

CHILD & ADULT PEI PROGRAMS

SYSTEMWIDE SUMMARY

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

FISCAL YEAR 2019 – 20 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: 7/1/2019-6/30/2020

NUMBER OF PARTICIPANTS WITH DATA IN FY 2019-20: 35,622 (Unduplicated)*†‡

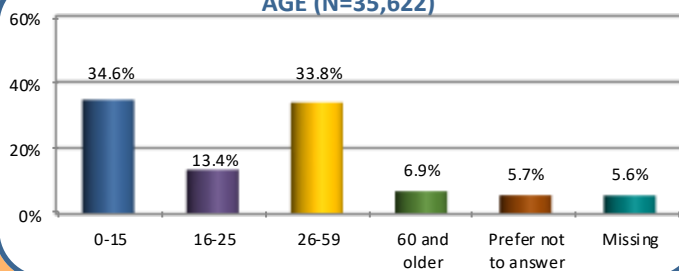
*Data for all students participating in the HERE Now Suicide Prevention program were calculated from a representative sample of students who provided demographic and satisfaction information.

†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=35,622 vs. N=22,130).

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

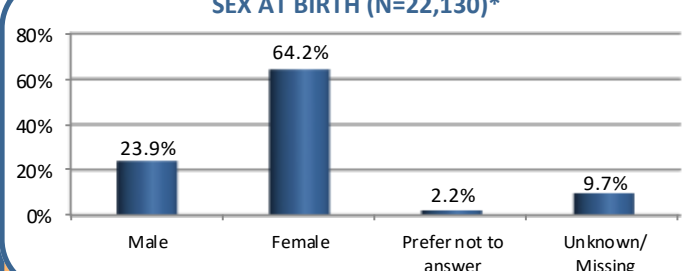
PARTICIPANT SYSTEMWIDE DEMOGRAPHICS

AGE (N=35,622)



Thirty-five percent of participants were under the age of 16, and thirty-four percent were between the ages of 26-59.

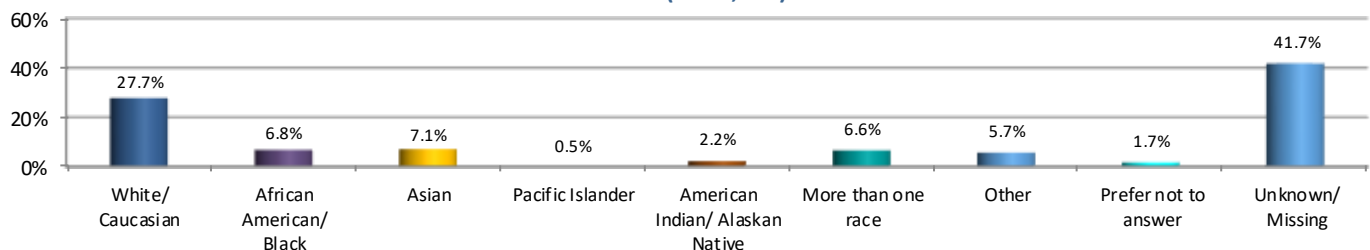
SEX AT BIRTH (N=22,130)*



Sixty-four 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=22,130 vs N=35,622).

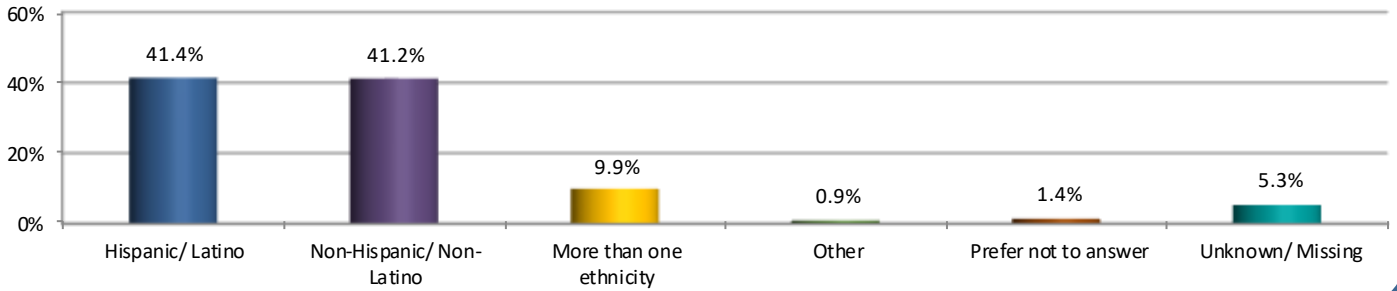
RACE (N=35,622)



