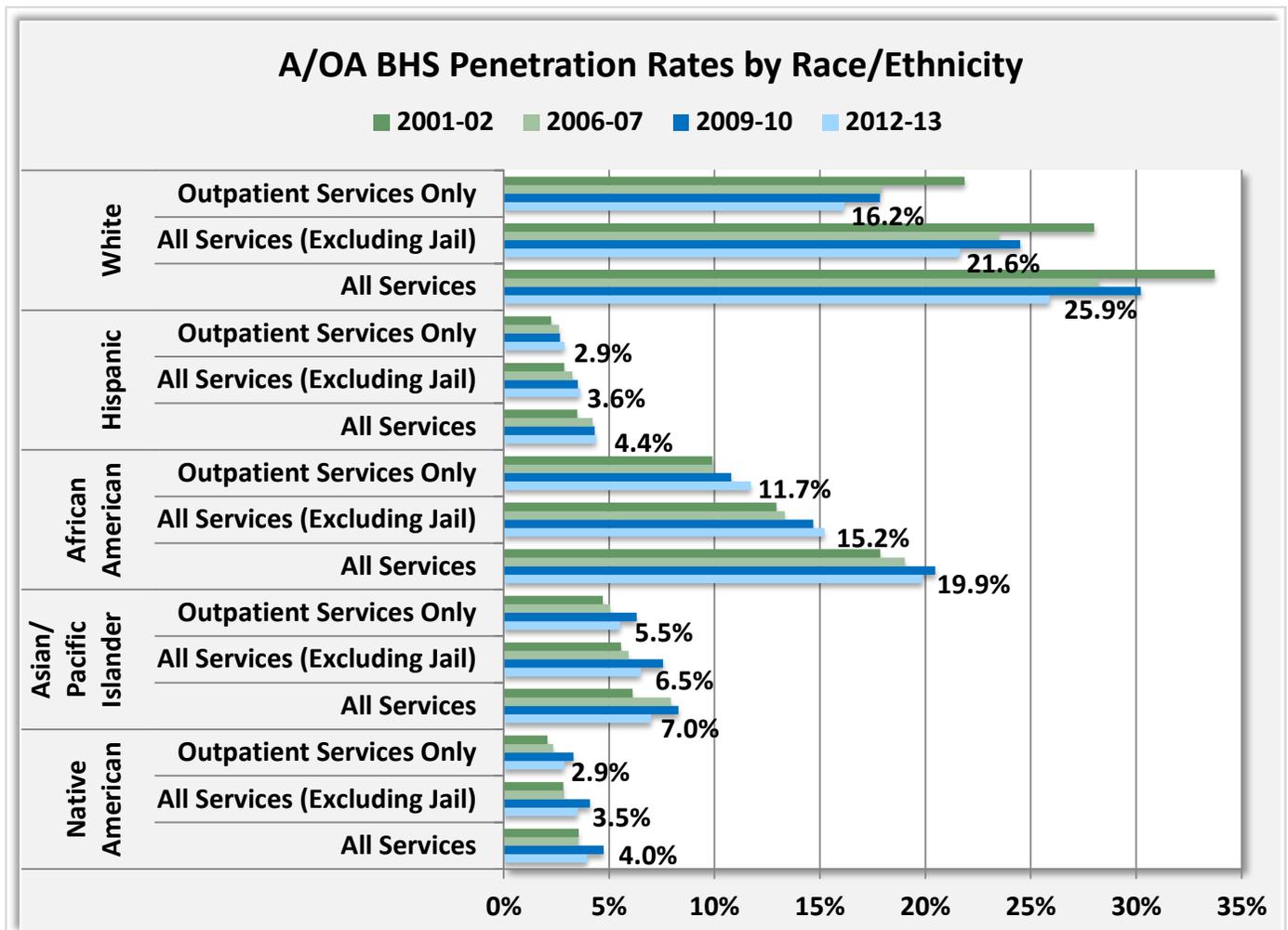
Penetration rates for Outpatient Services Only, All Services (Excluding Jail), and All Services, were examined across five race/ethnicity groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Penetration rates were calculated as number of actual clients within a specific racial/ethnic group (i.e., Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans) who received services (A/OA BHS clients) divided by number of potential clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries that could potentially have a SMI) within that racial/ethnic group.

Differences in penetration rates were examined across years by comparing penetration rates in FY 2001-02, 2006-07, 2009-10, and 2012-13.

Detailed tabular data are provided in Appendix A, Table 4. Then numbers displayed in the graph below are the penetration rates for FY 2012-13.

- There was a generally increasing trend in penetration rates from FY 2001-02 to FY 2012-13 across all types of services for every racial/ethnic group except for White.
- Hispanic and Native American clients had the lowest penetration rates for all three categories of services across all the fiscal years.
- White clients had the highest penetration rates for all three categories of services over all the fiscal years.

*Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates.



NOTE: Percentages may not add up to 100% due to rounding.

Disparities in Engagement:

Analysis of Retention Rates

Disparities in engagement were identified by analyzing the percentage of clients who continued services by number of visits for adults and the number of sessions for children (retention rate). For the analyses of retention rates, only data from FY's 2006-07, 2009-10, and 2012-13 were compared. Fiscal year 2001-02 was omitted from these analyses because the data from that fiscal year was recorded in the previously used INSYST MIS, which tracked numbers of visits and sessions differently than Anasazi (the current MIS) and thus comparable numbers could not be calculated.

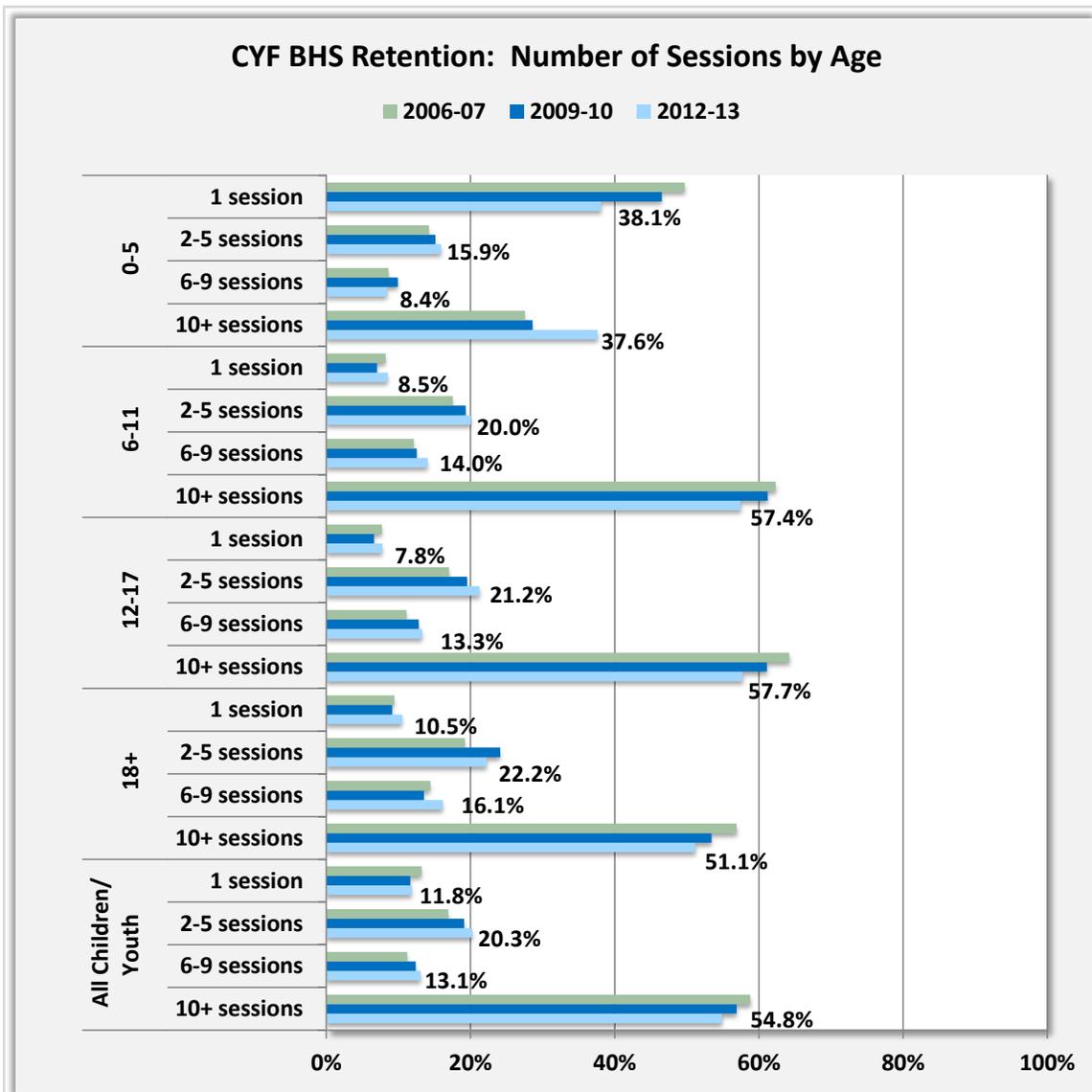
Retention Rates: Children and Youth—Retention Rates by Age

Service retention rates for CYF BHS clients were examined in FYs 2006-07, 2009-10, and 2012-13 across four age groups: 0-5, 6-11, 12-17, 18+. Retention rates were defined as the number of sessions for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 5. Numbers displayed in the graph below are retention rates for FY 2012-13.

- 54.8% of all child and youth clients were in services for 10 or more sessions.

- Among the clients ages 0-5, retention rates for 10 or more sessions increased greatly since FY 2006-07, while simultaneously the retention rates for 10 or more sessions decreased for all other age categories over the same time period.
- Clients ages 0-5 were most likely to have only one session (in many cases, this visit was for assessment purposes).
- Clients ages 6-11 and 12-17 had the highest retention rates, and were more likely than the other age groups to continue services past 10 sessions.



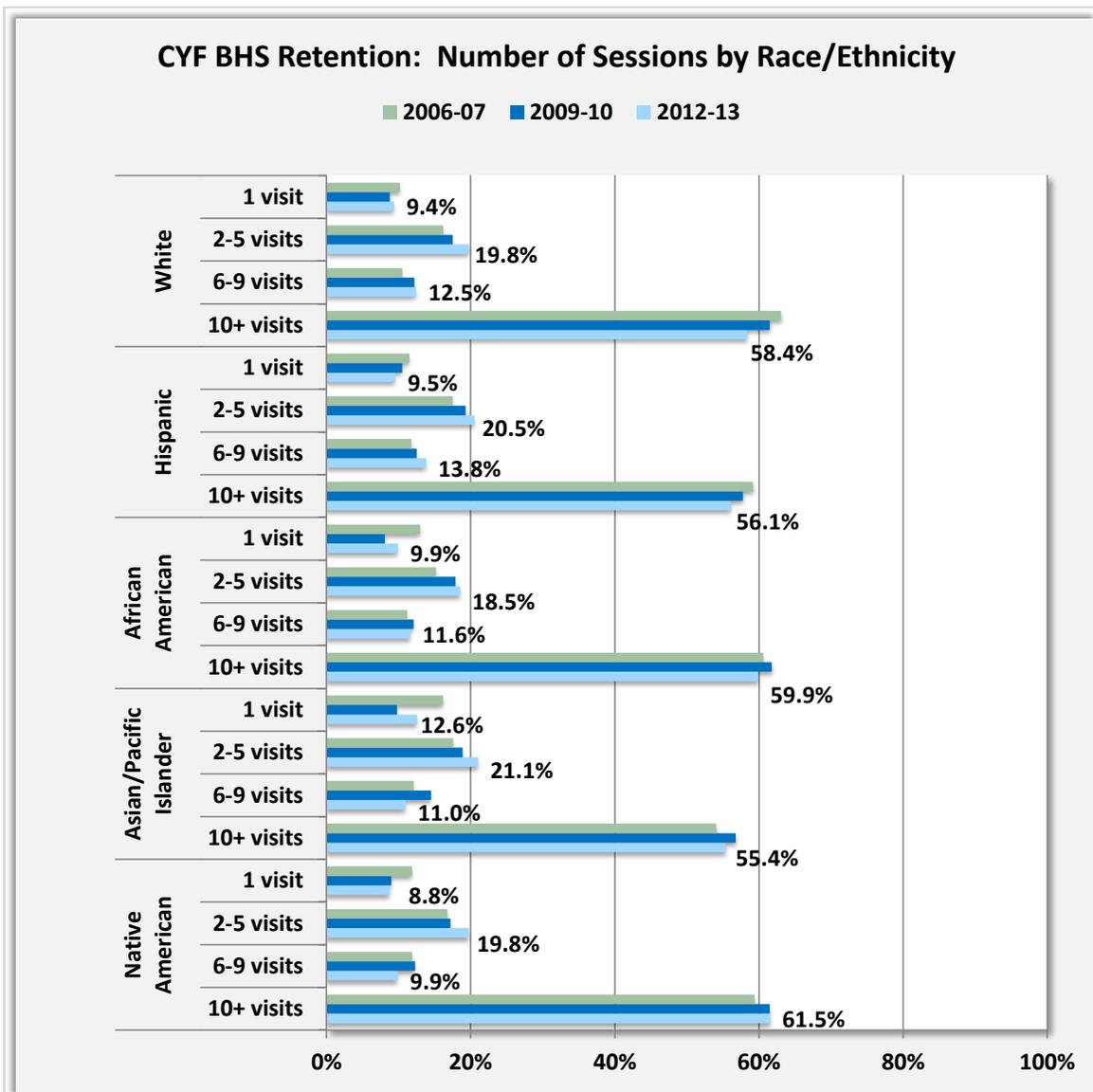
NOTE: All CYF services were included in the data reported above so the data would be comparable to how it was generated in previous fiscal years. Percentages may not add up to 100% due to rounding.

