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Note that Service Utilization data is calculated in the Appendices at CLIENT LEVEL and may differ from service data calculated at PROVIDER LEVEL.

Appendix A: Service Utilization by Children Receiving County Behavioral Health Services

Summary demographics and service use data for the **18,317 children and youth served** by San Diego County Children, Youth & Families Behavioral Health Services (CYFBHS) in FY 2014-15.

<u>Age:</u>	<u>N</u>	<u>%</u>		<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	2253	12.3%		ADHD:	2282	13.2%
6-11:	6121	33.4%		Oppositional/Conduct:	2505	14.5%
12-17:	8934	48.8%		Depressive disorders:	3725	21.6%
18+:	1009	5.5%		Bipolar disorders:	1079	6.3%
				Anxiety disorders:	1792	10.4%
				Stressor and Adjustment:	4263	24.7%
<u>Gender:</u>	<u>N</u>	<u>%</u>		<i>Adjustment disorders</i>	3505	
Female:	8030	43.8%		<i>PTSD/Other acute stress reaction</i>	758	
Male:	10269	56.1%		Schizophrenic disorders:	162	0.9%
Unknown:	18	0.1%		Other/Excluded:	1448	8.4%
				<i>Invalid/Missing:</i>	1061	
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>		<u>Dual Diagnosis:</u>	923	5.0%
White:	3525	19.2%				
Hispanic:	10205	55.7%				
Black:	1779	9.7%				
Asian/PI:	490	2.7%				
Native Am.:	110	0.6%				
Other:	437	2.4%				
Unknown:	1771	9.7%				
<u>Use of Outpatient Services</u> – Percent of CYFBHS clients using service, Mean Hours (Median Hours)						
Therapy:		72.9%		8.3 (6.5)		
Assessment:		69.2%		3.0 (2.5)		
Collateral:		47.3%		3.9 (1.4)		
Medication Support:		28.5%		3.0 (2.1)		
Case Management/Rehab:		41.4%		7.8 (2.8)		
Crisis Services:		2.2%		1.6 (1.3)		
TBS:		5.9%		37.3 (22.9)		
<u>Use of Intensive Services</u> – Percent of CYFBHS clients using service, Mean Days (Median Days)						
Day Treatment:		5.0%		89.3 (67)		
Inpatient:		4.3%		10.1 (5)		
Crisis Stabilization:		4.5%		1.6 (1)		

Appendix B: Service Utilization by Children active to Any Other Sector

CYFBHS works collaboratively with other behavioral health entities in San Diego County; primarily **Child Welfare Services, Probation, Special Education Services** and **Alcohol and Drug Services**. Demographic and service use data for each individual sector overlap follow; data here reflect the 8,556 clients (47% of the CYFBHS total) open to CYFBHS and *any other sector* during FY 2014-15.

<u>Age:</u>	<u>N</u>	<u>%</u>	<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	1225	14.3%	ADHD:	1267	15.8%
6-11:	2514	29.4%	Oppositional/Conduct:	1361	17.0%
12-17:	4242	49.6%	Depressive disorders:	1257	15.7%
18+:	575	6.7%	Bipolar disorders:	642	8.0%
			Anxiety disorders:	620	7.7%
			Stressor and Adjustment:	1768	22.1%
<u>Gender:</u>	<u>N</u>	<u>%</u>	<i>Adjustment disorders</i>	1415	
Female:	3053	35.7%	<i>PTSD/Other acute stress reaction</i>	353	
Male:	5503	64.3%	Schizophrenic disorders:	108	1.3%
Unknown:	0	0.0%	Other/Excluded:	984	12.3%
			<i>Invalid/Missing:</i>	549	
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>	<u>Dual Diagnosis:</u>	665	7.8%
White:	1853	21.7%			
Hispanic:	4474	52.3%			
Black:	1148	13.4%			
Asian/PI:	227	2.7%			
Native Am.:	69	0.8%			
Other:	189	2.2%			
Unknown:	596	7.0%			

Use of Outpatient Services – Percent of CYFBHS/Any Sector clients using service, Mean Hours (Median Hours)

Therapy:	68.6%	8.9 (6.7)
Assessment:	66.3%	3.4 (2.6)
Collateral:	45.5%	5.8 (2.0)
Medication Support:	37.6%	3.5 (2.5)
Case Management/Rehab:	51.0%	10.1 (3.9)
Crisis Services:	2.2%	1.7 (1.1)
TBS:	8.9%	36.3 (19.0)

Use of Intensive Services – Percent of CYFBHS/Any Sector clients using service, Mean Days (Median Days)

Day Treatment:	10.0%	91.4 (71)
Inpatient:	4.5%	12.9 (6)
Crisis Stabilization:	4.4%	1.8 (1)

Appendix C: Service Utilization by Children with Open Child Welfare Cases

One area of interest to the San Diego County Children, Youth & Families Behavioral Health System of Care is the overlap between the behavioral health and child welfare sectors. It is well documented that children involved in the Child Welfare System (CWS) are an especially vulnerable population with studies estimating that over 40% of these children have significant emotional and behavioral health needs. These children have often experienced long-term abuse and/or neglect, which can have traumatic effects on children and require appropriate treatment.

To examine the Child Welfare – Behavioral Health overlap in San Diego County, a dataset containing a list of all children who had open Child Welfare cases during FY 2014-15 was obtained and compared to the CYFBHS dataset. **In FY 2014-15, 2,537 clients, or 13.9% of youth receiving mental health services, were also open to the Child Welfare System.** Looking at it from the Child Welfare perspective, 33.6% of youth with open Child Welfare cases in FY 2014-15 also received CYFBHS services during the year.

