

CHILD & ADULT PEI PROGRAMS

SYSTEMWIDE SUMMARY

COUNTY OF SAN DIEGO HEALTH & HUMAN SERVICES AGENCY
BEHAVIORAL HEALTH SERVICES
PREVENTION & EARLY INTERVENTION PROGRAMS

FISCAL YEAR 2018—2019 ANNUAL REPORT



The Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) funding gives counties a unique opportunity to implement programs to help prevent the onset of mental illness or to provide early intervention to decrease severity. With this funding source, the County of San Diego contracted with providers for PEI programs for adults and older adults, and youth and transition age youth (TAY) and their families. The focus of these programs varies widely, from reducing the stigma associated with mental illness to preventing youth suicide. Each contractor collects information on the demographics of their participants and their satisfaction with the services provided for both active and outreach participants. Active participants include people who are enrolled in a PEI program and/or are receiving services at a PEI program. Outreach participants include people who are touched by the program via outreach efforts, including but not limited to: presentations, community events, and fairs.

DATA: Child and Adult PEI Programs

REPORT PERIOD: 7/1/2018-6/30/2019

NUMBER OF PARTICIPANTS WITH DATA IN FY 2018-19: 41,164 (Unduplicated) *†‡

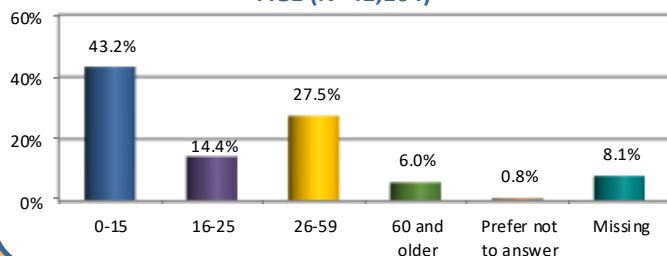
*Data for all students participating in the HERE Now Suicide Prevention program were calculated from a representative sample of students who provided demographic and satisfaction information.

†Data collection requirements vary by program type. Not all programs are required to collect data for every indicator, which accounts for the two different denominators presented in this report: (N=41,164 vs. N=21,064).

‡All known duplicates are excluded from this count; however, unduplicated status cannot be verified among programs that do not issue client identification numbers.

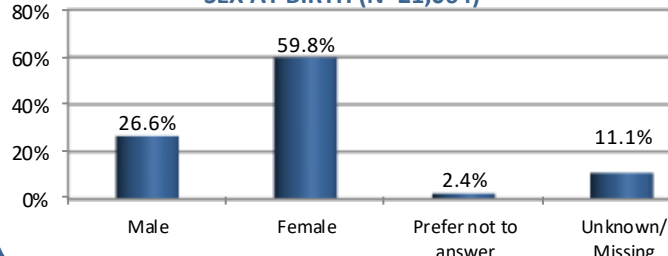
PARTICIPANT SYSTEMWIDE DEMOGRAPHICS

AGE (N=41,164)



Forty-three percent of participants were under the age of 16, and twenty-eight percent were between the ages of 26-59.

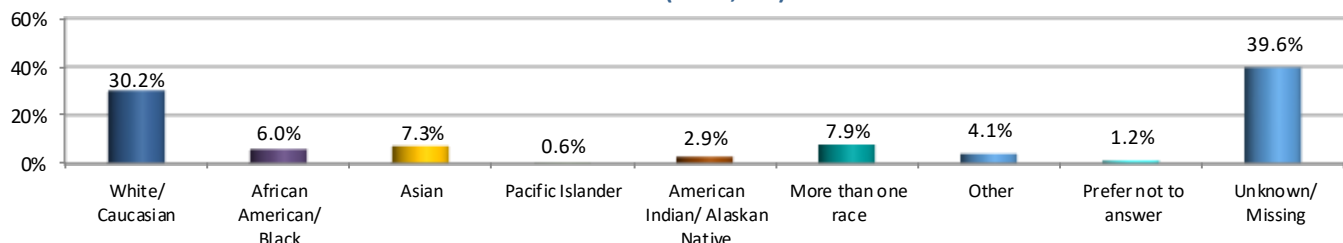
SEX AT BIRTH (N=21,064)*



Sixty percent of participants identified their sex at birth as female.