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

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS

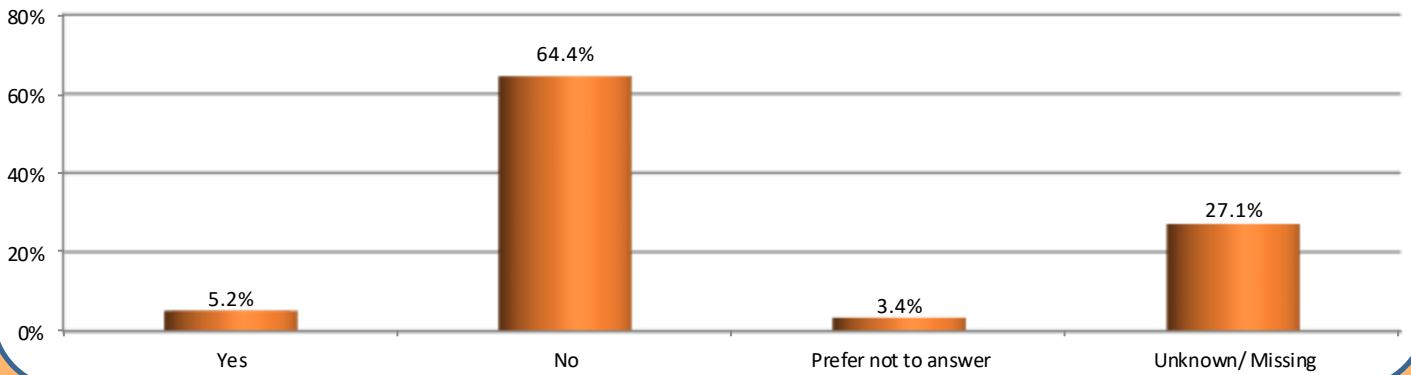
ETHNICITY (N=35,622)



Forty-one percent of participants identified their ethnic background as Hispanic/Latino. Equally, forty-one percent of participants identified their ethnic background as non-Hispanic/non-Latino.

MILITARY SERVICE

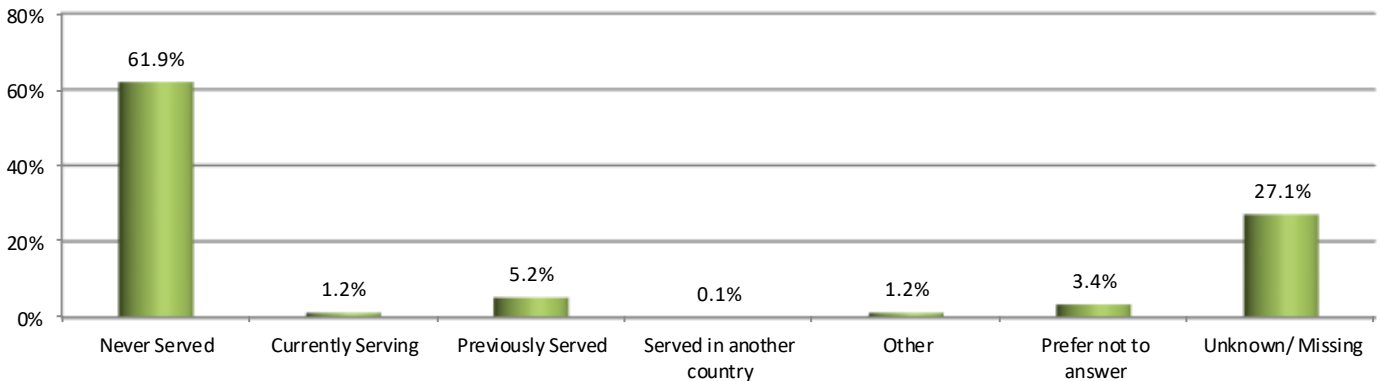
VETERAN STATUS (N=22,130)*



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=22,130 vs N=35,622).

