

National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program

Data Profile Report

Systems of Hope, Harris County

Prepared by the National Evaluation Team • August 2007



Explanation of DPR

“The Data Profile Report (DPR) for Harris County Systems of Hope (HCSOH) is produced by the CMHS National Evaluation Team. The report is based on data collected by HCSOH project staff and members of the Evaluation Team from DePelchin Children’s Center as part of the evaluation of the Comprehensive Community Mental Health Services for Children and their Families Program. Data collection for the program is still ongoing; thus, results presented in this report do not represent final results and should not be interpreted as such. The DPR serves to provide a periodic update on the children and families served in the Systems of Hope. If there are any modifications of the original report produced by the National evaluation Team, we have indicated so in the report.”

-Jeanette Truxillo, DrPH
HCSOH Lead Evaluator

This report is based on data provided by caregivers and youth on the instruments listed below:

Caregiver	Youth (11 years and older)
<ul style="list-style-type: none"> • Enrollment and Demographic Information Form (EDIF) • Caregiver Information Questionnaire (CIQ) 	<ul style="list-style-type: none"> • Youth Information Questionnaire (YIQ)
<ul style="list-style-type: none"> • Living Situations Questionnaire (LSQ) 	
<ul style="list-style-type: none"> • Child Behavior Checklist 1.5-5 (CBCL 1.5–5) • Child Behavior Checklist 6-18 (CBCL 6–18) 	<ul style="list-style-type: none"> • Revised Children’s Manifest Anxiety Scale (RCMAS) • Reynold’s Adolescent Depression Scale (RADS–2)
<ul style="list-style-type: none"> • Columbia Impairment Scale (CIS) • Education Questionnaire–Revised (EQ–R) 	<ul style="list-style-type: none"> • Substance Use Survey–Revised (SUS-R) • GAIN Quick–R: Substance Problem Scale (GAIN) • Delinquency Survey–Revised (DS–R)
<ul style="list-style-type: none"> • Behavioral and Emotional Rating Scale (BERS–2C) 	<ul style="list-style-type: none"> • Behavioral and Emotional Rating Scale (BERS–2Y)
<ul style="list-style-type: none"> • Family Life Questionnaire (FLQ) • Caregiver Strain Questionnaire (CGSQ) 	
<ul style="list-style-type: none"> • Multi-Sector Service Contacts (MSSC–R) • Cultural Competence and Service Provision Questionnaire (CCSP) • Youth Services Survey for Families (YSS-F) 	<ul style="list-style-type: none"> • Youth Services Survey (YSS)

Number Table

	BERS2C	BERS2Y	CBCLO	CBCLY	CCSP	CGSQ	CIQ	CIS	DSR	EDIF ^a	EQR	FLQ	GAIN	LSQ	MSSCR	RADS	RCMAS	SUSR	VS1	VS2	VS3	YIQ	YSSF	YSSY
Intake	30	26	30	0		30	30	30	26	39	30	30	26	30		26	26	26	0	0	9	26		

^a Since the CIUF is the follow up version of the EDIF, it is reported under the EDIF heading.

Data Explanations

- The number of cases reported in each slide varies depending on the data available. When a summary statistic is based on fewer than 10 cases, that statistic is not reported. When all summary statistics on a slide are based on fewer than 10 cases, the entire slide is not included.

Section I: Child and Family Status at Intake

This section provides a detailed description of the children and families being served by CMHS-funded systems of care. Information in this section was collected at intake using the following instruments:

Enrollment and Demographic Information Form (EDIF): The EDIF gathers demographic, diagnostic, and system of care enrollment information on all children receiving CMHS-funded system of care services. Information for the EDIF is gathered from record review and caregiver report.

Caregiver Information Questionnaire–Intake (CIQ–I): The CIQ–I is administered to caregivers and gathers additional demographic information, as well as information on risk factors, family composition, custody status, service use history, and presenting problem(s) for children enrolled in the Longitudinal Child and Family Outcomes Study.

Youth Information Questionnaire–Intake (YIQ–I): The YIQ–I is a youth version of the CIQ–I. It is administered to youth age 11 years and older who are enrolled in the Longitudinal Child and Family Outcomes Study.