<u>Age:</u>	<u>N</u>	<u>%</u>		<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	830	32.7%		ADHD:	154	6.3%
6-11:	854	33.7%		Oppositional/Conduct:	202	8.2%
12-17:	729	28.7%		Depressive disorders:	239	9.8%
18+:	124	4.9%		Bipolar disorders:	171	7.0%
				Anxiety disorders:	97	4.0%
<u>Gender:</u>	<u>N</u>	<u>%</u>		Stressor and Adjustment:	1022	41.7%
Female:	1246	49.1%		<i>Adjustment disorders</i>	874	
Male:	1291	50.9%		<i>PTSD/Other acute stress reaction</i>	148	
				Schizophrenic disorders:	12	0.5%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>		Other/Excluded:	553	22.6%
White:	569	22.4%		<i>Invalid/Missing:</i>	87	
Hispanic:	1109	43.7%				
Black:	484	19.1%		<u>Dual Diagnosis:</u>	78	3.1%
Asian/PI:	58	2.3%				
Native Am.:	29	1.1%				
Other:	48	1.9%				
Unknown:	240	9.5%				

Use of Outpatient Services – Percent of CYFBHS-CWS clients using service, Mean Hours (Median Hours)

Therapy:	62.2%	9.7 (7.0)
Assessment:	80.5%	3.4 (2.7)
Collateral:	36.5%	7.0 (2.0)
Medication Support:	26.7%	4.9 (3.8)
Case Management/Rehab:	53.5%	10.0 (3.6)
Crisis Services:	1.9%	1.4 (0.9)
TBS:	14.9%	26.9 (9.5)

Use of Intensive Services – Percent of CYFBHS-CWS clients using service, Mean Days (Median Days)

Day Treatment:	14.1%	108.4 (95)
Inpatient:	3.9%	11.4 (7)
Crisis Stabilization:	3.5%	1.9 (2)

Appendix D: Service Use by Youth Receiving Special Education Services

A goal of the San Diego County Children, Youth & Families Behavioral Health System of Care is to remove mental health barriers that affect success in school. Children with mental health issues may have difficulties in school, especially if their mental health condition impacts their school attendance and performance. Such children become involved in the Special Education system in their local school district, and a large percentage of these children are eligible for special education services under the Emotional Disturbance category.

The **Education definition of Emotional Disturbance (ED)** is as follows: a condition exhibiting one or more of the following characteristics, over a long period of time and to a marked degree, that adversely affects educational performance:

- 1) An inability to learn which cannot be explained by intellectual, sensory, or health factors;
- 2) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
- 3) Inappropriate types of behavior or feeling under normal circumstances;
- 4) A general pervasive mood of unhappiness or depression; or
- 5) A tendency to develop physical symptoms or fears associated with personal or school problems.

A student needs to meet only **one** of the five criteria of the definition of ED to be classified as ED and eligible for special education services.

Using a dataset obtained through the six San Diego County Special Education Local Plan Areas (SELPA) of all children receiving special education services, and identifying a subset receiving services under the ED eligibility category, children served by CYFBHS during FY 2014-15 were identified.

5,442 clients, or **29.7%** of all CYFBHS clients, were also open to Special Education services in FY 2014-15. **790** clients, or **4.3%** of all CYFBHS clients, were open to Special Education services under the Emotional Disturbance (ED) category in FY 2014-15. Data on both groups are presented below.

	CYFBHS & Special Education		CYFBHS & Emotionally Disturbed	
<u>Age:</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
0-5:	531	9.8%	7	0.9%
6-11:	1908	35.2%	149	18.9%
12-17:	2719	50.1%	571	72.3%
18+:	264	4.9%	63	8.0%
<u>Gender:</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
Female:	1718	31.7%	296	37.5%
Male:	3704	68.3%	494	62.5%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
White:	1263	23.3%	275	34.8%
Hispanic:	2823	52.1%	307	38.9%
Black:	671	12.4%	147	18.6%
Asian/PI:	146	2.7%	22	2.8%
Native Am.:	38	0.7%	9	1.1%
Other:	117	2.2%	13	1.6%
Unknown:	364	6.7%	17	2.2%

	N	CYFBHS & Special Education		CYFBHS & Emotionally Disturbed	
		%		%	
Primary Diagnosis:					
ADHD:	1113	21.4%		83	10.7%
Oppositional/Conduct:	873	16.8%		133	17.1%
Depressive disorders:	859	16.5%		173	22.2%
Bipolar disorders:	472	9.1%		200	25.7%
Anxiety disorders:	501	9.6%		42	5.4%
Stressor and Adjustment:	836	16.1%		73	9.4%
<i>Adjustment disorders</i>	649			29	
<i>TSD/Other acute stress reaction</i>	187			44	
Schizophrenic disorders:	78	1.5%		40	5.1%
Other/Excluded:	460	8.9%		35	4.5%
<i>Invalid/Missing:</i>	230			11	
Dual Diagnosis:	218	4.0%		49	6.2%

Use of Outpatient Services – Percent of clients using service, Mean Hours (Median Hours)

		CYFBHS & Special Education		CYFBHS & Emotionally Disturbed	
		%	Mean (Median)	%	Mean (Median)
Therapy:		70.6%	9.1 (7.1)	67.0%	11.1 (8.8)
Assessment:		66.7%	3.5 (2.8)	62.4%	4.5 (3.2)
Collateral:		51.3%	5.1 (2.0)	55.9%	7.8 (3.3)
Medication Support:		43.8%	3.6 (2.6)	70.0%	4.6 (3.5)
Case Management/Rehab:		45.0%	10.4 (3.5)	58.9%	14.3 (6.1)
Crisis Services:		2.8%	1.7 (1.2)	8.0%	1.8 (1.5)
TBS:		10.4%	40.5 (27.0)	19.7%	40.2 (26.1)