MILITARY STATUS (N=22,130)*

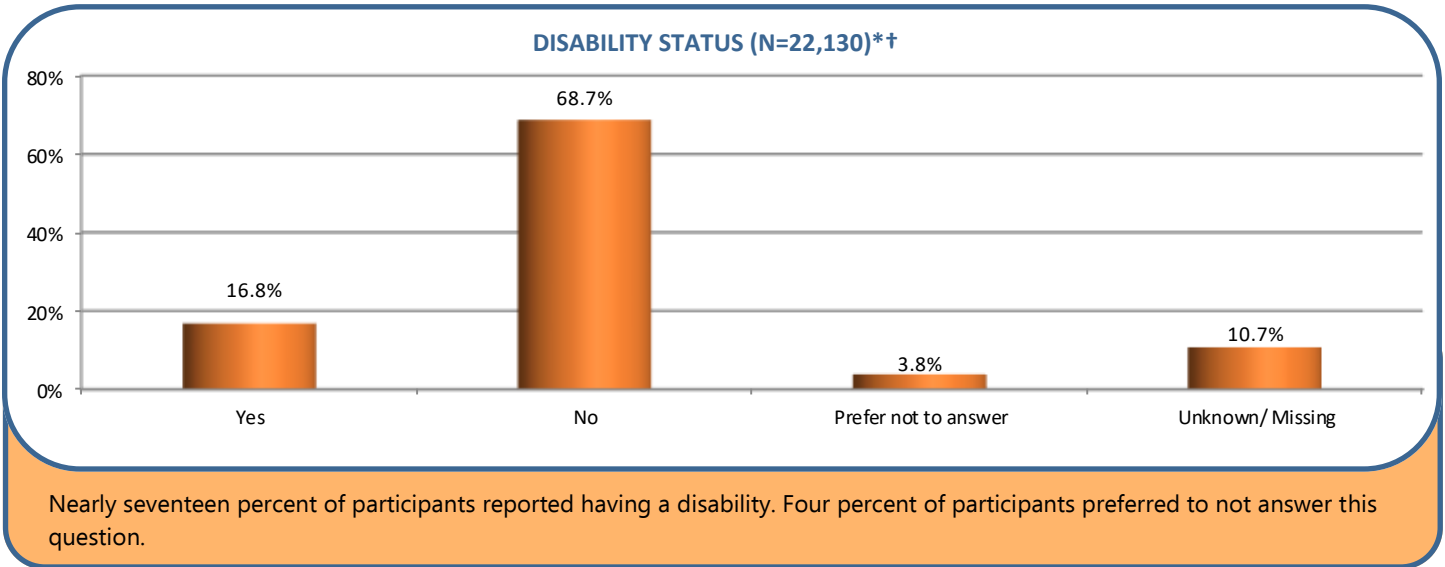


Nearly sixty-two percent of participants had never served in the military. One percent of participants indicated they are currently serving in the military and over five percent indicated they had previously served in the military.

*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=22,130 vs N=35,622).

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=22,130)**	Count	%
Difficulty seeing	816	3.7
Difficulty hearing or having speech understood	399	1.8
Mental disability not including mental illness	816	3.7
Learning disability	380	1.7
Developmental disability	123	0.6
Physical/ mobility disability	821	3.7
Chronic health condition/ chronic pain	1,476	6.7
Dementia	78	0.4
Other communication disability	112	0.5
Other mental disability not related to mental illness	235	1.1
Other disability	660	3.0
No disability	15,236	68.8
Prefer not to answer	831	3.8
Unknown/ Missing	2,377	10.7

Sixty-nine percent of the participants indicated no disability. Nearly seven 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=22,130 vs N=35,622).