Retention Rates: Children and Youth—Retention Rates by Race/Ethnicity

Service retention rates for CYF BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13 across five racial/ethnic groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Retention rates were defined as the number of sessions for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 6. Numbers displayed in the graph below are retention rates for FY 2012-13.

- Asian/Pacific Islander clients were slightly more likely to have only one session than the other racial/ethnic groups in FY 2012-13.
- African American clients had slightly higher retention rates for six or more sessions.
- Asian/Pacific Islander clients had lower retention rates than any other racial/ethnic group for 10 or more sessions.



NOTE: All CYF services were included in the data reported above so the data would be comparable to how it was generated in previous fiscal years. Percentages may not add up to 100% due to rounding.

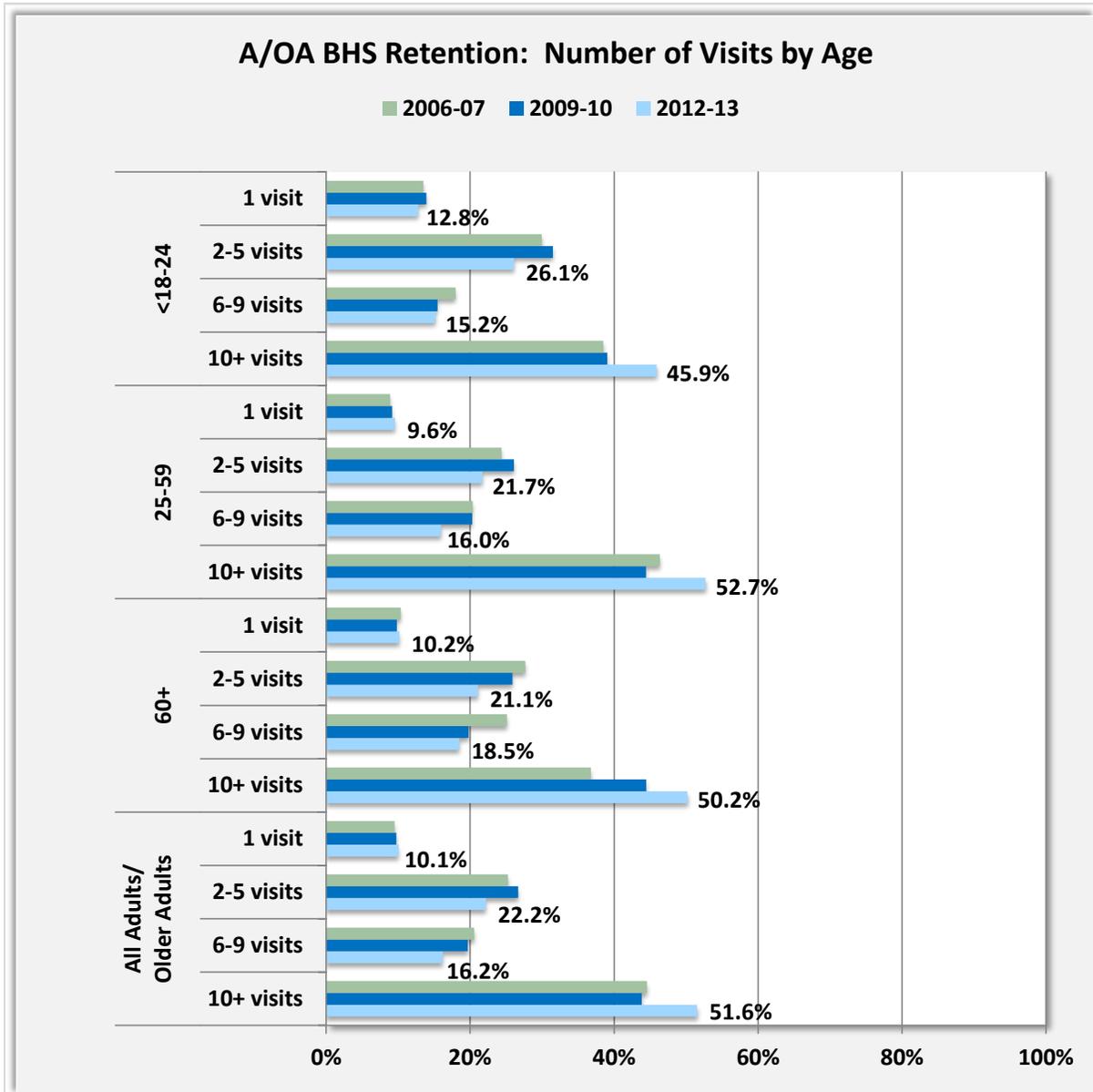
Retention Rates: Adults and Older Adults—Retention Rates by Age

Outpatient service* retention rates for A/OA BHS clients were examined in FYs 2006-07, 2009-10, and 2012-13 across three age groups: <18-24, 25-59, and 60+. Retention rates were defined as the number of Outpatient visits for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 7. The numbers displayed in the graph below are the retention rates for FY 2012-13.

- 51.6% of all clients continued services with A/OA BHS for 10 or more visits.
- Clients age <18-24 were the most likely age group to have had less than 6 visits.
- Clients age 25-59 were most likely to have had 10 or more visits.
- Retention rates for 10 or more visits increased across all age groups.

* Outpatient services include Assertive Community Treatment (ACT), Behavioral Health Court, Case Management, Fee-For-Service, and Prevention services.



NOTE: Percentages may not add up to 100% due to rounding.

Retention Rates:

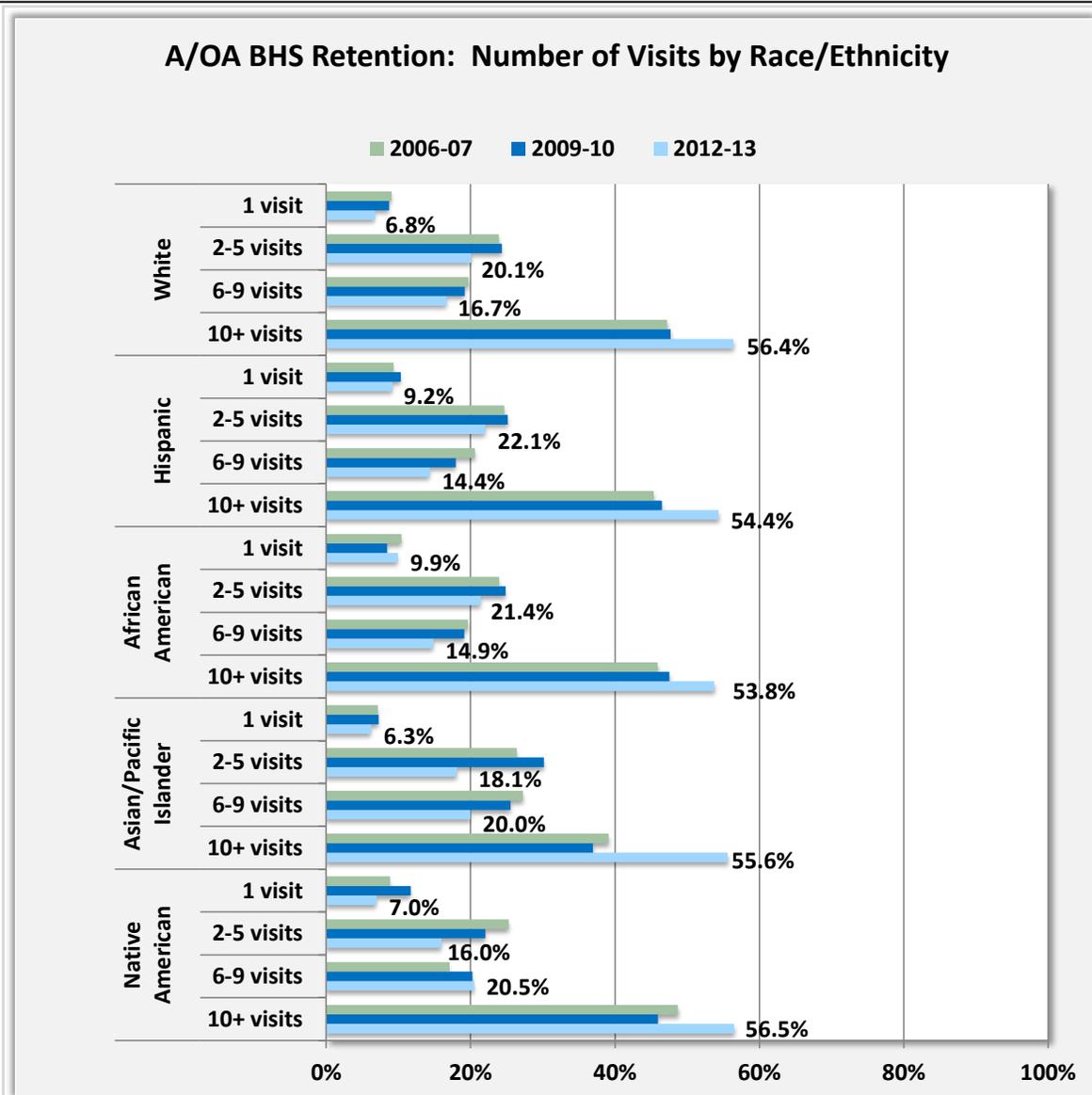
Adults and Older Adults—Retention Rates by Race/Ethnicity

Outpatient service* retention rates for A/OA BHS clients were examined in FYs 2006-07, 2009-10, and 2012-13 across five racial/ethnic groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Retention rates were defined as the number of Outpatient visits for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 8. Numbers displayed in the graph below are retention rates for FY 2012-13.

* Outpatient services include Assertive Community Treatment (ACT), Behavioral Health Court, Case Management, Fee-For-Service, and Prevention services.

- African American and Hispanic clients were the most likely to have had only one visit (9.9% and 9.2%, respectively).
- Hispanic and African American clients had the highest retention rates for 2-5 visits of all other racial/ethnic groups (22.1% and 21.4%, respectively).
- Native American (77.0%) and Asian/Pacific Islander (75.6%) clients were the most likely to have six or more visits and least likely to have fewer than 6 visits (23.0% and 24.4%, respectively).
- Across all the racial/ethnic groups more than half of the clients were retained in services for 10 or more visits.



NOTE: Percentages may not add up to 100% due to rounding.