Use of Intensive Services – Percent of clients using service, Mean Days (Median Days)

Day Treatment:		9.4%	101.3 (86)	29.0%	103.9 (91)
Inpatient:		5.5%	13.1 (6)	17.0%	17.6 (9)
Crisis Stabilization:		5.7%	1.9 (1)	14.8%	2.3 (1)

Appendix E: Service Utilization by Children active to the Probation sector

To examine the overlap between the Children, Youth & Families Behavioral Health System and the Probation System in San Diego County, a dataset containing a list of all children who had open Probation cases during FY 2014-15 was obtained and compared to the CYFBHS dataset. In FY 2014-15, **1,959** clients, or **10.7%** of all CYFBHS clients, were also open to the Probation System. Looking at it from the Probation perspective, 47.0% of youth with open Probation cases in FY 2014-15 also received CYFBHS services during the year.

<u>Age:</u>	<u>N</u>	<u>%</u>		<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	0	0.0%		ADHD:	176	10.6%
6-11:	1	0.1%		Oppositional/Conduct:	548	33.1%
12-17:	1613	82.3%		Depressive disorders:	329	19.9%
18+:	345	17.6%		Bipolar disorders:	170	10.3%
				Anxiety disorders:	86	5.2%
<u>Gender:</u>	<u>N</u>	<u>%</u>		Stressor and Adjustment:	194	11.7%
Female:	477	24.3%		<i>Adjustment disorders</i>	119	
Male:	1482	75.7%		<i>PTSD/Other acute stress reaction</i>	75	
				Schizophrenic disorders:	40	2.4%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>		Other/Excluded:	114	6.9%
White:	345	17.6%		<i>Invalid/Missing:</i>	302	
Hispanic:	1134	57.9%				
Black:	341	17.4%		<u>Dual Diagnosis:</u>	489	25.0%
Asian/PI:	51	2.6%				
Native Am.:	14	0.7%				
Other:	46	2.3%				
Unknown:	28	1.4%				

Use of Outpatient Services – Percent of CYFBHS-Probation clients using service, Mean Hours (Median Hours)

Therapy:	73.8%	8.4 (5.2)
Assessment:	44.9%	3.6 (2.3)
Collateral:	38.6%	9.2 (2.8)
Medication Support:	45.0%	3.4 (2.3)
Case Management/Rehab:	81.7%	12.8 (7.0)
Crisis Services:	1.2%	2.6 (1.5)
TBS:	2.0%	31.1 (22.1)

Use of Intensive Services – Percent of CYFBHS-Probation clients using service, Mean Days (Median Days)

Day Treatment:	15.9%	66.5 (47)
Inpatient:	2.8%	14.0 (6)
Crisis Stabilization:	2.5%	1.7 (1)

Appendix F: Service Utilization by Children active to Alcohol & Drug Services

The characteristics of youth who were active to both the CYFBHS and ADS sectors were examined using a dataset obtained from ADS that listed all clients served during FY 2014-15. Overall, **540 youth receiving CYFBHS services (2.9%) were also active to ADS** during the fiscal year. Looking at it from the ADS perspective, 21% of youth open to ADS in FY 2014-15 also received CYFBHS services during the year.*

<u>Age:</u>			<u>Primary Diagnosis:</u>		
	<u>N</u>	<u>%</u>		<u>N</u>	<u>%</u>
0-5:	0	0.0%	ADHD:	42	8.7%
6-11:	0	0.0%	Oppositional/Conduct:	139	28.7%
12-17:	471	87.2%	Depressive disorders:	96	19.8%
18+:	69	12.8%	Bipolar disorders:	53	10.9%
			Anxiety disorders:	25	5.2%
<u>Gender:</u>	<u>N</u>	<u>%</u>	Stressor and Adjustment:	80	16.5%
Female:	167	30.9%	<i>Adjustment disorders</i>	28	
Male:	373	69.1%	<i>PTSD/Other acute stress reaction</i>	52	
			Schizophrenic disorders:	12	2.5%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>	Other/Excluded:	38	7.8%
White:	104	19.3%	<i>Invalid/Missing:</i>	55	
Hispanic:	346	64.1%			
Black:	55	10.2%	<u>Dual Diagnosis:</u>	223	41.3%
Asian/PI:	10	1.9%			
Native Am.:	4	0.7%			
Other:	11	2.0%			
Unknown:	10	1.9%			
Use of Outpatient Services – Percent of CYFBHS-ADS clients using service, Mean Hours (Median Hours)					
Therapy:		74.1%		8.5 (5.8)	
Assessment:		54.3%		3.6 (2.6)	
Collateral:		46.1%		9.0 (2.7)	
Medication Support:		52.0%		3.4 (2.7)	
Case Management/Rehab:		77.4%		13.0 (7.7)	
Crisis Services:		1.7%		1.4 (0.6)	
TBS:		2.2%		25.8 (9.3)	
Use of Intensive Services – Percent of CYFBHS-ADS clients using service, Mean Days (Median Days)					
Day Treatment:		24.3%		57.9 (45)	
Inpatient:		6.5%		9.1 (6)	
Crisis Stabilization:		5.0%		1.9 (2)	

*ADS dataset was expanded to include youth through age 25 to align with TAY parameters; this number is not directly comparable to previous years.

Appendix G: Service Utilization by Children with a Dual Diagnosis

923 youth who received CYFBHS services in FY 2014-15 (**5.0%** of total CYFBHS population) had a secondary substance abuse diagnosis entered in CCBH. Many of these children and youth may have received substance abuse counseling as a part of their EPSDT mental health services.