* Not all programs are required to collect data for every indicator, which accounts for the lower denominator (N=21,064 vs N=41,164).

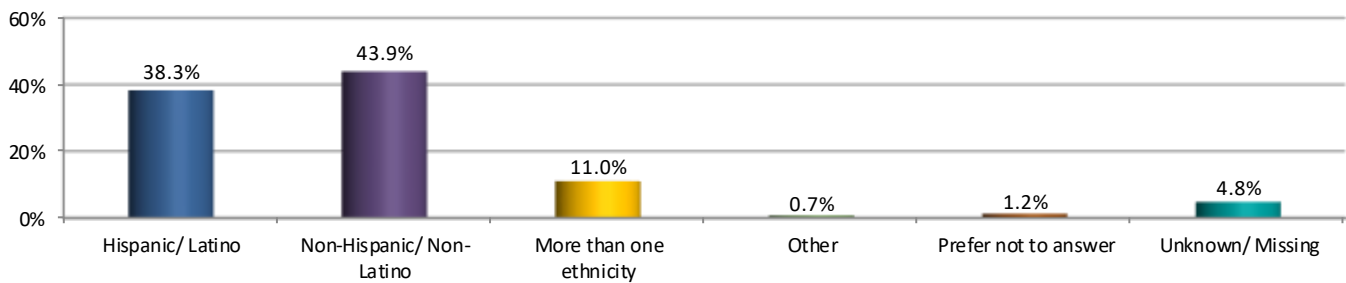
RACE (N=41,164)



Thirty percent of participants identified their racial background as White/Caucasian. Eight percent of participants identified as having more than one racial background and seven percent of participants identified as Asian. The percentage of unknown/missing includes clients who only endorsed being Hispanic/Latino and did not indicate a racial category.

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS

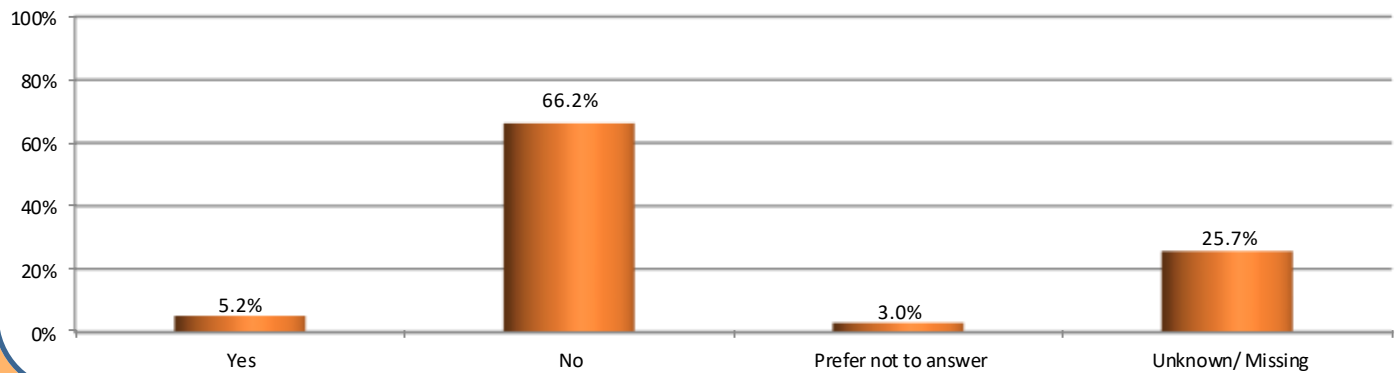
ETHNICITY (N=41,164)



Nearly forty-four percent of participants identified their ethnic background as non-Hispanic/ non-Latino. Thirty-eight percent of participants identified their ethnic background as Hispanic/Latino. See Appendix A for supplemental data on participant ethnicity.