Type of Service Used

**Disparities in Type of Service Used:
By Age
By Race/Ethnicity**

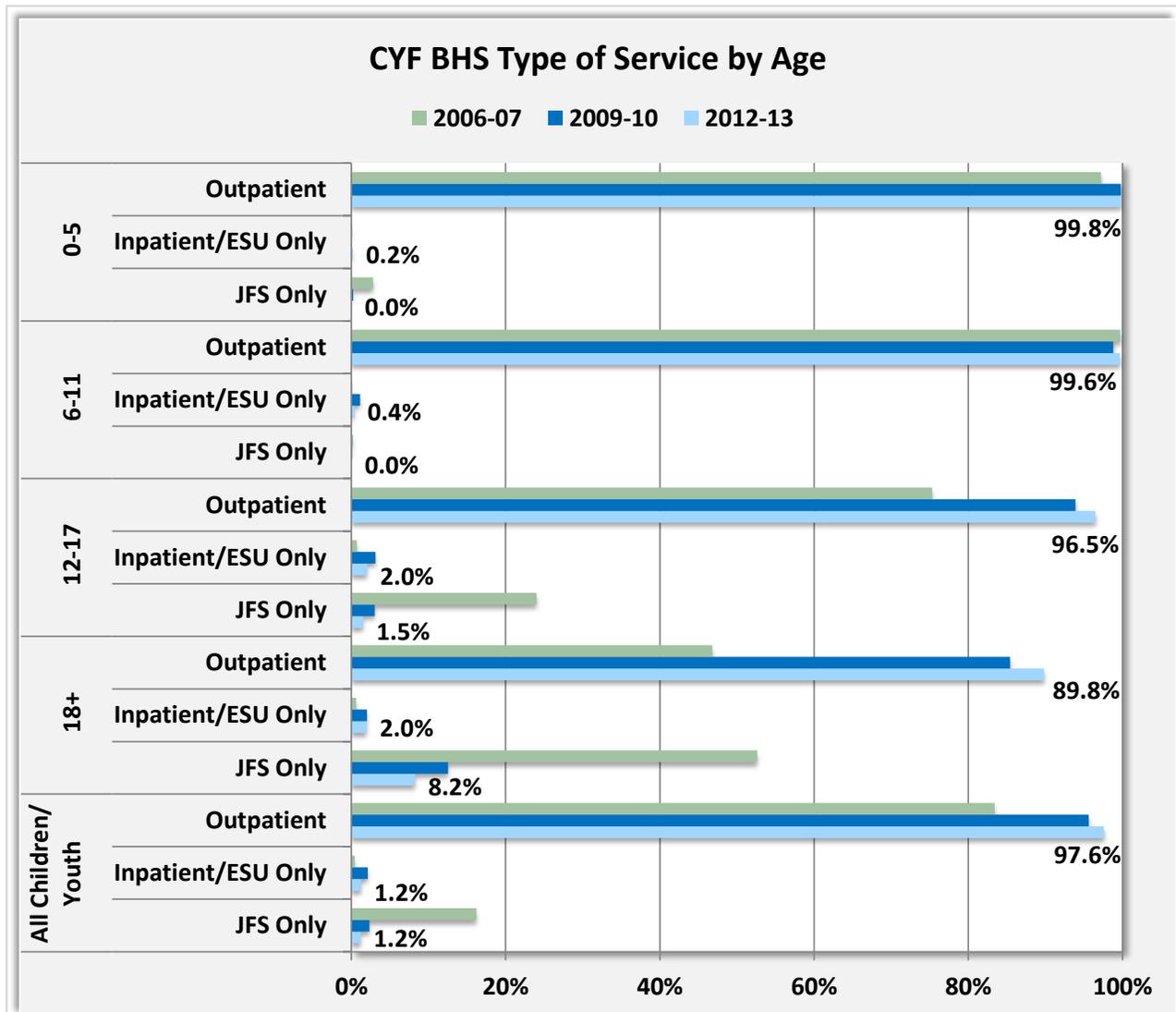
Disparities in Type of Service Used: Children and Youth—Type of Service Used by Age

A goal of CYF BHS has been to increase use of Outpatient services and decrease use of Inpatient/Emergency services. Types of services used by all CYF BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13 across four age groups: 0-5, 6-11, 12-17, 18+. Utilization rates were calculated as number of clients within a specific age group (i.e. 0-5, 6-11, 12-17, 18+) who used a specific type of service (i.e. Outpatient, Inpatient/Emergency only, and JFS only) divided by number of total clients within that age group.

Numbers displayed in the graph below are utilization rates for FY 2012-13.

- 97.6% of all clients used Outpatient services. This represents a 14% increase from FY 2006-07.
- 1.2% of all clients used only Inpatient/Emergency services during the fiscal year.
- Clients ages 18+ used more JFS only services and less Outpatient services than the other age groups.

Detailed tabular data are provided in Appendix A, Table 9.



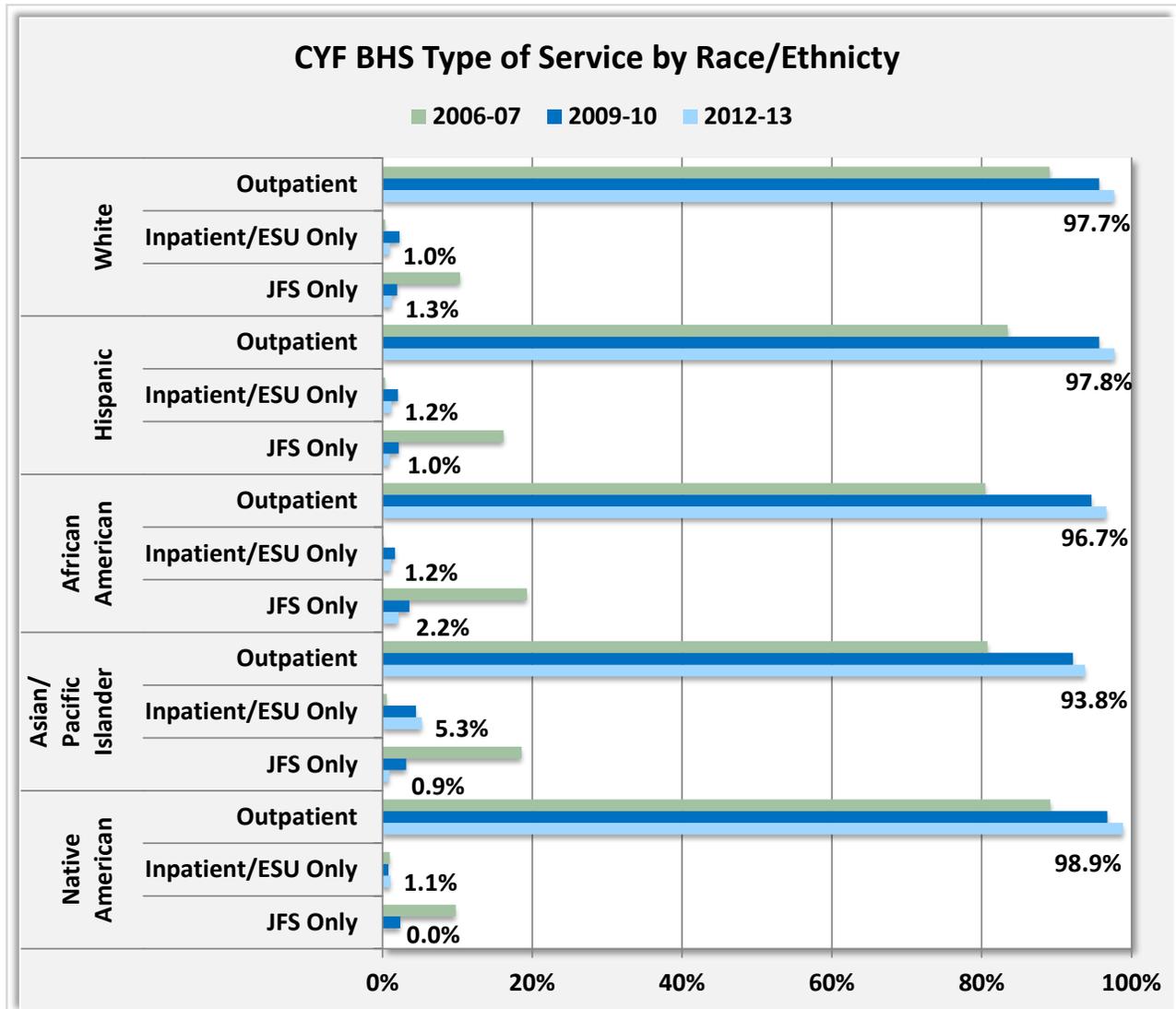
NOTE: Percentages may not add up to 100% due to rounding.

Disparities in Type of Service Used: Children and Youth—Type of Service Used by Race/Ethnicity

Types of services used by CYF BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13 across five racial/ethnic groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Utilization rates were calculated as number of clients within a specific racial/ethnic group who used a specific type of service (i.e., Outpatient, Inpatient/Emergency only, and JFS only) divided by number of total clients within that race/ethnicity group.

- The majority of clients in each racial/ethnic group used Outpatient services, while fewer clients used only Inpatient/Emergency services or JFS services.
- Slightly more African American clients used JFS-only services than the other racial/ethnic groups.
- A higher proportion of Asian/Pacific Islander clients used only Inpatient/ESU services than any other racial/ethnic group.

Detailed tabular data are provided in Appendix A, Table 10. Numbers displayed in the graph below are utilization rates for FY 2012-13.



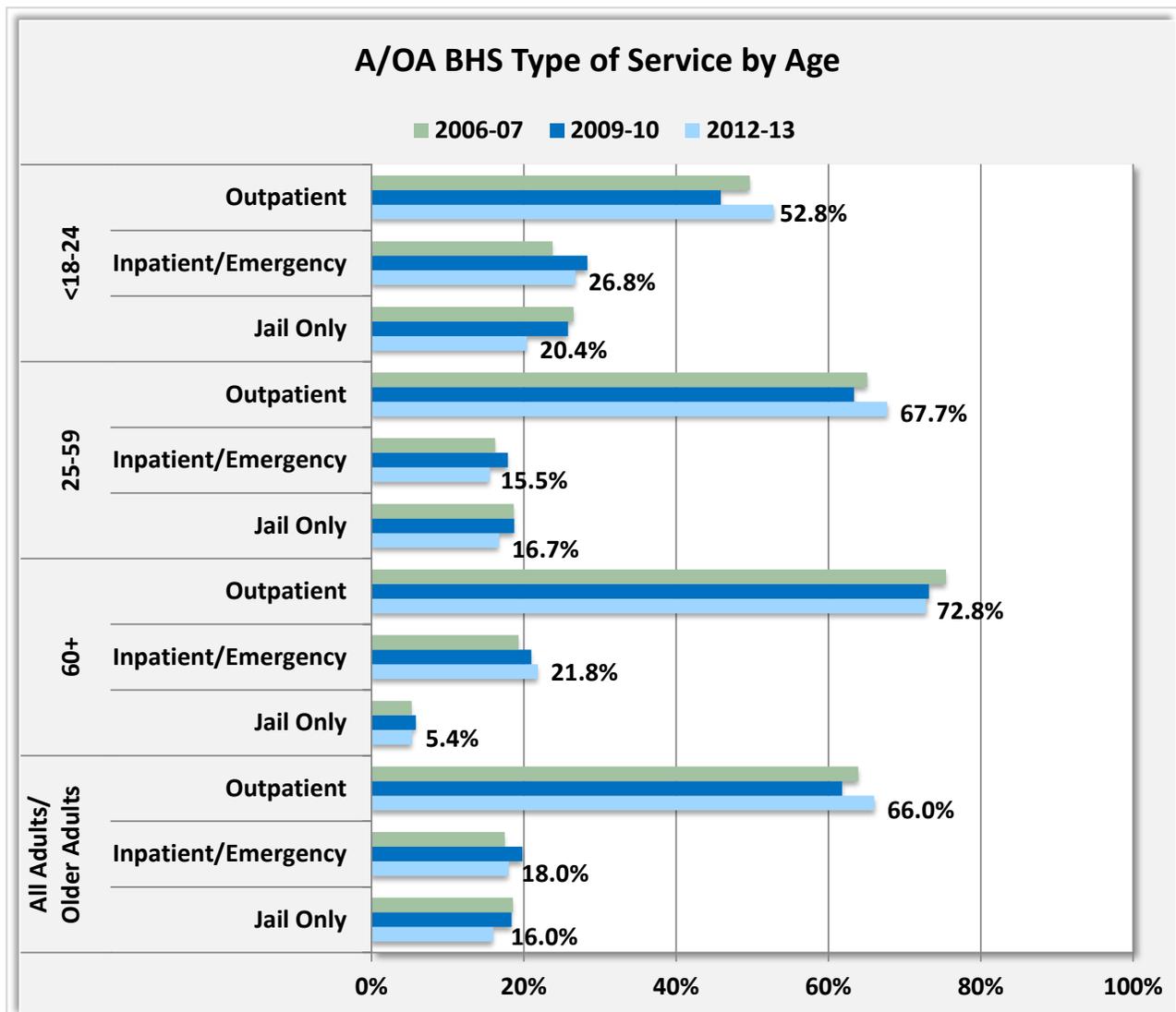
NOTE: Percentages may not add up to 100% due to rounding.

Disparities in Type of Service Used: Adults and Older Adults—Type of Service Used by Age

A goal of A/OA BHS has been to increase use of Outpatient services and decrease use of Inpatient/Emergency services. Types of services used by all A/OA BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13 across three age groups: <18-24, 25-59, and 60+. Utilization rates were calculated as number of clients within a specific age group (i.e. <18-24, 25-59, and 60+) who used a specific type of service (i.e. Outpatient, Inpatient/Emergency, and Jail Only) divided by number of total clients within that age group (i.e. <18-24, 25-59, and 60+).

Detailed tabular data are provided in Appendix A, Table 11. Numbers displayed in the graph below are utilization rates for FY 2012-13.

- From FY 2009-10 to FY 2012-13, Outpatient services increased while Inpatient/Emergency and Jail Only services decreased for both the <18-24 and 25-59 age groups.
- The <18-24 group used more Inpatient/Emergency and Jail Only services and fewer Outpatient services than the other age groups.
- Clients age 25-59 used fewer Inpatient/Emergency services than other age groups.
- Clients age 60+ used more Outpatient services and the least amount of Jail Only services than other age group.