<u>Age:</u>	<u>N</u>	<u>%</u>	<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	0	0.0%	ADHD:	43	4.7%
6-11:	1	0.1%	Oppositional/Conduct:	276	29.9%
12-17:	707	76.6%	Depressive disorders:	243	26.3%
18+:	215	23.3%	Bipolar disorders:	91	9.9%
			Anxiety disorders:	35	3.8%
			Stressor and Adjustment:	116	12.6%
<u>Gender:</u>	<u>N</u>	<u>%</u>	<i>Adjustment disorders</i>	47	
Female:	355	38.5%	<i>PTSD/Other acute stress reaction</i>	69	
Male:	568	61.5%	Schizophrenic disorders:	27	2.9%
			Other/Excluded:	92	10.0%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>	<i>Invalid/Missing:</i>	0	
White:	170	18.4%			
Hispanic:	553	59.9%			
Black:	134	14.5%	<u>Dual Diagnosis:</u>	923	100.0%
Asian/PI:	14	1.5%			
Native Am.:	8	0.9%			
Other:	21	2.3%			
Unknown:	23	2.5%			

Use of Outpatient Services – Percent of CYFBHS-DDx clients using service, Mean Hours (Median Hours)

Therapy:	75.8%	8.6 (6.2)
Assessment:	60.0%	3.3 (2.6)
Collateral:	47.8%	6.0 (1.7)
Medication Support:	45.3%	3.0 (2.0)
Case Management/Rehab:	73.8%	13.0 (7.0)
Crisis Services:	2.2%	1.6 (1.2)
TBS:	2.2%	27.4 (15.0)

Use of Intensive Services – Percent of CYFBHS-DDx clients using service, Mean Days (Median Days)

Day Treatment:	19.9%	69.0 (46)
Inpatient:	6.7%	11.7 (6)
Crisis Stabilization:	6.4%	1.7 (1)

Appendix H: Service Utilization by Children with a Co-occurring Substance Use Disorder

1,240 youth who received CYFBHS services in FY 2014-15 (6.8% of total CYFBHS population) had a co-occurring substance abuse problem, operationally defined as a dual diagnosis (a secondary substance abuse diagnosis) and/or involvement with Alcohol and Drug Services (ADS).

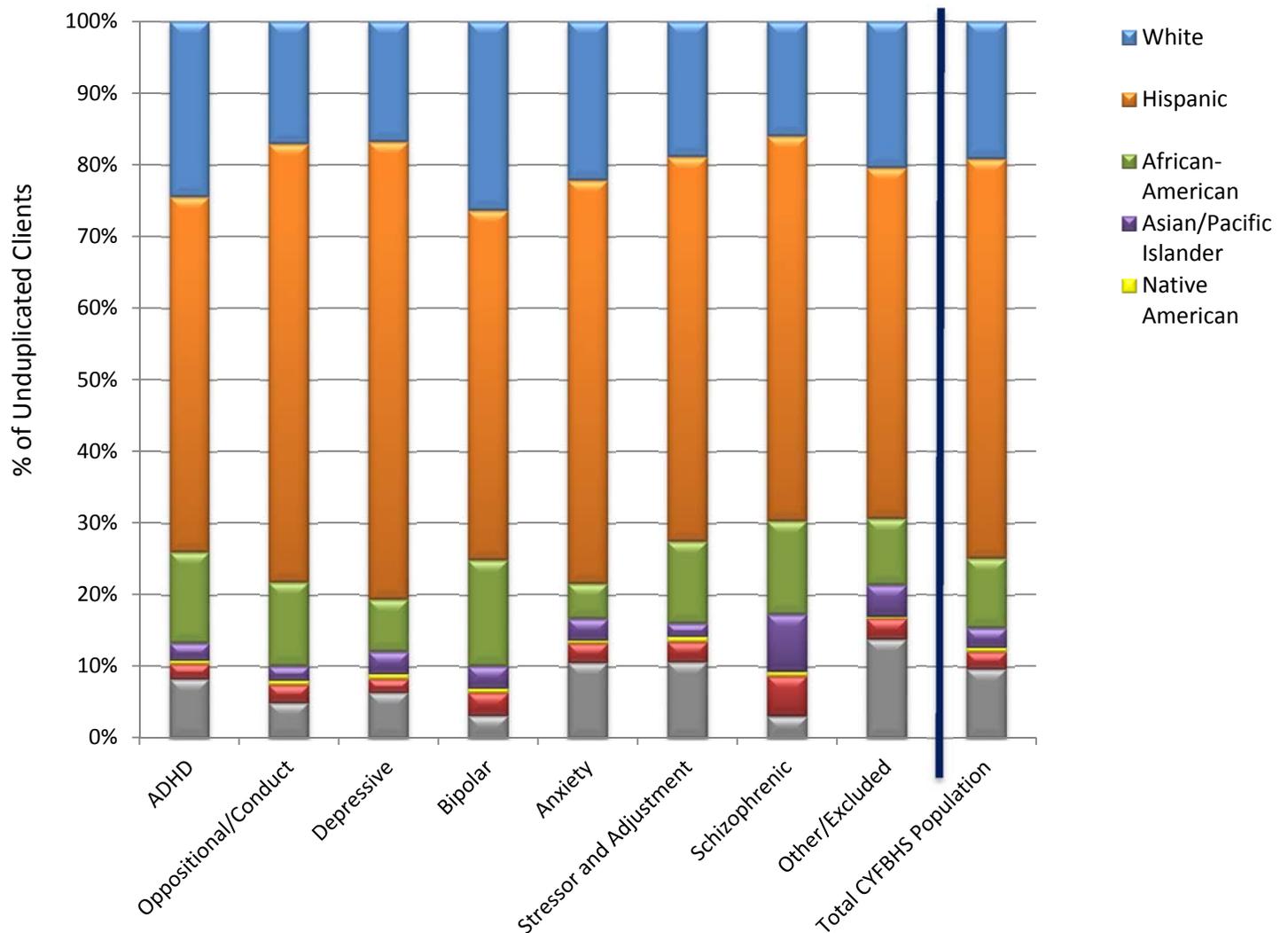
<u>Age:</u>	<u>N</u>	<u>%</u>		<u>Primary Diagnosis:</u>	<u>N</u>	<u>%</u>
0-5:	0	0.0%		ADHD:	77	6.5%
6-11:	1	0.1%		Oppositional/Conduct:	337	28.4%
12-17:	989	79.8%		Depressive disorders:	302	25.5%
18+:	250	20.2%		Bipolar disorders:	126	10.6%
				Anxiety disorders:	51	4.3%
				Stressor and Adjustment:	162	13.7%
<u>Gender:</u>	<u>N</u>	<u>%</u>		<i>Adjustment disorders</i>	65	
Female:	443	35.7%		<i>PTSD/Other acute stress reaction</i>	97	
Male:	797	64.3%		Schizophrenic disorders:	34	2.9%
				Other/Excluded:	96	8.1%
<u>Race/Ethnicity:</u>	<u>N</u>	<u>%</u>		<i>Invalid/Missing:</i>	55	
White:	227	18.3%				
Hispanic:	759	61.2%		<u>Dual Diagnosis:</u>	923	74.4%
Black:	168	13.5%				
Asian/PI:	22	1.8%				
Native Am.:	11	0.9%				
Other:	25	2.0%				
Unknown:	28	2.3%				
<u>Use of Outpatient Services</u> – Percent of CYFBHS-CoSub clients using service, Mean Hours (Median Hours)						
Therapy:		75.2%		8.5 (6.1)		
Assessment:		57.6%		3.3 (2.5)		
Collateral:		46.1%		6.8 (1.9)		
Medication Support:		45.6%		3.1 (2.3)		
Case Management/Rehab:		74.7%		12.9 (7.1)		
Crisis Services:		1.9%		1.5 (1.2)		
TBS:		2.3%		25.7 (6.6)		
<u>Use of Intensive Services</u> – Percent of CYFBHS-CoSub clients using service, Mean Days (Median Days)						
Day Treatment:		19.9%		66.4 (46)		
Inpatient:		6.4%		10.9 (6)		
Crisis Stabilization:		6.0%		1.7 (1)		

