

Helping Youth Thrive in the Community



National Children's Mental Health Awareness Day—May 8, 2008

S Y S T E M S O F C A R E

Who Are Our Youth?

There are an estimated 4.5 to 6.3 million children and youth with mental health challenges in the United States.¹ About two-thirds of these young people do not receive the mental health services they need. In many communities, services for youth with mental health challenges are unavailable, unaffordable, or may not be sufficient to address their needs, leaving these youth at risk for difficulties in school and/or the community.²

This short report provides information on youth aged 14–18 who received services in systems of care. This information, collected by the national evaluation of the system of care program, demonstrates how youth improve from the time they enter systems of care to 18 months following entry into services.

What Are Systems of Care?

The Comprehensive Community Mental Health Services for Children and Their Families Program funded by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration supports the development of community-based systems of care for children and youth with mental health needs and their families.^a This system of care program recognizes the importance of family, school, and community and seeks to promote the potential of every child and youth, regardless of mental health challenge.



A system of care is a coordinated network of community-based services and supports that is organized to meet the challenges of children and youth with serious mental health needs and their families. Families and youth work in partnership with public and private organizations so services and supports are effective, build on the strengths of individuals, and address each person's cultural and linguistic needs. A system of care aims to help children, youth, and families function better at home, in school, and in the community throughout life.

GOOD NEWS . . . Youth in Systems of Care Are Doing Better in School

Schools are among the primary resources for identifying and addressing mental health problems in children and youth. A study of mental health service use found that 67% of children and youth had used some type of service to address a mental health problem by the age of 16.³

Systems of care work to build partnerships with schools and other child-serving agencies to identify the mental health service needs of youth. Schools are the most common source of referral to system of care services (25%), followed by mental health agencies (21%).

^a Children and youth receiving services in funded systems of care range in age from birth to 22 years. To be eligible for services, they must have, or have had at any time during the past year, an emotional, socio-emotional, behavioral, or mental disorder that meets standardized diagnostic criteria, is of sufficient duration, and affects child or youth functioning in home, school, and/or community, or requires intervention by multiple child-serving agencies.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services
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Youth Are Spending More Time in School



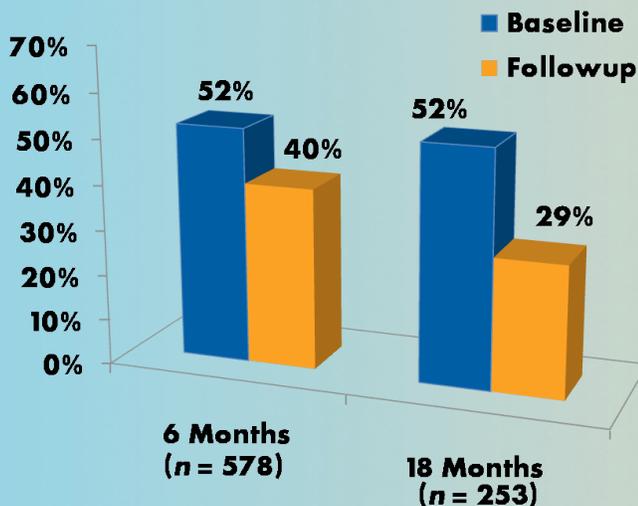
Time in school is an important indicator of successful school performance for all youth. More than half of youth entering systems of care had substantial school-related challenges when they began receiving services. These challenges included difficulty

with grades, low attendance, and behavioral issues, all of which have an impact on the amount of time youth spend in school.

Regular school attendance (80% of the time or more) improved within 6 months in systems of care. Overall, 74% of youth who entered system of care services attended school regularly. Six months after entering services, 81% of youth attended school regularly. Absences from school were reduced 20% for those youth whose attendance was affected by their behavioral and emotional problems (from 76% to 61% at 18 months after entering services).

Youth also had significantly fewer disciplinary problems after participating in system of care services. At 18 months after entering services, the percentage of youth suspended or expelled from school was reduced by 44% (from about 52% to 29%).

Fewer Disciplinary Problems



Youth Are Improving School Grades

Eighteen months after entering system of care services, 73% of youth received passing grades (a grade C or better). This finding is a 31% increase from the time these youth entered systems of care. Despite their challenges, youth served in systems of care were able to spend more time in school and improve their academic performance.