MILITARY SERVICE

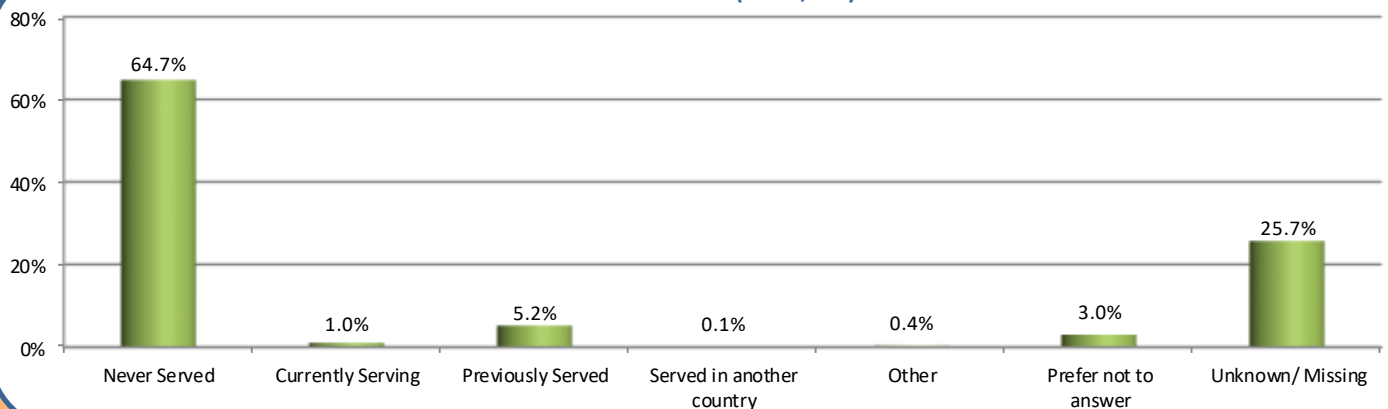
VETERAN STATUS (N=21,064)*



Information on veteran status indicated over five percent of participants had served in the military.

* Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=21,064 vs N=41,164).