Appendix I: Examination of Primary Diagnosis by Client Characteristics

The diagnosis categories are examined by race/ethnicity in **Figure I.1**. The racial/ethnic breakdown for the total CYFBHS sample is displayed on the far right for comparison purposes. There are differences in the distribution of diagnoses by racial/ethnic groups; for example, a large difference is seen in the Bipolar disorders: 26% of youth diagnosed with Bipolar disorder are White, although White clients comprise 19% of the total CYFBHS population. These results are similar to the patterns seen in the past five years, indicating that the distribution is consistent over time.

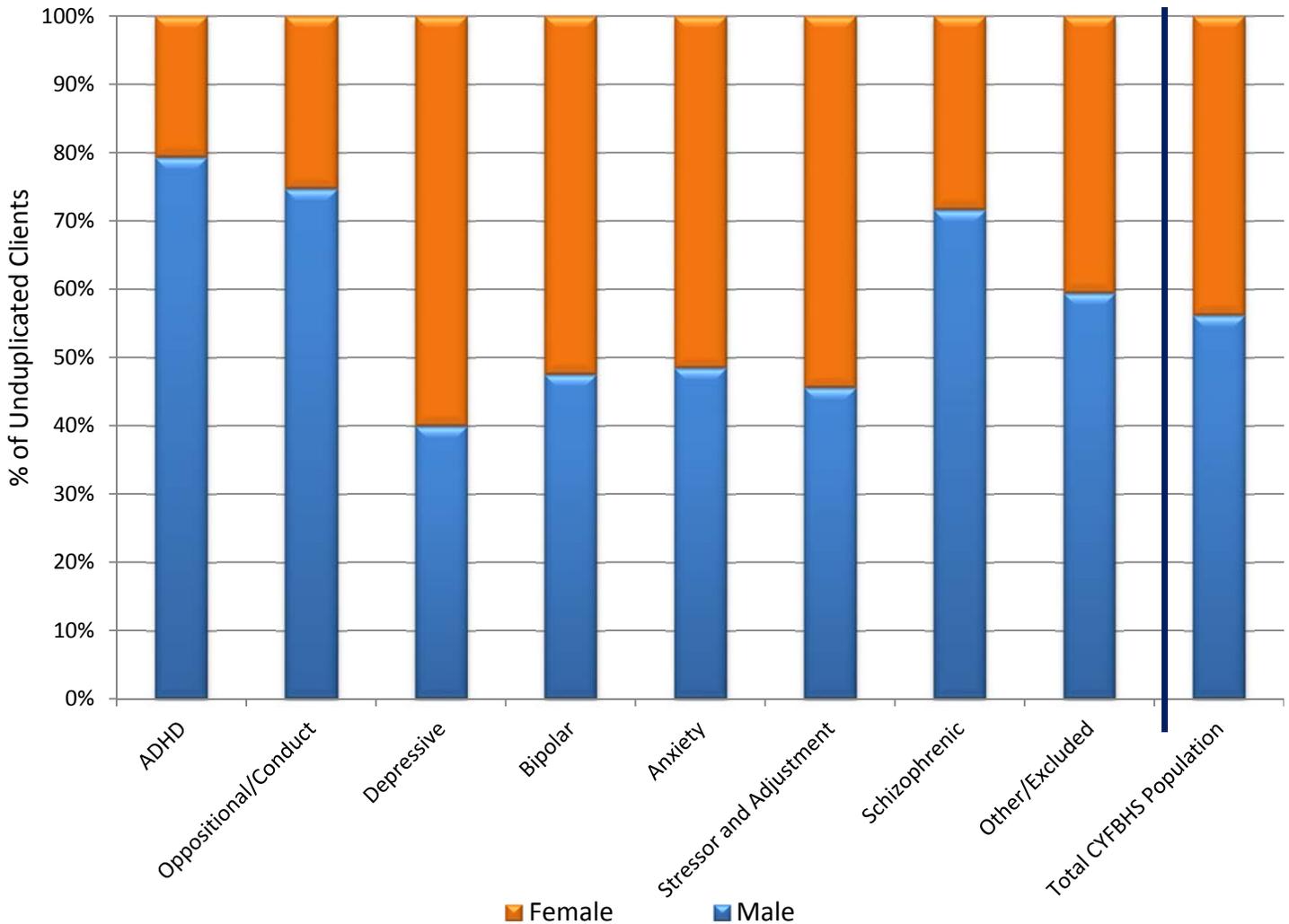
Although there is limited research on the racial/ethnic differences in the mental health diagnoses of children, several research studies have shown differences in mental health diagnosis along racial / ethnic lines. One of the most consistent findings is that African American youth tend to be more often diagnosed with disruptive behavior disorders.¹⁻³ In addition, several studies, including a Veterans Administration study involving over 100,000 veterans, have found that African-American adults are underdiagnosed with Bipolar disorders.⁴⁻⁸