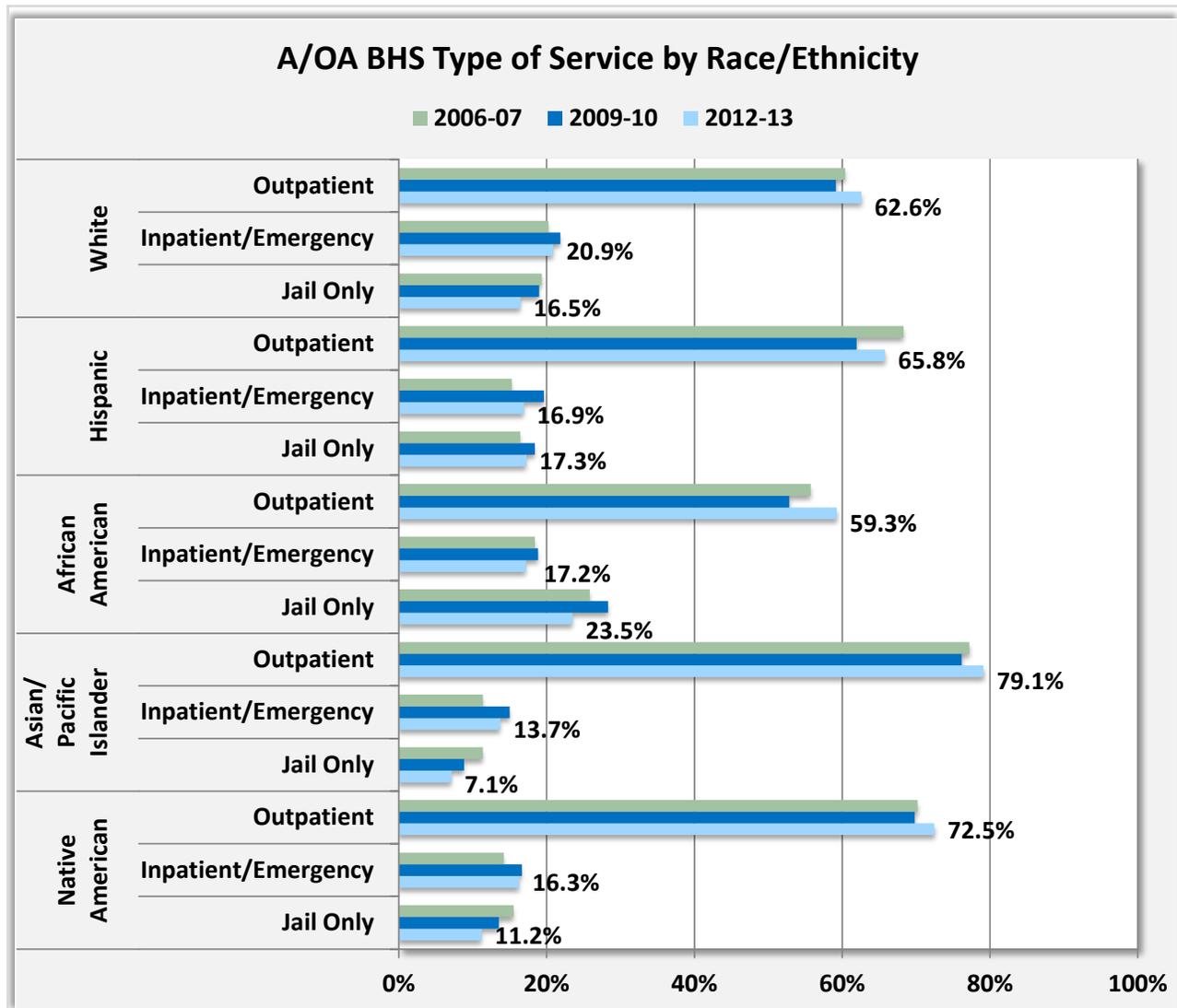
NOTE: Inpatient/Emergency may include some clients that also have Jail services, and percentages may not add up to 100% due to rounding.

Disparities in Type of Service Used: Adults and Older Adults—Type of Service Used by Race/Ethnicity

Types of services used by A/OA BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13 across five racial/ethnic groups: Whites, Hispanics, African Americans, Asians/Pacific Islanders, and Native Americans. Utilization rates were calculated as number of clients within a specific racial/ethnic group who used a specific type of service (i.e. Outpatient, Inpatient/Emergency, and Jail Only) divided by number of total clients within that race/ethnicity group.

Detailed tabular data are provided in Appendix A, Table 12. Numbers displayed in the graph below are utilization rates for FY 2012-13.

- White clients had the highest usage of only Inpatient/Emergency services of all other racial/ethnic groups.
- African American clients had the highest usage of only Jail services of all other racial/ethnic group.
- Asian/Pacific Islander, and to a lesser extent, Native American clients, used more Outpatient services of all other racial/ethnic groups.
- Asian/Pacific Islander clients had the lowest usage of only Inpatient/Emergency services and only Jail services than any other racial/ethnic group.

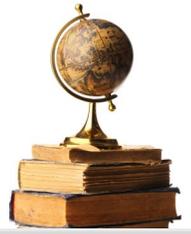


Note: Inpatient/Emergency may contain some clients that also have Jail services, and percentages may not add up to 100% due to rounding.

Diagnosis

Disparities in Diagnosis: Children and Youth Adults and Older Adults

Disparities in Diagnosis



Children and Youth

Diagnosis by Race/Ethnicity:

Diagnosis data for children and youth clients were examined by race/ethnicity. These data are graphically displayed on page 41.

Detailed tabular data are provided in Appendix A, Table 13.

- White and African American clients had the highest prevalence rates of ADHD across all three fiscal years.
- White and Native American clients had the highest prevalence rates of Bipolar Disorders in FY 2012-13.
- African American clients had the highest rates of externalizing disorders (i.e., Oppositional/Conduct Disorders and ADHD) and among the lowest rates of internalizing disorders (i.e., Depressive and Anxiety Disorders) of all other racial/ethnic groups across all three fiscal years.
- Asian/Pacific Islander clients had the highest prevalence rates of Depressive Disorders (25%) and the lowest prevalence rates of Oppositional/Conduct Disorders (13%) of all other racial/ethnic groups in FY 2012-13.
- Hispanic clients had the second highest prevalence rates of both Depressive Disorders and Oppositional/Conduct Disorders across all three fiscal years.
- Native American clients had the highest prevalence rates of Adjustment Disorders of all other racial/ethnic groups across all three fiscal years.

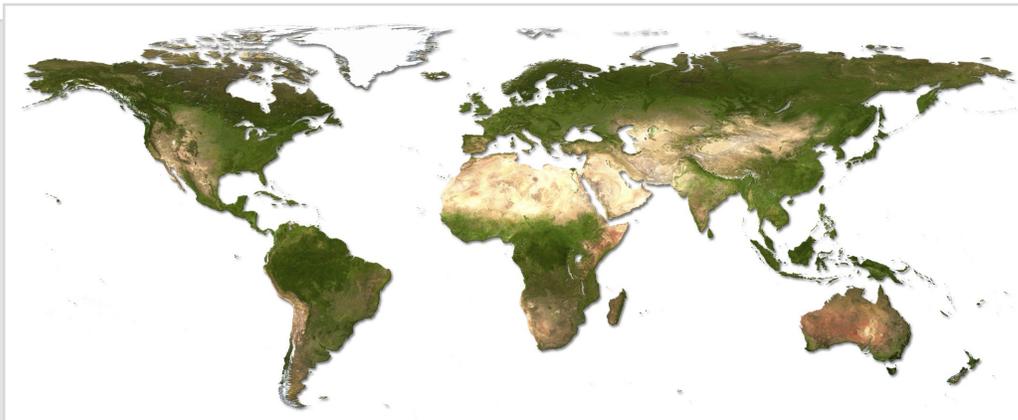
Adults and Older Adults

Diagnosis by Race/Ethnicity:

Diagnosis data for adults and older adults were examined by race/ethnicity. These data are graphically displayed on page 42.

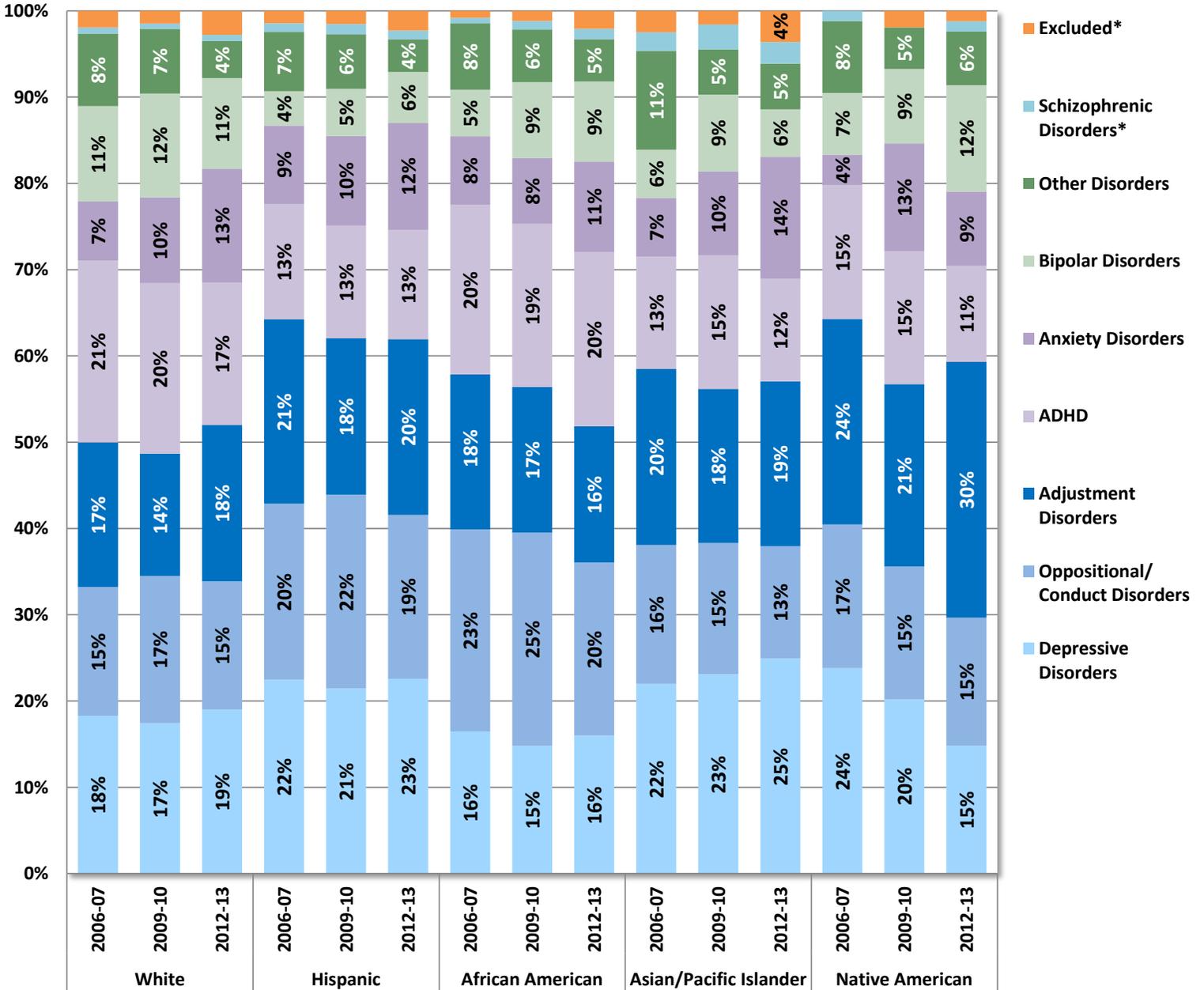
Detailed tabular data are provided in Appendix A, Table 14.

- African American clients had the highest prevalence rates of Schizophrenia and Schizoaffective Disorders across all three fiscal years.
- A large majority (73%) of Asian/Pacific Islander clients were diagnosed with either Schizophrenia and Schizoaffective Disorders (37%) or Major Depression Disorders (36%) in FY 2012-13.
- The prevalence of Other Depression/Adjustment Disorders has lessened for all racial/ethnic groups from FY 2006-07 to FY 2012-13.
- White and Native American clients had the highest prevalence rates of Bipolar Disorders in FYs 2009-10 and 2012-13 than the other racial/ethnic groups.
- Hispanic clients were more likely to be diagnosed with Major Depression Disorders in FY 2012-13 (30%) than any other disorder.
- Anxiety disorders were most prevalent in White (7%), Hispanic (7%), and Native American (7%) clients in FY 2012-13. African American clients had the lowest prevalence rates of Anxiety Disorders across all three fiscal years.