MILITARY STATUS (N=21,064)*

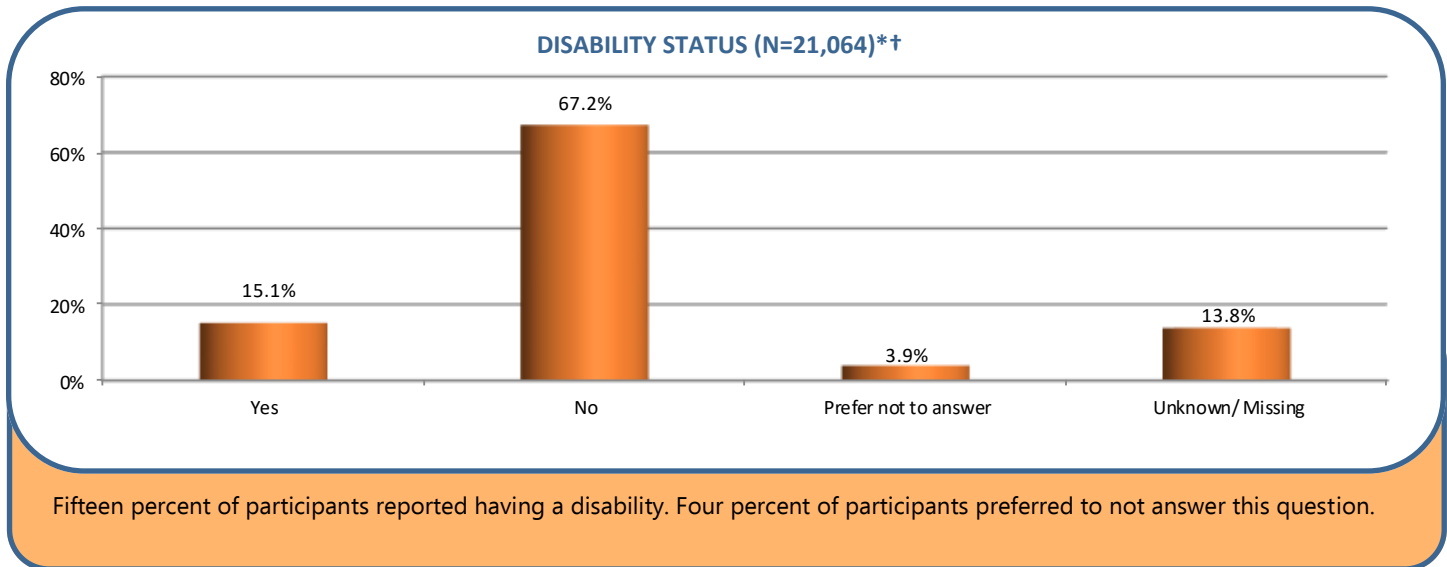


Nearly sixty-five percent of participants had never served in the military. One percent of participants indicated they are currently serving in the military and over five percent indicated they had previously served in the military.

*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=21,064 vs N=41,164).

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS - CONTINUED

DISABILITY STATUS



*A disability is defined as a physical or mental impairment or medical condition lasting at least six months that substantially limits a major life activity, which is not the result of a serious mental illness.

†Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=21,064 vs N=41,164).

DISABILITY (N=21,064)*†	Count	%
Difficulty seeing	755	3.6
Difficulty hearing or having speech understood	381	1.8
Mental disability not including mental illness	830	3.9
Learning disability	404	1.9
Developmental disability	92	0.4
Physical/ mobility disability	822	3.9
Chronic health condition/ chronic pain	1,234	5.9
Dementia	79	0.4
Other communication disability	106	0.5
Other mental disability not related to mental illness	255	1.2
Other disability	434	2.1
No disability	14,160	67.2
Prefer not to answer	832	3.9
Unknown/ Missing	2,899	13.8

Over sixty-seven percent of the participants indicated no disability. Nearly six percent of participants indicated having a chronic health/chronic pain condition. Approximately four percent of participants each indicated having a physical/ mobility disability, a mental disability not including mental illness, or difficulty seeing.

*The sum of the percentages may exceed 100% because participants can select more than one type of disability.

†A disability is defined as a physical or mental impairment or medical condition lasting at least six months that substantially limits a major life activity, which is not the result of a serious mental illness.

‡Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=21,064 vs N=41,164).

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS - CONTINUED

PARTICIPANT LANGUAGE

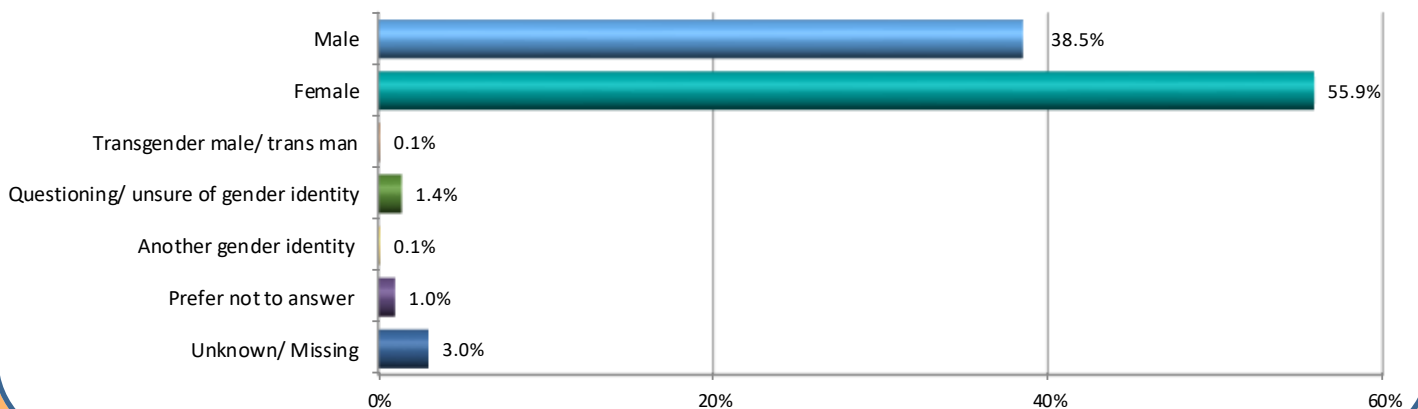
PRIMARY LANGUAGE (N=21,064)*	N	%
English	9,238	43.9%
Spanish	7,418	35.2%
American Sign Language	66	0.3%
Arabic	666	3.2%
Armenian	27	0.1%
Cantonese	11	0.1%
Farsi	47	0.2%
French	20	0.1%
Hebrew	18	0.1%
Mandarin	14	0.1%
Tagalog	137	0.7%
Vietnamese	75	0.4%
Other	757	3.6%
Prefer not to answer	254	1.2%
Unknown/Missing	2,316	11.0%