Figure I.1: Diagnosis by Race/Ethnicity



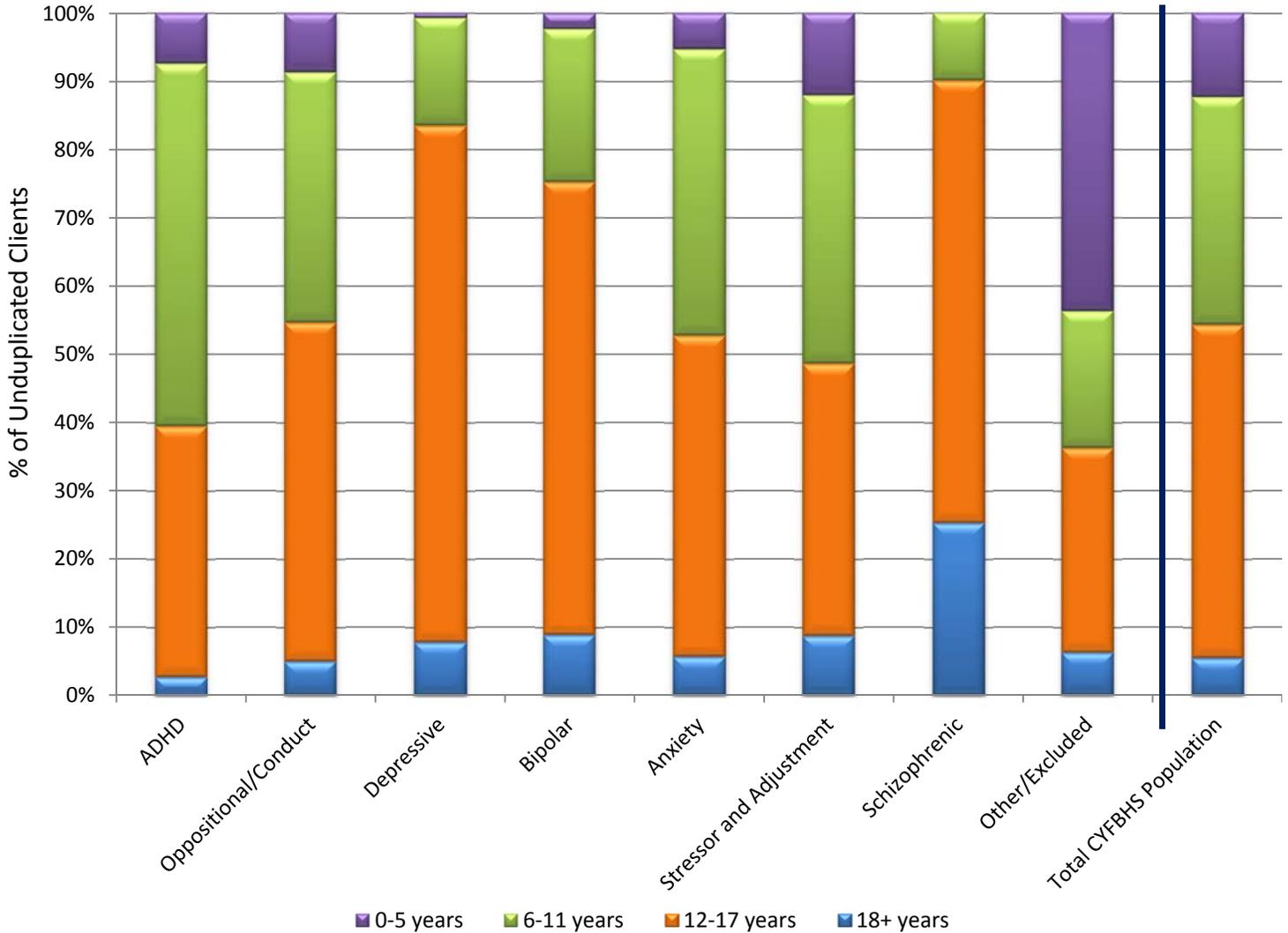
The patterns of diagnosis are significantly different by gender. Males are more likely to be diagnosed with externalizing disorders, such as ADHD or Oppositional disorders, while females are more likely to be diagnosed with internalizing disorders, such as depressive or anxiety disorders, as compared to their distribution in the total sample (**Figure I.2**). Again, these results are similar to the patterns over the past five years, indicating that the distribution is consistent over time. This is also consistent with previous research, which has found ADHD more likely recognized in boys, who tend to exhibit externalizing symptoms (i.e. disruptive behavior), than in girls, who are more likely to exhibit internalizing symptoms (i.e. inattentive behavior).⁹