PARTICIPANT SYSTEMWIDE DEMOGRAPHICS - CONTINUED

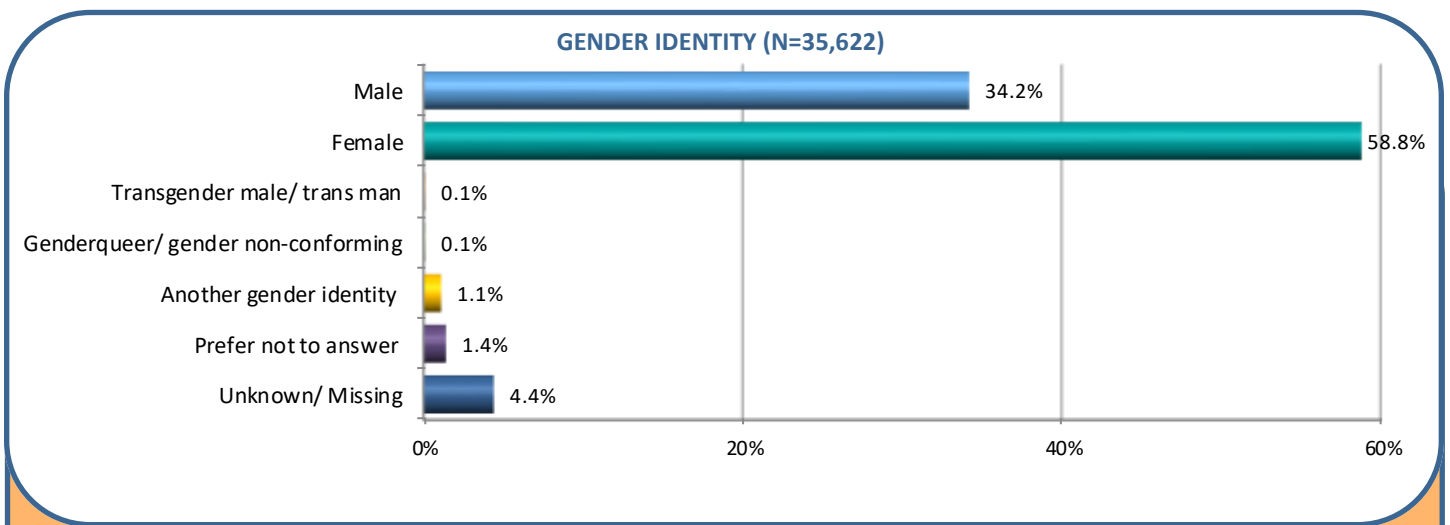
PARTICIPANT LANGUAGE

PRIMARY LANGUAGE (N=22,130)*	N	%
English	10,392	47.0
Spanish	7,565	34.2
American Sign Language	34	0.2
Arabic	644	2.9
Armenian	17	0.1
Cantonese	17	0.1
Farsi	93	0.4
Hebrew	12	0.1
Japanese	14	0.1
Korean	14	0.1
Mandarin	21	0.1
Portuguese	19	0.1
Tagalog	250	1.1
Vietnamese	77	0.3
Other	785	3.5
Prefer not to answer	291	1.3
Unknown/Missing	1,885	8.5

Forty-seven percent of participants identified their primary language as English. Thirty-four percent of participants identified their primary language as Spanish.

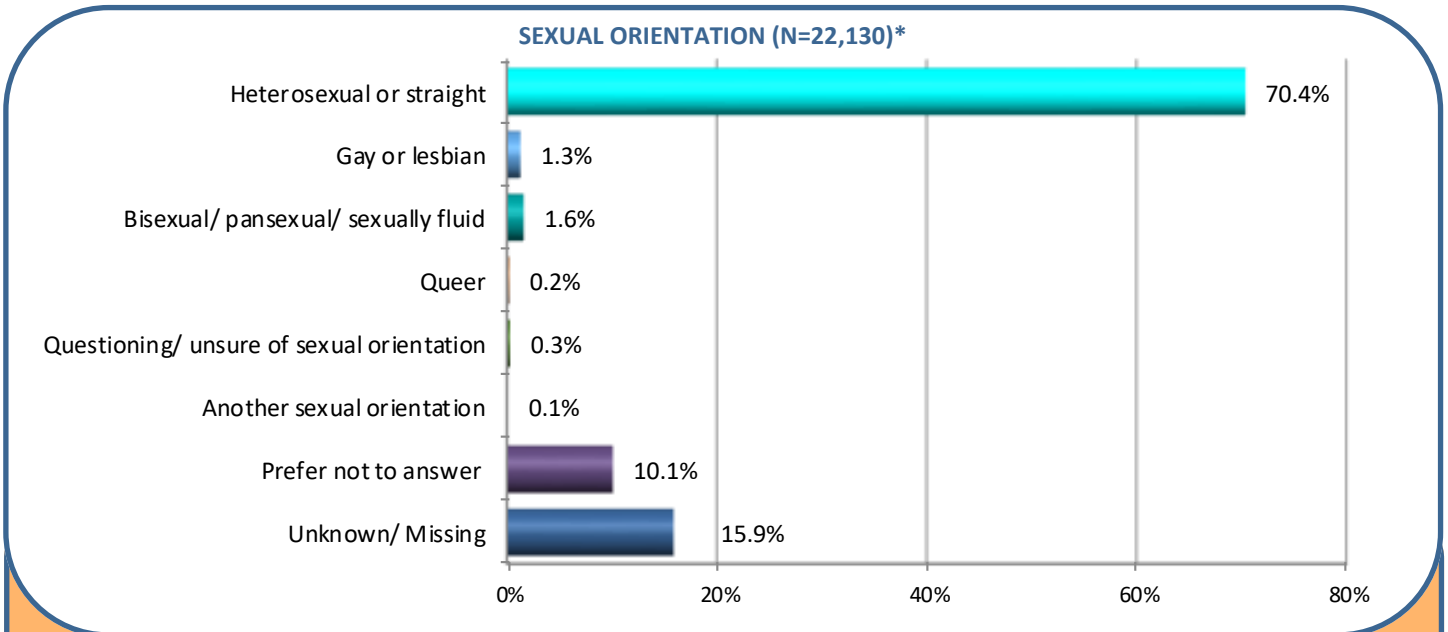
* Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N= 22,130 vs N=35,622).