Forty-four percent of participants identified their primary language as English. Thirty-five percent of participants identified their primary language as Spanish. See Appendix B for supplemental data.

* Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N= 21,064 vs N=41,164).

GENDER IDENTITY

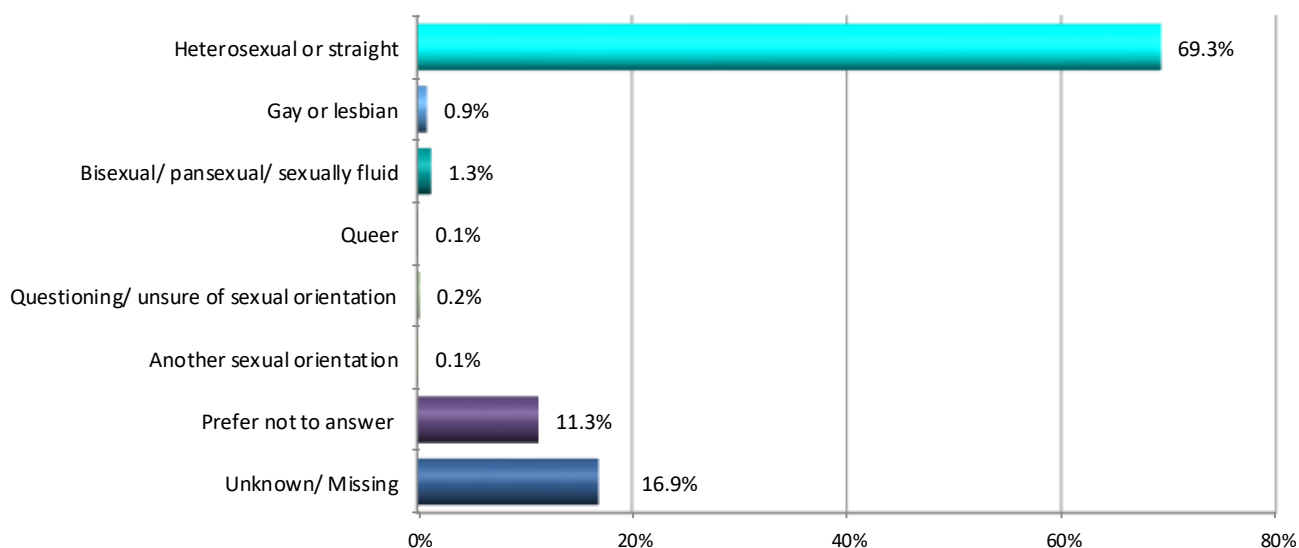
GENDER IDENTITY (N=41,164)



Fifty-six percent of the participants identified as female. Thirty-nine percent of participants identified as male.