Figure I.2: Primary Diagnosis by Gender



When diagnoses are examined by age, significant differences are present (**Figure I.3**). Young children (age 0-5) are being diagnosed with Title 9 excluded diagnoses and diagnoses that fall in the *Other* category at a markedly higher rate, compared to other age ranges. Elementary age children (age 6-11) are presenting most often with ADHD and stressor/adjustment disorders; schizophrenic, depressive, and bipolar disorders are predominately diagnosed in adolescents. Finally, youth ages 18 and older, who continue to be served through CYFBHS are most likely to have a diagnosis of schizophrenia. These patterns are consistent with those found in the previous five years.

Figure I.3: Primary Diagnosis by Age



These results are also consistent with national data on the onset of mental health disorders. The median age for onset of ADHD is seven years, while the median age of onset for an anxiety disorder is age 11.¹⁰ The onset of mood disorders (depressive, bipolar) is later than the onset of anxiety disorder. Schizophrenia often first appears in men in their late teens or early twenties, while women are generally affected in their twenties or early thirties.¹¹ Symptoms of many mental health disorders begin in childhood and adolescence, resulting in calls for increased prevention and early intervention efforts for children.

In summary, the relationship of diagnoses with race/ethnicity, gender, and age, is very similar to those found over the past five years. This would indicate that the patterns accurately reflect what is occurring in the system and that no major changes in diagnostic patterns occurred over the five-year period. However, the distribution of diagnoses in the FY 2014-15 CYFBHS sample is not directly comparable to previous years due to the reclassification of diagnostic categories to align with ICD-10.

Appendix J: Detailed Service Utilization Data Tables

Table J.1: Outpatient Service Utilization by Diagnosis*†

Diagnosis	N	Therapy			Assessment			Collateral			Medication Support		
		%	Mean Hours	Median Hours	%	Mean Hours	Median Hours	%	Mean Hours	Median Hours	%	Mean Hours	Median Hours
		Total Sample	18317	72.9%	8.3	6.5	69.2%	3.0	2.5	47.3%	3.9	1.4	28.5%
ADHD	2282	70.8%	8.7	7.0	61.2%	2.9	2.3	50.1%	4.4	1.6	57.3%	2.9	2.1
Opp/Conduct	2505	78.2%	8.6	6.8	68.0%	2.9	2.5	58.0%	3.7	1.4	28.2%	3.0	2.1
Depressive	3725	78.9%	8.2	6.5	72.9%	3.2	2.8	55.9%	3.3	1.3	30.1%	2.8	2.1
Bipolar	1079	69.6%	8.9	6.8	65.2%	4.1	3.0	54.3%	4.8	1.7	52.3%	4.0	2.8
Anxiety	1792	82.8%	8.4	6.7	72.5%	2.8	2.3	49.2%	3.5	1.2	29.2%	2.8	2.0
Stressor and Adjustment†	4263	82.0%	8.1	6.4	73.4%	2.7	2.3	45.0%	4.2	1.4	13.5%	2.9	1.9
Schizophrenic	162	65.4%	9.5	8.1	61.7%	4.3	3.1	58.6%	4.7	1.9	73.5%	3.8	2.7
Other/Excluded	1448	40.1%	9.5	7.9	82.6%	3.1	2.5	26.2%	4.4	1.8	17.8%	3.2	2.0

Diagnosis	N	Case Management			Crisis Services			TBS		
		%	Mean Hours	Median Hours	%	Mean Hours	Median Hours	%	Mean Hours	Median Hours
		Total Sample	18317	41.4%	7.8	2.8	2.2%	1.6	1.3	5.9%
ADHD	2282	38.1%	9.6	2.5	0.8%	1.1	0.6	8.0%	46.4	41.3
Opp/Conduct	2505	47.9%	9.1	3.8	1.2%	1.5	1.2	7.9%	40.2	30.7
Depressive	3725	48.9%	7.1	2.8	4.8%	1.8	1.5	5.8%	36.3	23.3
Bipolar	1079	53.3%	11.6	4.1	3.7%	1.3	1.1	11.7%	41.1	29.7
Anxiety	1792	36.1%	6.7	2.6	2.1%	1.6	1.4	4.0%	40.1	29.7
Stressor and Adjustment†	4263	38.0%	6.5	2.6	1.5%	1.6	1.5	5.0%	27.2	10.0
Schizophrenic	162	63.0%	10.0	4.8	13.0%	1.6	0.7	8.0%	10.7	5.8
Other/Excluded	1448	23.0%	8.8	3.5	0.8%	1.1	0.8	3.8%	35.4	18.3

*Youth with an invalid or missing diagnosis are excluded from these analyses.

†In alignment with ICD-10, Adjustment disorders and PTSD/Other acute stress reaction are classified within the Stressor and Adjustment category.