MORE GOOD NEWS . . .

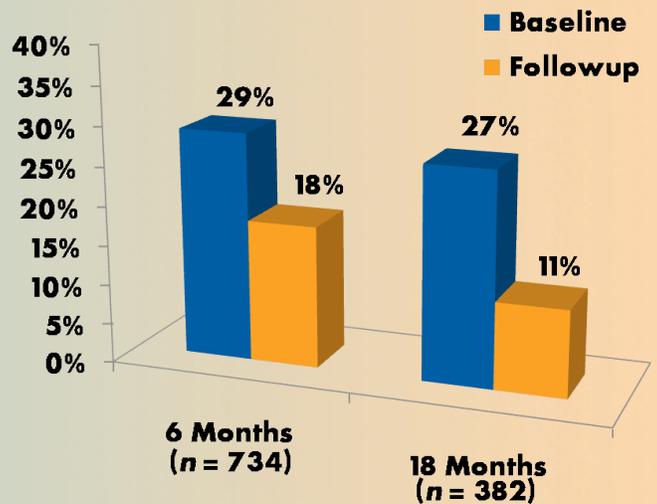
Youth Are Reporting Improved Behavioral Health

Youth Behaviors Are Improving



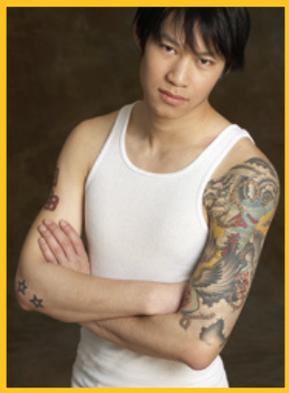
The percentage of youth who did **NOT** engage in delinquent behaviors^b more than doubled 18 months after entry into services (24% to 51%). Youth self-reports of arrests fell by more than half, dropping from 27% upon entering systems of care to 11% at 18 months.

Fewer Arrests



This drop in the number of arrests resulted in substantial cost savings. After 6 months of services, the average cost savings per youth was \$808.32. After 18 months, the cost savings was \$1,259.91 per youth.

Youth Are Demonstrating Improved Emotional Health



Youth improved their level of emotional well-being after participating in systems of care. During the first 6 months after entering services, 35% of youth improved in behavioral and emotional health. This progress was sustained at 18 months, when 48% of youth showed improvement in behavioral and emotional health.

Youth reported significantly lower levels of depression and anxiety after receiving system of care services. Six months after beginning system of care services, 15% of youth reported being less depressed, and 22% reported being less depressed at 18 months. Six months after entering services, 17% of youth reported being less anxious, and 29% reported being less anxious at 18 months.



thirds after 18 months (to approximately 4%). The percentage of youth who were reported to have talked about suicide decreased by one third in these 6 months (nearly 33% to 22%) and continued to drop by more than one half (nearly 33% to 14%) in the 18 months after beginning system of care services.

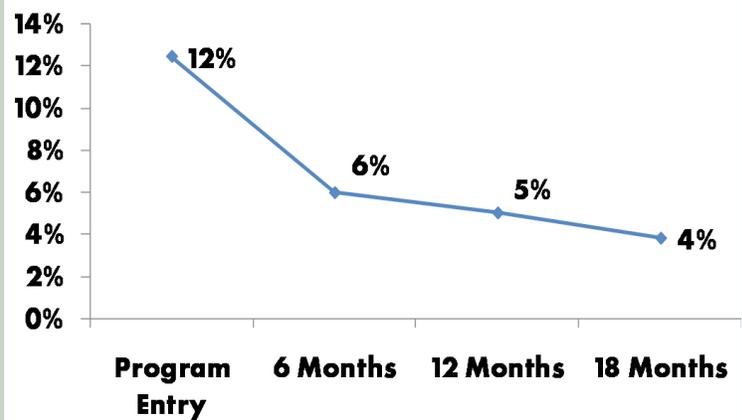
Youth Showed Improved Behavioral and Emotional Health

- Behavioral and emotional problems decreased
- Youth involvement with juvenile justice decreased
- Youth became less depressed and less anxious
- Suicide attempts and ideation decreased