Disparities in Diagnosis: Children and Youth—Diagnosis by Race/Ethnicity

CYF BHS Distribution of Diagnoses by Race/Ethnicity

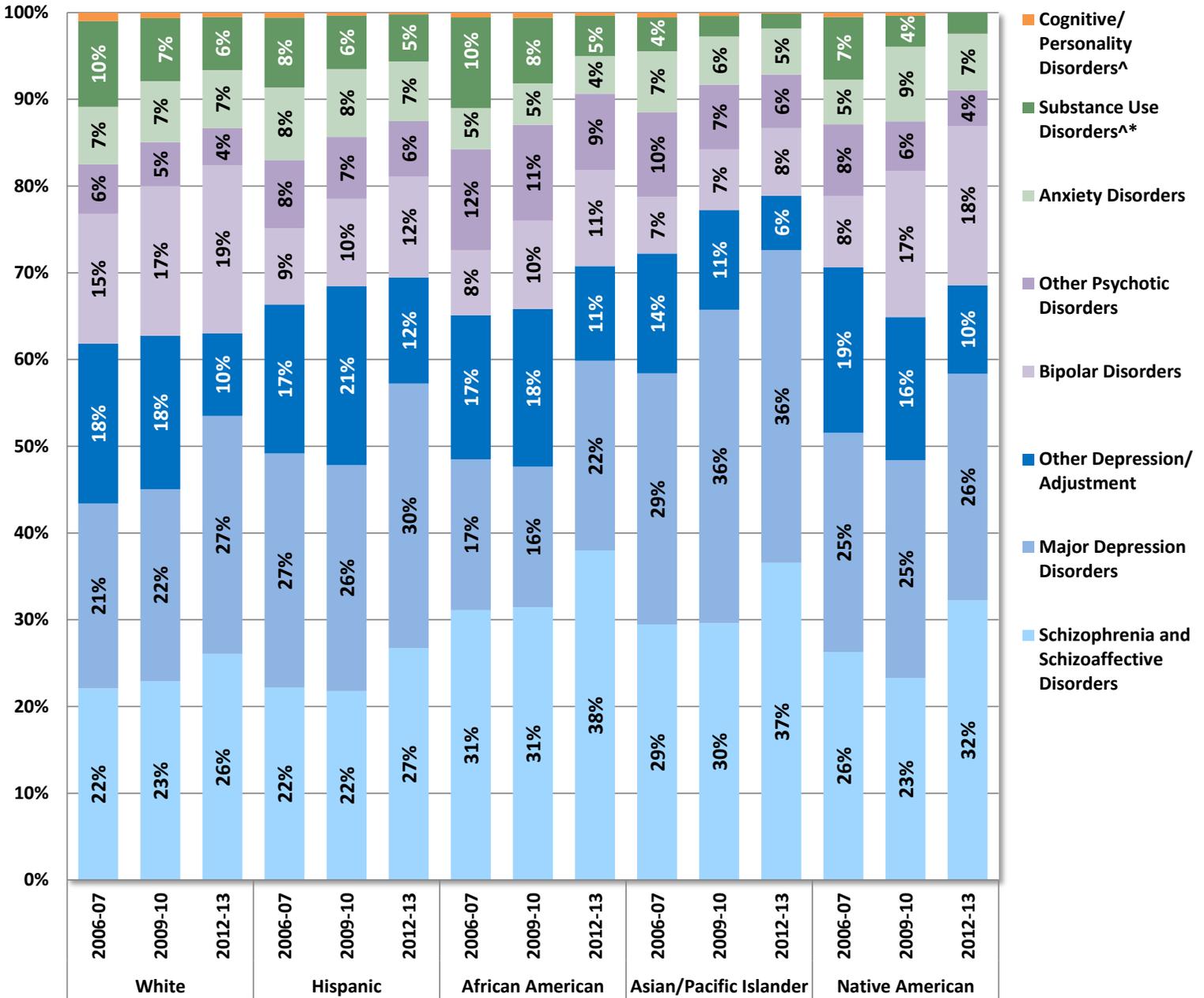


NOTE: Percentages may not add to 100% due to rounding.

* Data labels were not shown for percentages less than 4%.

Disparities in Diagnosis: Adults and Older Adults—Diagnosis by Race/Ethnicity

A/OA BHS Distribution of Diagnoses by Race/Ethnicity



NOTE: Percentages may not add up to 100% due to rounding.

^ Data labels were not shown for percentages less than 4%.

* Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessment, the diagnosis remains in the MIS. An example of when this may occur is when a client enters the MHS through such pathways as Jail or Emergency Psychiatric Unit services.

Transition Age Youth

Ages 18-24

(TAY)

TAY Factsheet

TAY Penetration Rates

TAY Retention Rates

TAY Type of Service Used

TAY Factsheet

Total Clients Served:

6,317 TAY clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

46% of TAY clients were ages 18-21. The majority of TAY clients were male (62%).

Preferred Language:

The majority of TAY clients (86%) reported English as their preferred language, and 7% of TAY clients preferred Spanish.

Top 3 Diagnoses:

1. Major Depression Disorders (31%)
2. Other Depression/Adjustment Disorders (18%)
3. Schizophrenia and Schizoaffective Disorders (15%)

Service Utilization (Penetration Rates):

FY 2001-02:	7.0%
FY 2006-07:	6.6%
FY 2009-10:	8.2%
FY 2012-13:	7.6%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	43.5%
	10+ visits	38.5%
FY 2009-10:	<6 visits	45.4%
	10+ visits	39.1%
FY 2012-13:	<6 visits	38.9%
	10+ visits	45.9%

Type of Service Used in FY 2012-13:

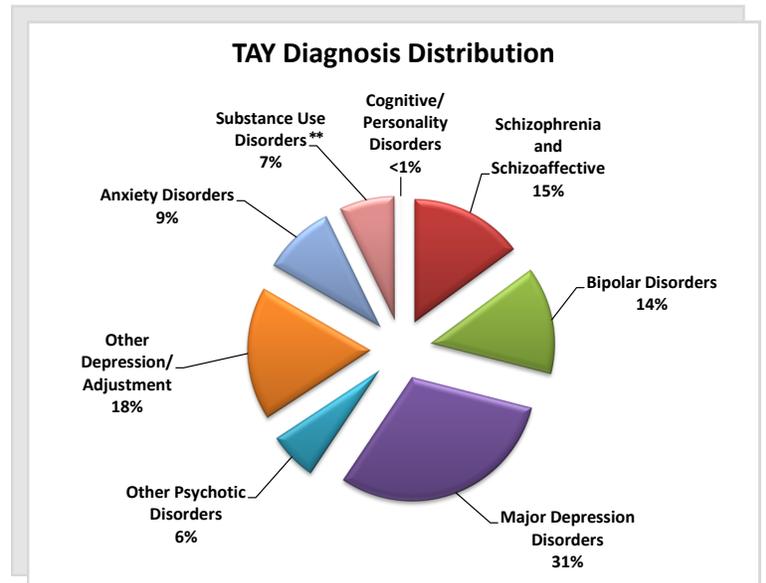
52.8% of TAY clients utilized Outpatient services, 26.8% used Inpatient/Emergency services, and 20.4% used only Jail services.

Insurance Status in FY 2012-13:

37% of TAY clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
<18*	6%	11%	14%
18-21	48%	49%	46%
22-24	46%	41%	41%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	43%	41%	38%
Males	56%	59%	62%
Other/Unknown	1%	<1%	<1%



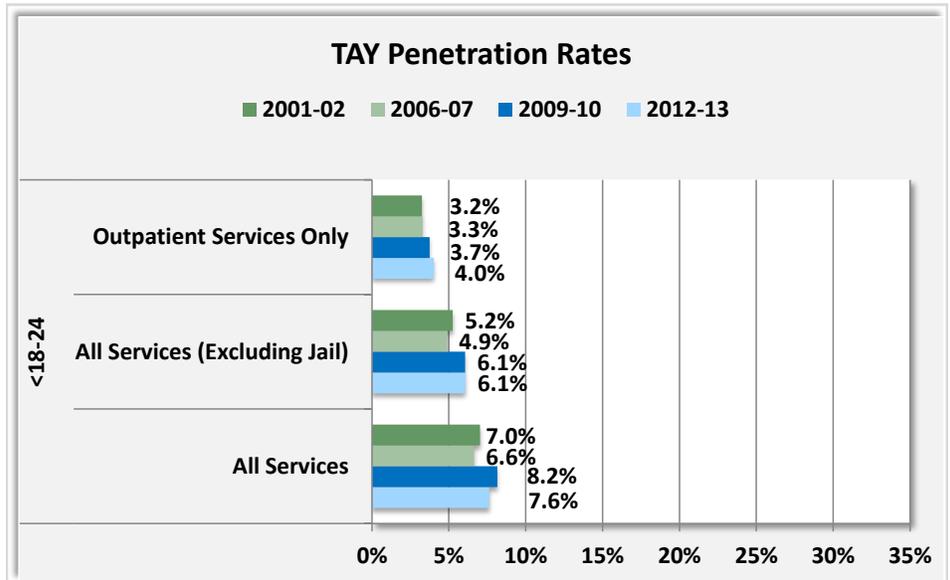
* A small number of clients treated in A/OA BHS were under the age of 18.

** Although Substance Use Disorders are generally not considered a primary diagnosis in the BHS, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS. An example of when this may occur is when a client enters the A/OA BHS through such pathways as Jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add up to 100% due to rounding.

TAY Penetration Rates

Penetration rates for All Services, All Services (Excluding Jail), and Outpatient Services Only were examined and calculated as the number of TAY A/OA BHS clients who received services divided by the number of potential TAY clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries). Data are presented by three service categories: (1) Outpatient Services Only, (2) All Services (Excluding Jail), and (3) All Services. The category excluding services provided while in Jail allows for the examination of penetration rates uninfluenced by mandatory services such as provided as part of the justice system.



Differences in penetration rates were examined across years by comparing penetration rates in FYs 2001-02, 2006-07, 2009-10, and 2012-13. Detailed tabular data are provided in Appendix A, Table 1.

- Penetration rates for all three service categories above showed an increasing trend from FY 2006-07 to FY 2012-13, however rates for All Services decreased from their highest in FY 2009-10 (8.2%) to 7.6% in FY 2012-13.

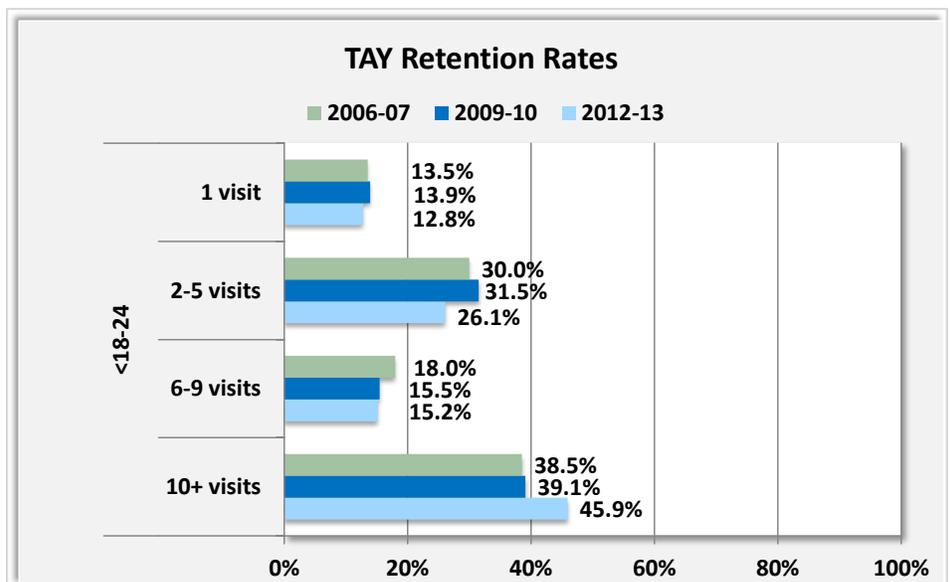
* Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates.
NOTE: Percentages may not add to 100% due to rounding.

TAY Retention Rates

TAY Outpatient Service* retention rates for A/OA BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13. Retention rates were defined as the number of Outpatient visits for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 5.

- More TAY clients continued services for 10 or more visits in FY 2012-13 than in FY 2006-07.
- TAY clients were slightly less likely to have only one service visit in FY 2012-13 than in previous fiscal years.



* Outpatient services include Assertive Community Treatment (ACT), Behavioral Health Court, Case Management, Fee-For-Service, and Prevention type services.

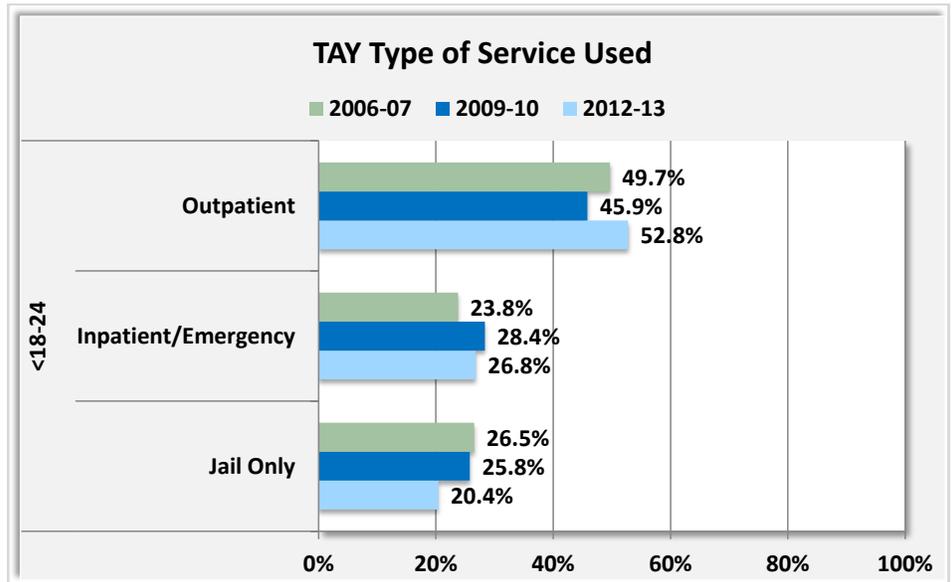
NOTE: Percentages may not add up to 100% due to rounding.