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS - CONTINUED

SEXUAL ORIENTATION (N=21,064)*

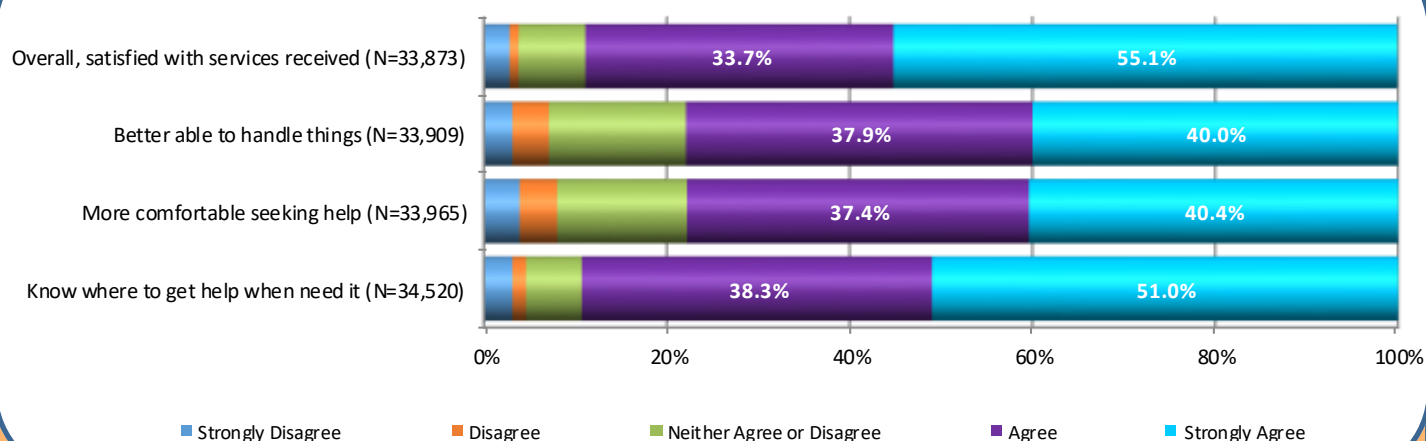


Sixty-nine percent of the participants identified their sexual orientation as heterosexual/straight. Approximately one percent of participants identified their sexual orientation as bisexual/pansexual/sexually fluid, or gay or lesbian. Eleven percent of participants preferred not to answer this question.

* Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=21,064 vs N=41,164).

PARTICIPANT SYSTEMWIDE PROGRAM SATISFACTION

PROGRAM SATISFACTION*†



Eighty-nine percent of the participants agreed or strongly agreed that they knew where to get needed help as a result of the program. Nearly eighty-nine percent of participants agreed or strongly agreed that they were overall satisfied with the services they received. Nearly seventy-eight percent of participants agreed or strongly agreed that they were better able to handle things and solve problems as a result of the program. An additional seventy-eight percent of participants agreed or strongly agreed that they were more comfortable seeking help as a result of the program.

*Satisfaction data not available for all participants.

†Satisfaction data may include duplicate participants.

CHILD AND ADULT PARTICIPANT SYSTEMWIDE REFERRAL TRACKING SUMMARY

In FY 2016-17, County of San Diego Behavioral Health Services (BHS) implemented a referral tracking procedure in order to collect data on referrals made by PEI programs and successful links to services.

A total of 1,025 participants received a mental health referral, and 374 of these participants successfully received a mental health service as a result of the referral (Linkage Rate = 36.5%).

A total of 324 participants received a substance use referral, and 157 of these participants successfully received a substance use service as a result of the referral (Linkage Rate = 48.5%).

The average time between referral and linkage to services was twenty-four days.

**Referral data were not available for all programs.*

The Health Services Research Center (HSRC) at University of California, San Diego is a non-profit research organization within the Department of Family and Preventive Medicine. HSRC works in collaboration with the Quality Improvement Unit of the County of San Diego Behavioral Health Services to evaluate and improve behavioral health outcomes for County residents. Our research team specializes in the measurement, collection and analysis of health outcomes data to help improve health care delivery systems and, ultimately, to improve client quality of life. For more information please contact Andrew Sarkin, PhD at 858-622-1771.

The Child and Adolescent Services Research Center (CASRC) is a consortium of over 100 investigators and staff from multiple research organizations in San Diego County and Southern California, including: Rady Children's Hospital, University of California at San Diego, San Diego State University, University of San Diego and University of Southern California. The mission of CASRC is to improve publicly-funded mental health service delivery and quality of treatment for children and adolescents who have or are at high risk for the development of mental health problems or disorders.