Table J.2: Intensive Levels of Service Utilization by Diagnosis*

Diagnosis	N	Inpatient			Day Treatment			Crisis Stabilization		
		%	Mean Days	Median Days	%	Mean Days	Median Days	%	Mean Days	Median Days
		Total Sample	18317	4.3%	10.1	5.0	5.0%	89.3	67.0	4.5%
ADHD	2282	1.3%	8.7	5.0	5.0%	102.4	96.0	1.2%	1.2	1.0
Opp/Conduct	2505	1.9%	16.5	6.0	6.7%	80.2	56.0	3.4%	1.5	1.0
Depressive	3725	10.3%	9.2	5.0	4.9%	86.8	54.5	11.4%	1.7	1.0
Bipolar	1079	12.9%	10.1	6.0	17.5%	114.6	104.0	8.8%	1.9	1.0
Anxiety	1792	2.0%	5.9	4.0	2.6%	103.0	99.0	2.5%	1.3	1.0
Stressor and Adjustment†	4263	1.3%	7.9	5.0	3.4%	53.8	32.0	2.3%	1.4	1.0
Schizophrenic	162	23.5%	24.0	12.5	16.0%	86.6	50.5	16.0%	2.3	1.0
Other/Excluded	1448	1.4%	7.8	5.5	3.7%	91.9	68.0	1.0%	1.2	1.0

*Youth with an invalid or missing diagnosis are excluded from these analyses.

†In alignment with ICD-10, Adjustment disorders and PTSD/Other acute stress reaction are classified within the Stressor and Adjustment category.

Table J.3: Outpatient Service Utilization by Race/Ethnicity[‡]

Race/ Ethnicity	N	Therapy			Assessment			Collateral			Medication Support		
			Mean	Median		Mean	Median		Mean	Median		Mean	Median
		%	Hours	Hours	%	Hours	Hours	%	Hours	Hours	%	Hours	Hours
Total Sample	18317	72.9%	8.3	6.5	69.2%	3.0	2.5	47.3%	3.9	1.4	28.5%	3.0	2.1
White	3525	74.2%	9.4	7.5	68.4%	3.2	2.5	49.8%	4.9	1.7	39.3%	3.6	2.4
Hispanic	10205	75.6%	8.2	6.5	69.7%	3.1	2.7	52.6%	3.4	1.3	25.3%	2.7	2.0
Black	1779	68.6%	8.9	6.9	65.1%	3.3	2.8	45.5%	5.5	1.6	37.4%	3.7	2.8
Asian/ Pacific Islander	490	71.6%	8.3	7.6	70.4%	3.5	3.0	52.2%	3.8	1.5	34.3%	3.1	2.4
Native American	110	75.5%	7.4	6.4	67.3%	3.4	2.3	48.2%	4.4	2	36.4%	2.5	1.9
Other	437	64.1%	7.7	6.0	73.0%	2.9	2.5	49.2%	3.6	1.5	27.5%	3.0	2.3
Unknown	1720	63.0%	5.9	4.5	72.8%	1.6	0.8	12.4%	2.2	1.0	14.8%	2.0	1.3

Race/Ethnicity	N	Case Management			Crisis Services			TBS		
			Mean	Median		Mean	Median		Mean	Median
		%	Hours	Hours	%	Hours	Hours	%	Hours	Hours
Total Sample	18317	41.4%	7.8	2.8	2.2%	1.6	1.3	5.9%	37.3	22.9
White	3525	40.4%	9.1	2.9	3.1%	1.4	1.2	7.1%	37.8	23.5
Hispanic	10205	45.8%	7.2	2.7	2.2%	1.8	1.5	5.9%	37.6	24.8
Black	1779	49.4%	10.5	4.4	2.0%	1.6	1.1	8.8%	36.3	13.7
Asian/ Pacific Islander	490	48.2%	6.6	2.3	3.3%	1.7	1.6	6.1%	44.1	42.3
Native American	110	55.5%	7.5	2.6	2.7%	0.9	0.8	10.0%	14.3	3.4
Other	437	38.4%	7.1	3	1.8%	1.9	1.7	5.3%	34.4	13.5
Unknown	1720	8.4%	4.3	1.7	0.7%	1.4	0.7	0.6%	29.3	6.4

[‡]Youth with a missing race/ethnicity code are excluded from these analyses.

Table J.4: Intensive Service Utilization by Race/Ethnicity[‡]

Race/Ethnicity	N	Inpatient			Day Treatment			Crisis Stabilization		
			Mean	Median		Mean	Median		Mean	Median
		%	Days	Days	%	Days	Days	%	Days	Days
Total Sample	18317	4.3%	10.1	5.0	5.0%	89.3	67.0	4.5%	1.6	1.0
White	3525	5.7%	11.4	5.0	6.4%	92.9	79.0	4.5%	1.7	1.0
Hispanic	10205	3.7%	9.2	5.0	4.0%	82.0	58.0	4.8%	1.6	1.0
Black	1779	5.4%	9	5.0	13.2%	97.3	78.5	6.4%	1.7	1.0
Asian/ Pacific Islander	490	9.0%	13.5	6.0	4.7%	113.1	114.0	6.9%	1.7	1.0
Native American	110	9.1%	11.3	6.0	9.1%	103.7	81.5	4.5%	1.8	2.0
Other	437	5.3%	15.7	6.0	3.9%	68.2	38.0	3.4%	1.4	1.0
Unknown	1720	2.0%	6.5	5.0	0.3%	87.2	53.0	0.3%	1.3	1.0

[‡]Youth with a missing race/ethnicity code are excluded from these analyses.

Appendix K: References

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