TAY Type of Service Used

A goal of A/OA BHS has been to increase use of Outpatient services and decrease use of Inpatient/Emergency services. Types of services used specifically by TAY A/OA BHS clients were examined for FYs 2006-07, 2009-10, and 2012-13.

Utilization rates were calculated as number of TAY clients who used a specific type of service (i.e. Outpatient, Inpatient/Emergency, and Jail Only) divided by number of total TAY clients.

Detailed tabular data are provided in Appendix A, Table 9.



- In FY 2012-13, TAY clients in the A/OA BHS system of care utilized a higher proportion of Outpatient services and lower proportions of both Inpatient/Emergency and Jail Only services compared to FY 2009-10.

Note: Inpatient/Emergency may include some clients that also have Jail services and percentages may not add up to 100% due to rounding.



Older Adults

Ages 60+

(OA)

OA Factsheet

OA Penetration Rates

OA Retention Rates

OA Type of Service Used

OA Factsheet

Total Clients Served:

4,809 OA clients were served by A/OA BHS in FY 2012-13.

Age and Gender:

76% of OA clients were between the ages of 60 and 69. Over half (57%) of OA clients were female but the proportion of female OA clients has decreased since FY 2006-07.

Preferred Language:

The majority of OA clients (73%) reported English as their preferred language, 7% preferred Spanish, 3% preferred Vietnamese, and 3% preferred Arabic.

Top 3 Diagnoses:

1. Major Depression Disorders (37%)
2. Schizophrenia and Schizoaffective Disorders (31%)
3. Bipolar Disorders (13%)

Service Utilization (Penetration Rates):

FY 2001-02:	4.8%
FY 2006-07:	5.0%
FY 2009-10:	6.8%
FY 2012-13:	6.7%

Engagement (Retention Rates):

FY 2006-07:	<6 visits	38.1%
	10+ visits	36.8%
FY 2009-10:	<6 visits	35.7%
	10+ visits	44.5%
FY 2012-13:	<6 visits	31.3%
	10+ visits	50.2%

Type of Service Used in FY 2012-13:

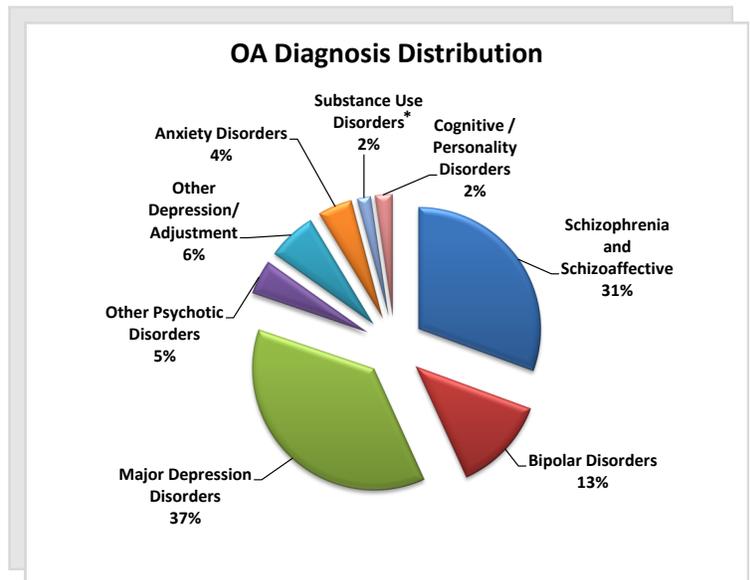
72.8% of OA clients utilized Outpatient services, 21.8% used Inpatient/Emergency services, and 5.4% used Jail Only services.

Insurance Status in FY 2012-13:

25% of OA clients were uninsured.

AGE	FY 2006-07	FY 2009-10	FY 2012-13
60-69	75%	75%	76%
70-79	15%	15%	15%
80+	10%	10%	9%

GENDER	FY 2006-07	FY 2009-10	FY 2012-13
Females	60%	59%	57%
Males	39%	41%	43%
Other/Unknown	1%	<1%	<1%

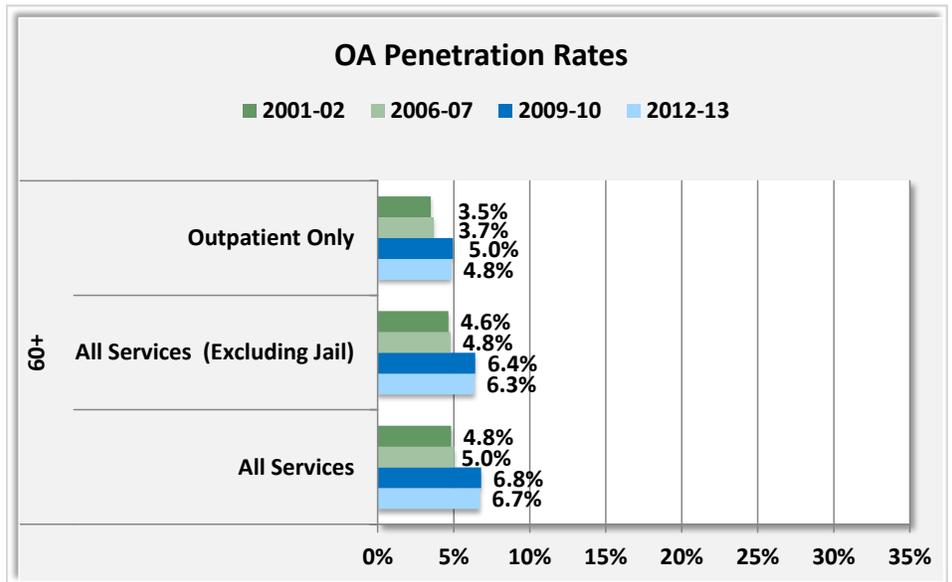


* Although Substance Use Disorders are generally not considered a primary diagnosis in the Behavioral Health System, clients are sometimes diagnosed as such at an initial assessment. In the absence of a qualifying alternative primary diagnosis that takes its place at subsequent assessments, the diagnosis remains in the MIS system. An example of when this may occur is when a client enters the A/OA BHS through such pathways as jail or the Emergency Psychiatric Unit services.

NOTE: Percentages may not add up to 100% due to rounding.

OA Penetration Rates

Penetration rates for All Services, All Services (Excluding Jail), and Outpatient Only services were examined for older adults. Penetration rates were calculated as number of actual OA clients who received services divided by the number of potential OA clients* (San Diego County residents under 200% FPL who were either uninsured or Medi-Cal beneficiaries). Data were analyzed by three service categories: (1) Outpatient Services Only, (2) All Services Excluding Jail, and (3) All Services. The category excluding services provided while in Jail allows for the examination of penetration rates uninfluenced by mandatory services such as provided as part of the justice system.



Differences in penetration rates were examined across years by comparing penetration rates in FYs 2001-02, 2006-07, 2009-10, and 2012-13. Detailed tabular data are provided in Appendix A, Table 1.

- Penetration rates for OA clients increased from FY 2006-07 to FY 2009-10 and remained relatively stable through FY 2012-13 for all categories graphed above.

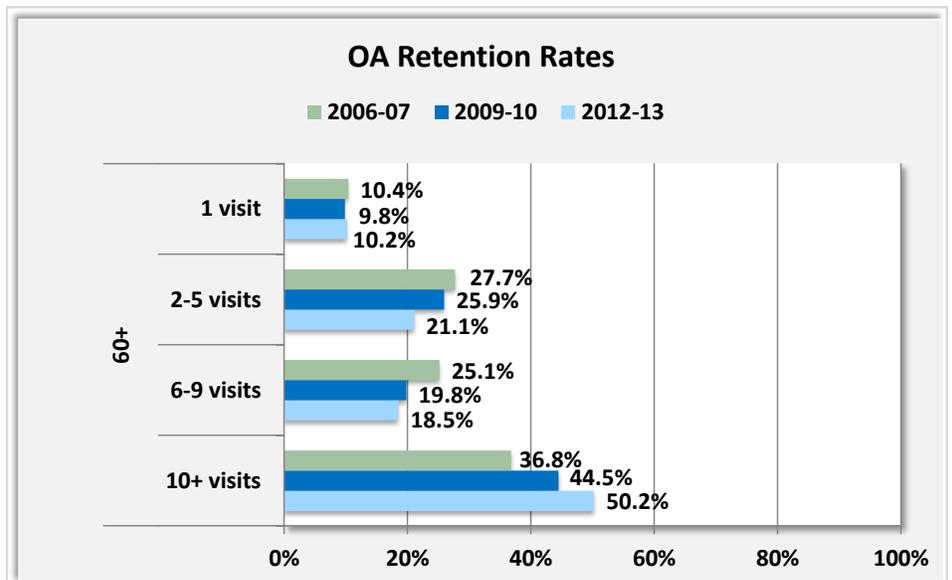
* Estimates of potential clients were derived from California Health Interview Survey (CHIS) estimates applied against 2013 Census population estimates. NOTE: Percentages may not add up to 100% due to rounding.

OA Retention Rates

Outpatient service* retention rates for older adult clients were examined in FYs 2006-07, 2009-10, and 2012-13. Retention rates were defined as the number of Outpatient visits for each client during the fiscal year.

Detailed tabular data are provided in Appendix A, Table 5.

- Retention rates for 2-5 visits and 6-9 visits decreased from FY 2006-07 to FY 2012-13, while retention rates steadily increased from 36.8% in FY 2006-07 to 50.2% in FY 2012-13 for 10 or more visits.



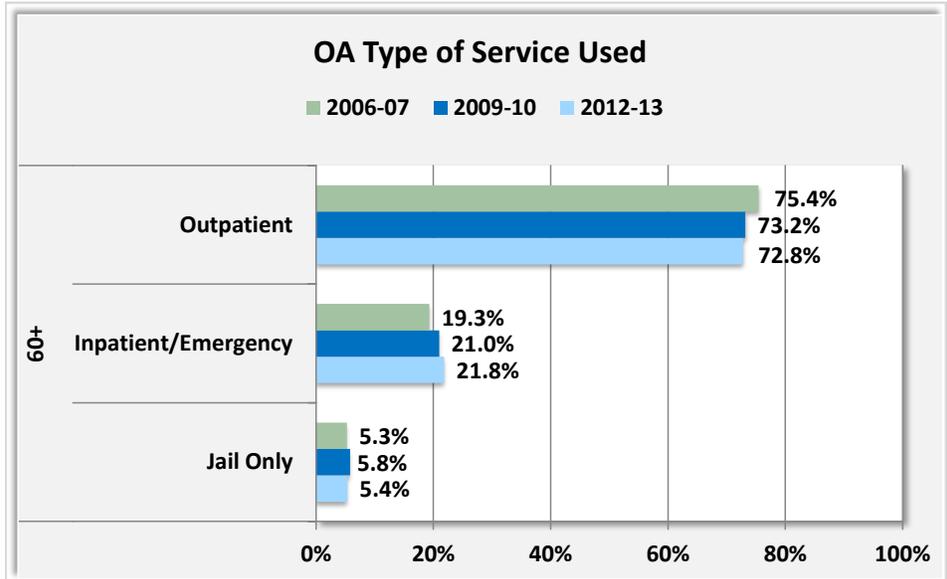
* Outpatient services include Assertive Community Treatment (ACT), Behavioral Health Court, Case Management, Fee-For-Service, and Prevention type services.

NOTE: Percentages may not add up to 100% due to rounding.

OA Type of Service Used

A goal of A/OA BHS has been to increase use of Outpatient services and decrease use of Inpatient/Emergency services. Types of services used by OA clients were examined for FYs 2006-07, 2009-10, and 2012-13. Utilization rates were calculated as the number of OA clients who used a specific type of service (i.e. Outpatient, Inpatient/Emergency, and Jail Only) divided by number of total OA clients.

Detailed tabular data are provided in Appendix A, Table 9.



- OA clients' usage of Outpatient services decreased from 75.4% in FY 2006-07 to 72.8% in FY 2012-13, while Inpatient/Emergency service use increased from 19.3% in FY 2006-07 to 21.8% in FY 2012-13.

Note: Inpatient/Emergency services category may include some clients that also have Jail services, and percentages may not add up to 100% due to rounding.