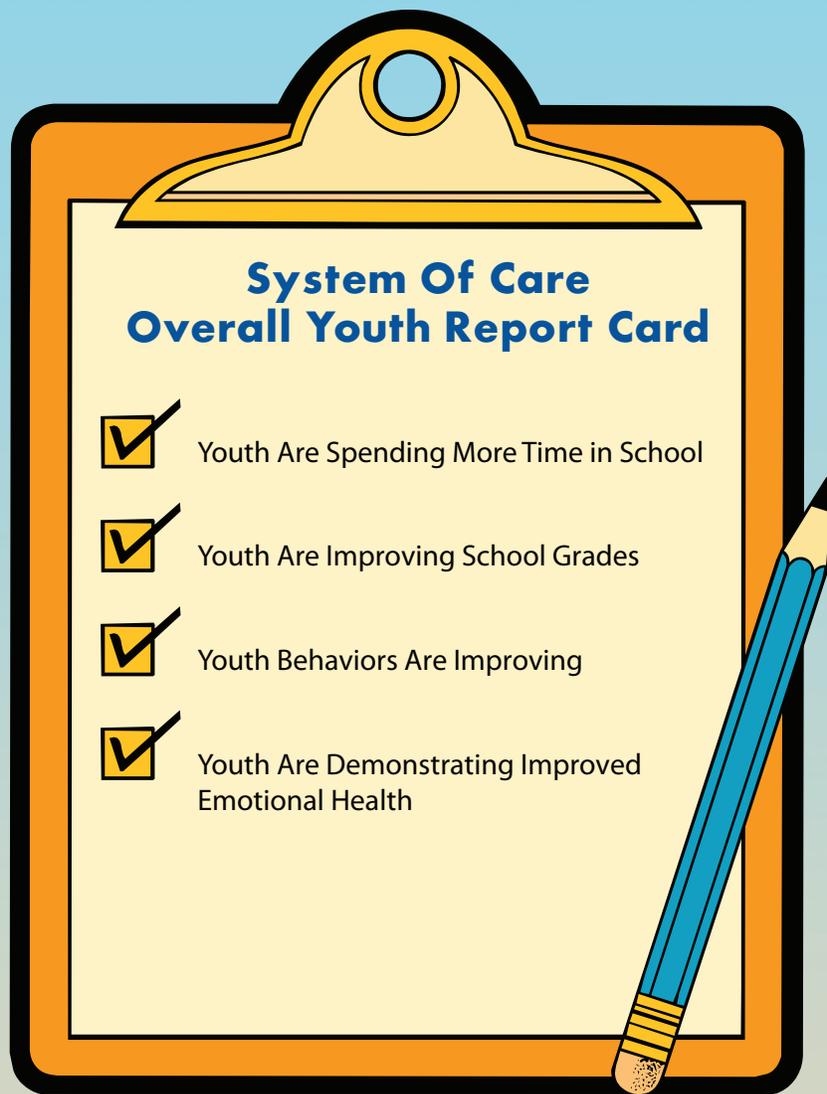


Suicide is a leading cause of death among U.S. youth 15 to 24 years old.⁴ Youth suicide attempts were reduced by more than half within 6 months after entering systems of care (from 12% to 6%), and were further reduced by more than two

Fewer Suicide Attempts



^b Examples of delinquent behaviors include being truant from school, running away, driving under the influence of alcohol or other substances, etc.



References

¹ Friedman, R. M., Katz-Leavy, J. W., Manderscheid, R. W., & Sondheimer, D. L. (1999). Prevalence of serious emotional disturbance: An update. In R. W. Manderscheid & M. J. Henderson (Eds.), *Mental health, United States, 1998* (pp. 110–112). Rockville, MD: U.S. Department of Health and Human Services.

² U. S. Department of Health and Human Services. (1999). *Mental health: A report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health.

³ Farmer, E. M. Z., Mustillo, S. A., Burns, B. J., & Costello, E. J. (2005). The epidemiology of mental health problems and service use in youth. In M. H. Epstein, K. Kutash, & A. J. Duchnowski (Eds.), *Outcomes for children and youth with emotional and behavioral disorders and their families* (pp. 23–44). Austin, TX: PRO-ED.

⁴ Suicide Prevention Action Network USA. (2007). About suicide & suicide prevention. Retrieved May 31, 2007, from http://www.spanusa.org/index.cfm?fuseaction=home.viewPage&page_id=8A13146B-E70F-213B-95A0CE83BC5518F6