GENDER IDENTITY



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

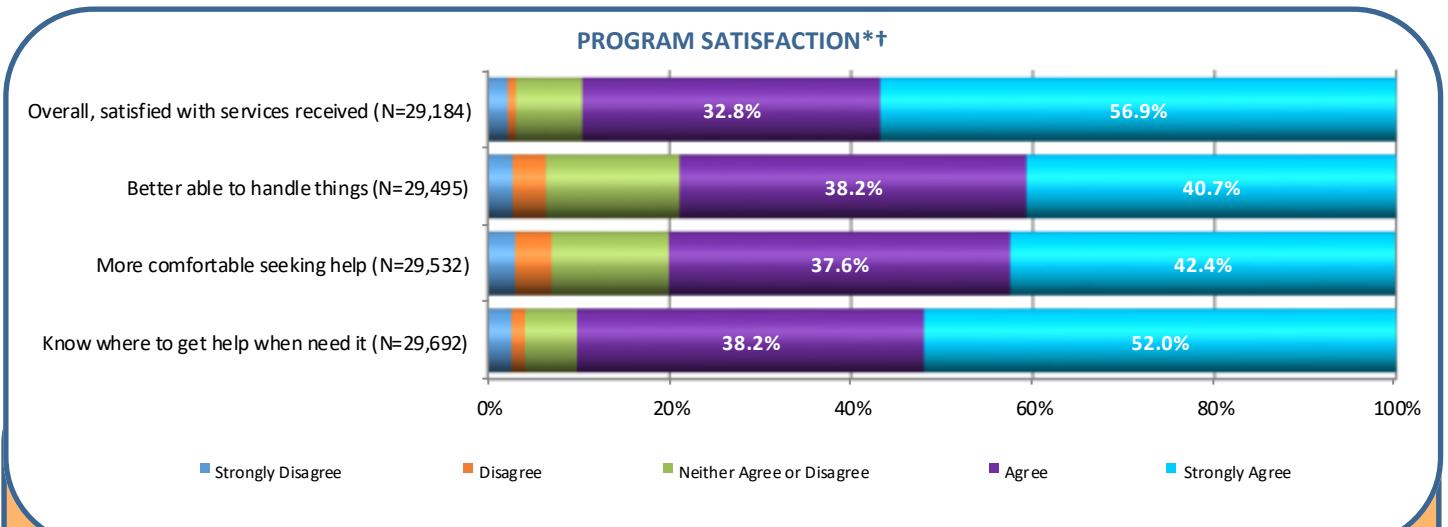
PARTICIPANT SYSTEMWIDE DEMOGRAPHICS - CONTINUED



Seventy percent of the participants identified their sexual orientation as heterosexual/straight. Approximately three percent of participants identified their sexual orientation as bisexual/pansexual/sexually fluid, or gay or lesbian. Ten 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=22,130 vs N=35,622).

PARTICIPANT SYSTEMWIDE PROGRAM SATISFACTION



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

In FY 2019-20, a total of 678 participants received a mental health referral, and 246 of these participants successfully received a mental health service as a result of the referral (Linkage Rate = 36.3%).

A total of 231 participants received a substance use referral, and 112 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 seventeen 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.