Attachments

Race/Ethnicity Determination

Glossary

Race/Ethnicity Determination

How was race/ethnicity defined?

Race/ethnicity data were collected from the INSYST (FY 2001-02 and FY 2006-07) and Anasazi (FY 2009-10 and FY 2012-13) MIS. The two systems utilized different descriptors for certain racial/ethnic categories, which were then recoded into common labels to facilitate multi-year comparisons. The classification procedure for the purposes of this report follows the United States Census Bureau definitions of race. The term race/ethnicity reflects a social/cultural definition. The definition of race/ethnicity does not conform to any biological, anthropological or genetic criteria. Hispanic ethnicity is tracked separately than race. People who identify their origin as Mexican American, Chicano, or Latino are classified as Hispanic but may be of any race (i.e. White or African American). See the following website for further information: <http://www.census.gov/prod/cen2010/briefs/c2010br-02.pdf>. Hispanic Ethnicity categories specific to the A/OA BHS and CYF BHS systems of care can be found on pages 15 and 16.

Race/ethnicity mapping for INSYST and Anasazi systems:

Description in InSyst	Race/Ethnicity Determination in InSyst	Description in Anasazi	Race/Ethnicity Determination in Anasazi
African American	African American	Asian Indian	Asian
Amerasian	Asian	Black/AfricanAm	African American
Asian Indian	Asian	Cambodian	Asian
Cambodian	Asian	Chaldean	Other
Chinese	Asian	Chinese	Asian
Cuban	Hispanic	Cuban	Hispanic
Dominican	Hispanic	Dominican	Hispanic
Ethiopian	Other	Eskimo/Alaskan Native	Native American
Filipino	Asian	Ethiopian	Other
Guamanian	Asian	Filipino	Asian
Hawaiian Native	Asian	Guamanian	Asian
Hmong	Asian	HawaiianNative	Asian
Iranian	Other	Hmong	Asian
Iraqi	Other	Iranian	Other
Japanese	Asian	Iraqi	Other
Korean	Asian	Japanese	Asian
Laotian	Asian	Korean	Asian
Mexican American/Chicano	Hispanic	Laotian	Asian
Multiple	Other	Mexican American/Chicano	Hispanic
Native American	Native American	Mien	Asian
Other	Other	Native American	Native American
Other Asian	Asian	Other Asian	Asian
Other Hispanic	Hispanic	Other Hispanic Latino	Hispanic
Other Latin American	Hispanic	Other Non-White/NonCaucasian	Other
Other Non-White	Other	Other Pacific Islander	Asian
Other Southeast Asian	Asian	Puerto Rican	Hispanic
Pacific Islander	Asian	Salvadoran	Hispanic
Puerto Rican	Hispanic	Samoan	Asian
Salvadoran	Hispanic	Somali	Other
Samoan	Asian	Sudanese	Other
Somali	Other	Unknown	Unknown
Sudanese	Other	Unknown/Not Reported	Unknown
Unknown	Unknown	Vietnamese	Asian
Vietnamese	Asian	White/Caucasian	White
White	White		

Glossary

200% Federal Poverty Level (FPL): Poverty level requirements to qualify for San Diego County behavioral health services; annual income for family of 2 less than \$29k.

A/OA BHS: Adult and Older Adult Behavioral Health Services provides services to transition age youth, adults, and older adults with severe, persistent mental health needs or those experiencing a mental health crisis.

Cultural Competence: Ability to interact effectively with people of different racial/ethnic, cultural, or socio-economic backgrounds.

Cultural Sensitivity: Awareness of cultural and ethnic differences, without judgments of right or wrong.

CYF BHS: Children, Youth and Families Behavioral Health Services provides services to youth with serious emotional disturbances who are ages 0-17, with a small number of programs serving young adults 18 and older.

Disparities: Differences or inequalities between groups of people.

Eligible Clients (Target Population): Eligible clients were defined as those individuals in San Diego County who were: Medi-Cal OR uninsured, AND under 200% of the Federal Poverty Level (FPL) that could potentially have a serious mental illness (SMI).

Emergency Services: One-time use services such as the psychiatric emergency room (Emergency Psychiatric Unit; EPU), Psychiatric Emergency Response Team (PERT), and the Emergency Service Unit (ESU).

Externalizing Disorders: Constitutes acting-out behaviors, such as aggression, impulsivity, and noncompliance. Common externalizing disorders include: Attention-Deficit/Hyperactivity Disorder and Oppositional/Conduct Disorders.

Inpatient Services: Acute services, typically in psychiatric inpatient hospitals or crisis residential facilities.

Internalizing Disorders: Describes withdrawn, depressed, and anxious behaviors. Common internalizing disorders include: Depressive and Anxiety Disorders.

Jail Services: Any mental health services offered to those serving Jail sentences.

Juvenile Forensic Services (JFS): Services provided through JFS are typically delivered to probation-involved youth, and are not entered into the INSYST billing system.

Outpatient Services: Services such as case management, individual or group therapy, and medication management.

Penetration: The degree to which services are used.

Racial/Ethnic Identity: Identifying with a specific racial or ethnic group.

Retention: The ability to retain clients in services for a desired or necessary amount of time to maximize treatment effects.

Self-Awareness: Being aware of one's own thoughts and the impact those thoughts or actions derived from those thoughts may have on other people.

Service Utilization: Having the necessary resources and ability to obtain behavioral health services.

Transition Age Youth (TAY): Transition Age Youth are clients ages 18-24 that received services in the A/OA system of care. (NOTE: for a focused look at TAY clients in both A/OA and CYF BHS see the *Transition Age Youth SYSTEMWIDE REPORT* for San Diego County Behavioral Health Services, July 2014.)

Utilization: The manner in which a service is used.

Appendix A

Tabular Data Used in Figures:

Table 1. CYF BHS Penetration Rates by Age

Table 2. CYF BHS Penetration Rates by Race/Ethnicity

Table 3. A/OA BHS Penetration Rates by Age

Table 4. A/OA BHS Penetration Rates by Race/Ethnicity

Table 5. CYF BHS Retention Rates by Age

Table 6. CYF BHS Retention Rates by Race/Ethnicity

Table 7. A/OA BHS Retention Rates by Age

Table 8. A/OA BHS Retention Rates by Race/Ethnicity

Table 9. CYF BHS Type of Service Used by Age

Table 10. CYF BHS Type of Service Used by Race/Ethnicity

Table 11. A/OA BHS Type of Service Used by Age

Table 12. A/OA BHS Type of Service Used by Race/Ethnicity

Table 13. CYF BHS Diagnosis by Race/Ethnicity

Table 14. A/OA BHS Diagnosis by Race/Ethnicity

Table 15. CYF BHS Insurance Status by Race/Ethnicity

Table 16. A/OA BHS Insurance Status by Race/Ethnicity

Progress Towards Reducing Disparities in Mental Health Services

Table 1. CYF BHS Penetration Rates by Age

Table 1. Children and Youth - Penetration Rates by Client Age

Children and Youth Penetration Rates by Age	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
0-5	78,728	80,705	84,348	87,508	1,294	1,850	2,075	2,232	1.6%	2.3%	2.5%	2.6%
6-11	76,077	77,987	81,508	84,561	6,146	4,959	5,129	5,992	8.1%	6.4%	6.3%	7.1%
12-17*	70,778	72,555	75,830	78,671	8,410	9,684	9,623	10,114	11.9%	13.3%	12.7%	12.9%
TOTAL	225,583	231,247	241,687	250,739	15,850	16,493	16,827	18,338	7.0%	7.1%	7.0%	7.3%

* This category includes 9,191 clients ages 12-17, plus an additional 923 clients ages 18+ who, although over 18 years of age, also received services through CYF BHS.

Table 2. CYF BHS Penetration Rates by Race/Ethnicity

Table 2. Children and Youth - Penetration Rates by Race/Ethnicity*

Race/Ethnicity	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
White	28,660	29,379	30,705	31,855	8,082	4,590	4,198	3,805	28.2%	15.6%	13.7%	11.9%
Hispanic	159,771	163,783	171,177	177,589	4,549	8,354	8,990	10,346	2.8%	5.1%	5.3%	5.8%
African American	19,799	20,296	21,212	22,007	2,446	2,515	2,318	2,044	12.4%	12.4%	10.9%	9.3%
Asian/Pacific Islander	12,757	13,077	13,667	14,179	587	420	464	437	4.6%	3.2%	3.4%	3.1%
Native American	4,597	4,712	4,925	5,109	186	112	125	91	4.0%	2.4%	2.5%	1.8%
TOTAL	225,584	231,247	241,687	250,739	15,850	15,991	16,095	16,723	7.0%	6.9%	6.7%	6.7%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

Progress Towards Reducing Disparities in Mental Health Services

Table 3. A/OA BHS Penetration Rates by Age

Table 3. Adults and Older Adults - Penetration Rates by Client Age by Service Type*

All Services	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
<18-24	74,552	76,425	79,875	82,867	5,232	5,061	6,514	6,317	7.0%	6.6%	8.2%	7.6%
25-59	242,191	248,273	259,482	269,201	30,651	29,725	32,163	29,998	12.7%	12.0%	12.4%	11.1%
60+	64,543	66,164	69,151	71,741	3,118	3,338	4,706	4,809	4.8%	5.0%	6.8%	6.7%
TOTAL	381,287	390,862	408,508	423,809	39,001	38,124	43,383	41,124	10.2%	9.8%	10.6%	9.7%

Excluding Persons Only Receiving Services in Jails	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
<18-24	74,552	76,425	79,875	82,867	3,913	3,725	4,835	5,029	5.2%	4.9%	6.1%	6.1%
25-59	242,191	248,273	259,482	269,201	25,489	24,222	26,145	24,984	10.5%	9.8%	10.1%	9.3%
60+	64,543	66,164	69,151	71,741	3,000	3,168	4,434	4,554	4.6%	4.8%	6.4%	6.3%
TOTAL	381,287	390,862	408,508	423,809	32,402	31,115	35,414	34,567	8.5%	8.0%	8.7%	8.2%

Including Only Persons Receiving Outpatient Services	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
<18-24	74,552	76,425	79,875	82,867	2,413	2,502	2,986	3,330	3.2%	3.3%	3.7%	4.0%
25-59	242,191	248,273	259,482	269,201	20,620	19,204	20,346	20,278	8.5%	7.7%	7.8%	7.5%
60+	64,543	66,164	69,151	71,741	2,252	2,438	3,424	3,469	3.5%	3.7%	5.0%	4.8%
TOTAL	381,287	390,862	408,508	423,809	25,285	24,144	26,756	27,077	6.6%	6.2%	6.5%	6.4%

* Excluding services provided while in Jail allows for the examination of penetration rates uninfluenced by mandatory services such as provided as part of the justice system.

Table 4. A/OA BHS Penetration Rates by Race/Ethnicity

Table 4. Adults and Older Adults - Penetration Rates by Race/Ethnicity* by Service Type**

All Services	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
White	68,180	69,892	73,047	75,783	22,991	19,716	22,077	19,619	33.7%	28.2%	30.2%	25.9%
Hispanic	190,506	195,290	204,106	211,751	6,660	8,242	8,801	9,294	3.5%	4.2%	4.3%	4.4%
African American	24,211	24,819	25,939	26,911	4,323	4,723	5,310	5,348	17.9%	19.0%	20.5%	19.9%
Asian/Pacific Islander	27,591	28,284	29,561	30,668	1,686	2,242	2,452	2,147	6.1%	7.9%	8.3%	7.0%
Native American	6,256	6,413	6,703	6,954	223	227	318	276	3.6%	3.5%	4.7%	4.0%
TOTAL	316,744	324,698	339,356	352,068	35,883	35,150	38,958	36,684	11.3%	10.8%	11.5%	10.4%

Excluding persons only receiving services in jails	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
White	68,180	69,892	73,047	75,783	19,092	16,415	17,897	16,394	28.0%	23.5%	24.5%	21.6%
Hispanic	190,506	195,290	204,106	211,751	5,465	6,363	7,183	7,692	2.9%	3.3%	3.5%	3.6%
African American	24,211	24,819	25,939	26,911	3,132	3,310	3,809	4,095	12.9%	13.3%	14.7%	15.2%
Asian/Pacific Islander	27,591	28,284	29,561	30,668	1,536	1,676	2,236	1,994	5.6%	5.9%	7.6%	6.5%
Native American	6,256	6,413	6,703	6,954	177	183	275	245	2.8%	2.9%	4.1%	3.5%
TOTAL	316,744	324,698	339,356	352,068	29,402	27,947	31,400	30,420	9.3%	8.6%	9.3%	8.6%

Including only persons receiving outpatient services	POTENTIAL CLIENTS				ACTUAL CLIENTS				PENETRATION RATE			
	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13	2001-02	2006-07	2009-10	2012-13
White	68,180	69,892	73,047	75,783	14,900	12,528	13,034	12,242	21.9%	17.9%	17.8%	16.2%
Hispanic	190,506	195,290	204,106	211,751	4,308	5,131	5,444	6,106	2.3%	2.6%	2.7%	2.9%
African American	24,211	24,819	25,939	26,911	2,396	2,465	2,801	3,156	9.9%	9.9%	10.8%	11.7%
Asian/Pacific Islander	27,591	28,284	29,561	30,668	1,299	1,431	1,866	1,694	4.7%	5.1%	6.3%	5.5%
Native American	6,256	6,413	6,703	6,954	130	151	222	200	2.1%	2.4%	3.3%	2.9%
TOTAL	316,744	324,698	339,356	352,068	23,033	21,706	23,367	23,398	7.3%	6.7%	6.9%	6.6%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (36,684). An additional 4,440 clients (11%) were of 'other' or 'unknown' race/ethnicity.

** Excluding services provided while in Jail allows for the examination of penetration rates uninfluenced by mandatory services such as provided as part of the justice system.

Progress Towards Reducing Disparities in Mental Health Services

Table 5. CYF BHS Retention Rates by Age

Table 5. Children and Youth - Retention Rates by Client Age (FY 2012-13)

Age	Number of Sessions									
	1		2-5		6-9		10+		Overall	
	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate
0-5	850	38.1%	355	15.9%	188	8.4%	839	37.6%	2,232	100.0%
6-11	510	8.5%	1,201	20.0%	841	14.0%	3,440	57.4%	5,992	100.0%
12-17	714	7.8%	1,953	21.2%	1,221	13.3%	5,303	57.7%	9,191	100.0%
18+	97	10.5%	205	22.2%	149	16.1%	472	51.1%	923	100.0%
TOTAL	2,171	11.8%	3,714	20.3%	2,399	13.1%	10,054	54.8%	18,338	100.0%

Table 6. CYF BHS Retention Rates by Race/Ethnicity

Table 6. Children and Youth - Retention Rates by Race/Ethnicity* (FY 2012-13)

All Services	Number of Sessions									
	1		2-5		6-9		10+		Overall	
	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate
White	357	9.4%	753	19.8%	474	12.5%	2,221	58.4%	3,805	100.0%
Hispanic	988	9.5%	2,125	20.5%	1,429	13.8%	5,804	56.1%	10,346	100.0%
African American	203	9.9%	379	18.5%	238	11.6%	1,224	59.9%	2,044	100.0%
Asian/Pacific Islander	55	12.6%	92	21.1%	48	11.0%	242	55.4%	437	100.0%
Native American	8	8.8%	18	19.8%	9	9.9%	56	61.5%	91	100.0%
TOTAL	1,611	9.6%	3,367	20.1%	2,198	13.1%	9,547	57.1%	16,723	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

Progress Towards Reducing Disparities in Mental Health Services

Table 7. A/OA BHS Retention Rates by Age

Table 7. Adults and Older Adults - Outpatient Retention Rates by Client Age (FY 2012-13)

Age	Number of Visits									
	1		2-5		6-9		10+		Overall	
	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate
<18-24	426	12.8%	869	26.1%	506	15.2%	1,529	45.9%	3,330	100.0%
25-59	1,943	9.6%	4,407	21.7%	3,238	16.0%	10,690	52.7%	20,278	100.0%
60+	353	10.2%	732	21.1%	642	18.5%	1,742	50.2%	3,469	100.0%
TOTAL	2,722	10.1%	6,008	22.2%	4,386	16.2%	13,961	51.6%	27,077	100.0%

Note: Outpatient Services include ACT, BH Court, Case Management, FFS, Outpatient, and Prevention type services.

Table 8. A/OA BHS Retention Rates by Race/Ethnicity

Table 8. Adults and Older Adults - Outpatient Retention Rates by Race/Ethnicity* (FY 2012-13)

All Services	Number of Visits									
	1		2-5		6-9		10+		Overall	
	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate	Clients	Retention Rate
White	830	6.8%	2,462	20.1%	2,046	16.7%	6,904	56.4%	12,242	100.0%
Hispanic	562	9.2%	1,348	22.1%	877	14.4%	3,319	54.4%	6,106	100.0%
African American	314	9.9%	676	21.4%	469	14.9%	1,697	53.8%	3,156	100.0%
Asian/Pacific Islander	106	6.3%	307	18.1%	339	20.0%	942	55.6%	1,694	100.0%
Native American	14	7.0%	32	16.0%	41	20.5%	113	56.5%	200	100.0%
TOTAL	1,826	7.8%	4,825	20.6%	3,772	16.1%	12,975	55.5%	23,398	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (36,684). An additional 4,440 clients (11%) were of 'other' or 'unknown' race/ethnicity.

Note: Outpatient Services include ACT, BH Court, Case Management, FFS, Outpatient, and Prevention type services.

Table 9. CYF BHS Type of Service Used by Age

Table 9. Children and Youth - Type of Service Used by Client Age (FY 2012-13)

Age	Outpatient		Inpatient/ESU		JFS Only		TOTAL	
	Clients	%	Clients	%	Clients	%	Clients	%
0-5	2,228	99.8%	4	0.2%	0	0.0%	2,232	100.0%
6-11	5,970	99.6%	22	0.4%	0	0.0%	5,992	100.0%
12-17	8,867	96.5%	185	2.0%	139	1.5%	9,191	100.0%
18+	829	89.8%	18	2.0%	76	8.2%	923	100.0%
TOTAL	17,894	97.6%	229	1.2%	215	1.2%	18,338	100.0%

Table 10. CYF BHS Type of Service Used by Race/Ethnicity

Table 10. Children and Youth - Type of Service Used by Race/Ethnicity* (FY 2012-13)

Race/Ethnicity	Outpatient		Inpatient/Emergency		JFS Only		TOTAL	
	Clients	%	Clients	%	Clients	%	Clients	%
White	3,718	97.7%	38	1.0%	49	1.3%	3,805	100.0%
Hispanic	10,117	97.8%	126	1.2%	103	1.0%	10,346	100.0%
African American	1,976	96.7%	24	1.2%	44	2.2%	2,044	100.0%
Asian/Pacific Islander	410	93.8%	23	5.3%	4	0.9%	437	100.0%
Native American	90	98.9%	1	1.1%	0	0.0%	91	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

Progress Towards Reducing Disparities in Mental Health Services

Table 11. A/OA BHS Type of Service Use by Age

Table 11. Adults and Older Adults - Type of Service Used by Client Age (FY 2012-13)

Age	Outpatient		Inpatient/Emergency		Jail Only		TOTAL	
	Clients	%	Clients	%	Clients	%	Clients	%
<18-24	3,330	52.8%	1,690	26.8%	1,288	20.4%	6,308	100.0%
25-59	20,278	67.7%	4,652	15.5%	5,014	16.7%	29,944	100.0%
60+	3,469	72.8%	1,041	21.8%	255	5.4%	4,765	100.0%
TOTAL	27,077	66.0%	7,383	18.0%	6,557	16.0%	41,017	100.0%

Table 12. A/OA BHS Type of Service Use by Race/Ethnicity

Table 12. Adults and Older Adults - Type of Service Used by Race/Ethnicity* (FY 2012-13)

Race/Ethnicity	Outpatient		Inpatient/Emergency		Jail Only		TOTAL	
	Clients	%	Clients	%	Clients	%	Clients	%
White	12,242	62.6%	4,088	20.9%	3,225	16.5%	19,555	100.0%
Hispanic	6,106	65.8%	1,572	16.9%	1,602	17.3%	9,280	100.0%
African American	3,156	59.3%	917	17.2%	1,253	23.5%	5,326	100.0%
Asian/Pacific Islander	1,694	79.1%	294	13.7%	153	7.1%	2,141	100.0%
Native American	200	72.5%	45	16.3%	31	11.2%	276	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (36,684). An additional 4,440 clients (11%) were of 'other' or 'unknown' race/ethnicity.

Progress Towards Reducing Disparities in Mental Health Services

Table 13. CYF BHS Diagnosis by Race/Ethnicity

Table 13. Children and Youth - Distribution of Diagnoses by Race/Ethnicity* (FY 2012-13)

Primary Diagnosis**	White		Hispanic		African American		Asian/ Pacific Islander		Native American	
	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%
ADHD	524	16.5%	1,115	12.7%	361	20.2%	43	11.9%	9	11.1%
Oppositional/Conduct Disorders	472	14.9%	1,672	19.0%	359	20.1%	47	13.0%	12	14.8%
Depressive Disorders	602	19.0%	1,990	22.6%	286	16.0%	90	24.9%	12	14.8%
Bipolar Disorders	332	10.5%	519	5.9%	166	9.3%	20	5.5%	10	12.3%
Anxiety Disorders	419	13.2%	1,089	12.4%	187	10.5%	51	14.1%	7	8.6%
Adjustment Disorders	573	18.1%	1,800	20.4%	282	15.8%	69	19.1%	24	29.6%
Schizophrenic Disorders	23	0.7%	88	1.0%	21	1.2%	9	2.5%	1	1.2%
Other Disorders	137	4.3%	337	3.8%	87	4.9%	19	5.3%	5	6.2%
Excluded	90	2.8%	202	2.3%	37	2.1%	13	3.6%	1	1.2%
TOTAL	3,172	100.0%	8,812	100.0%	1,786	100.0%	361	100.0%	81	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

** The Primary Diagnosis information presented above represents data for the clients who received services from county contracted organization providers during FY 2012-13 and for whom a primary diagnosis was available.

Table 14. A/OA BHS Diagnosis by Race/Ethnicity

Table 14. Adults and Older Adults - Distribution of Diagnoses by Race/Ethnicity* (FY 2012-13)

Primary Diagnosis**	White		Hispanic		African American		Asian/ Pacific Islander		Native American	
	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%
Schizophrenia and Schizoaffective	4,272	26.1%	2,065	26.7%	1,709	38.0%	697	36.6%	79	32.2%
Bipolar Disorders	3,172	19.3%	897	11.6%	498	11.1%	148	7.8%	45	18.4%
Major Depression Disorders	4,501	27.4%	2,356	30.5%	985	21.9%	687	36.0%	64	26.1%
Other Psychotic Disorders	705	4.3%	495	6.4%	397	8.8%	118	6.2%	10	4.1%
Other Depression/Adjustment	1,563	9.5%	946	12.2%	490	10.9%	120	6.3%	25	10.2%
Anxiety Disorders	1,097	6.7%	532	6.9%	195	4.3%	101	5.3%	16	6.5%
Substance Use Disorders	1,005	6.1%	419	5.4%	210	4.7%	33	1.7%	6	2.4%
Cognitive / Personality Disorders	83	0.5%	16	0.2%	16	0.4%	2	0.1%	0	0.0%
TOTAL	16,398	100.0%	7,726	100.0%	4,500	100.0%	1,906	100.0%	245	100.0%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (36,684). An additional 4,440 clients (11%) were of 'other' or 'unknown' race/ethnicity.

** The Primary Diagnosis information presented above represents data for the clients who received services from county contracted organizational providers during FY 2012-13 and for whom a primary diagnosis was available.

Table 15. CYF BHS Insurance Status by Race/Ethnicity

Table 15. Children and Youth - Insurance Rates by Race/Ethnicity* (FY 2012-13)

Insurance Type	White		Hispanic		African American		Asian/ Pacific Islander		Native American	
	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%
Medi-Cal Only	2,899	76%	8,281	80%	1,771	87%	331	76%	79	87%
Any Private Insurance	267	7%	261	3%	115	6%	29	7%	3	3%
Other Insurance	395	10%	1,270	12%	87	4%	47	11%	5	6%
Uninsured**	244	6%	534	5%	71	4%	30	7%	4	4%
TOTAL	3,805	100%	10,346	100%	2,044	100%	437	100%	91	100%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (16,723 clients). An additional 1,615 clients (9%) were of 'other' or 'unknown' race/ethnicity.

** This category specifically represents clients that have no insurance on record in the Anasazi MIS for FY 2012-13.

Table 16. A/OA BHS Insurance Status by Race/Ethnicity

Table 16. Adults and Older Adults - Insurance Rates by Race/Ethnicity* (FY 2012-13)

Insurance Type	White		Hispanic		African American		Asian/ Pacific Islander		Native American	
	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%
Uninsured**	8,859	45%	3,581	39%	2,031	38%	670	31%	104	38%
Medi-Cal Only	6,494	33%	4,295	46%	2,397	45%	998	46%	124	45%
Medi-Cal + Medicare	3,223	16%	916	10%	675	13%	383	18%	34	12%
Medicare Only	202	1%	33	0%	25	0%	11	1%	2	1%
Private	841	4%	469	5%	220	4%	85	4%	12	4%
TOTAL	19,619	100%	9,294	100%	5,348	100%	2,147	100%	276	100%

* For purposes of the race/ethnicity analyses included in this report, only the five most prevalent race/ethnicity categories were reported (36,684). An additional 4,440 clients (11%) were of 'other' or 'unknown' race/ethnicity.

** This category specifically represents clients that have no insurance on record in the Anasazi MIS for FY 2012-13.

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