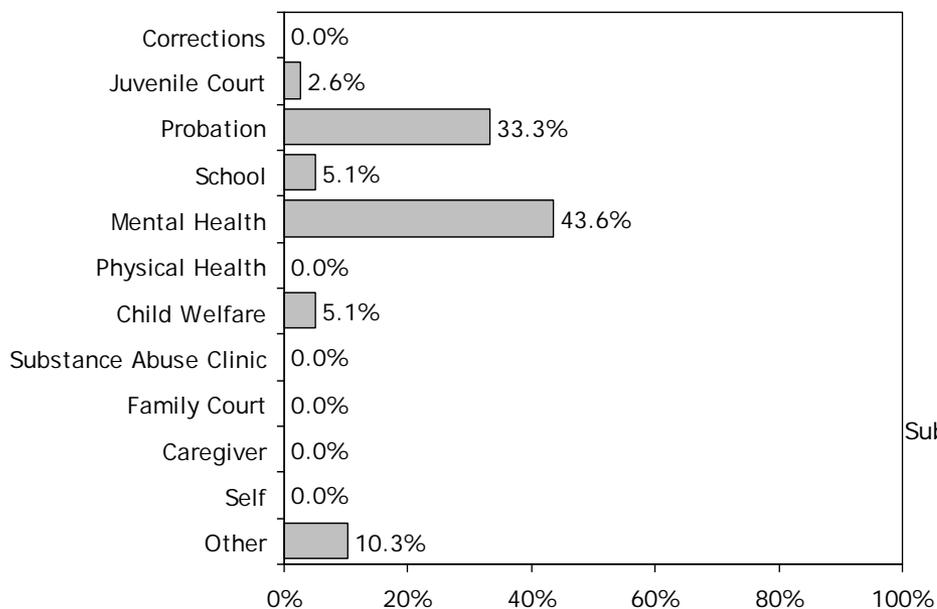
Demographic Characteristics of Children Served^a

Demographics	
Gender (<i>n</i> = 39)	
Male	71.8%
Female	28.2%
Average Age at Intake (<i>n</i> = 39)	
Average Age	12.1 years
Age Group (<i>n</i> = 39)	
Birth to 3 years	0.0%
4 to 6 years	5.1%
7 to 11 years	25.6%
12 to 14 years	61.5%
15 to 18 years	7.7%
19 to 21 years	0.0%
Race/Ethnicity (<i>n</i> = 39)	
American Indian or Alaska Native	0.0%
Asian	0.0%
Black or African-American	41.0%
Native Hawaiian or Other Pacific Islander	0.0%
White	12.8%
Hispanic/Latino	43.6%
Multi-racial	2.6%
Other	0.0%

^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

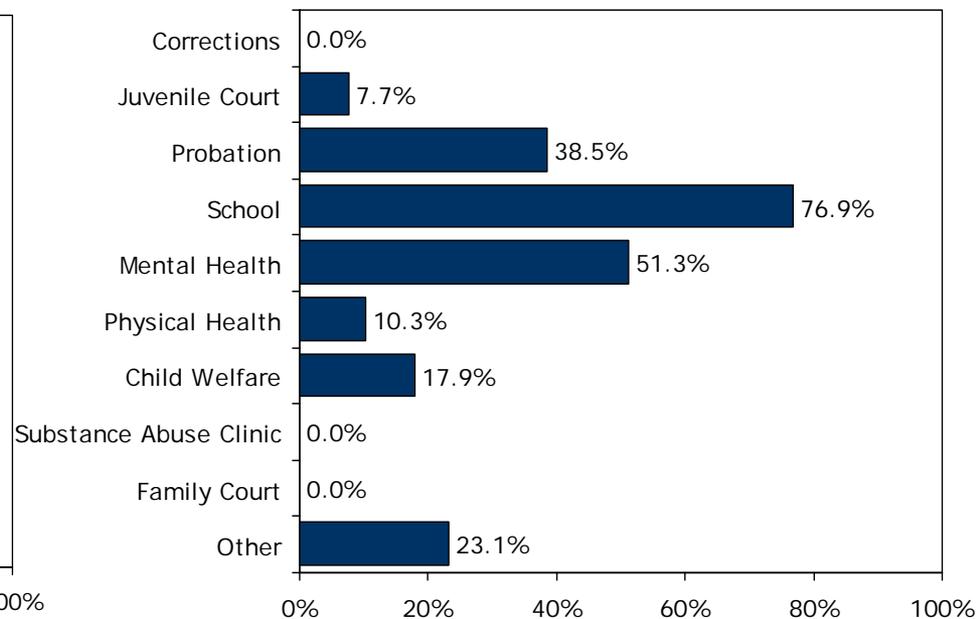
Intake Referral Information and Agency Involvement^a

Referral Agency^b



n = 39

Agency Involvement^{b,c}



n = 39

^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

^b Mental Health = Mental health agency, clinic or provider; Physical health = Physical Health care agency, clinic, or provider; Child Welfare = Child welfare agency or child protective services.

^c Because individuals may report involvement in more than one agency, percentages may sum to more than 100%.

DSM-IV Axis I and Axis II Diagnoses^a

Diagnosis ^b (n = 39)	%
Mood Disorders	59.0%
Attention-Deficit / Hyperactivity Disorders	51.3%
Oppositional Defiant Disorder	20.5%
Adjustment Disorders	15.4%
Other	2.6%
V Code ^c	10.3%
Posttraumatic Stress Disorder and Acute Stress Disorder	15.4%
Anxiety Disorders	5.1%
Substance Use Disorders ^d	15.4%
Disruptive Behavior Disorder	12.8%
Conduct Disorders	12.8%
Learning, Motor Skills, and Communication Disorders	12.8%
Mental Retardation	0.0%
Impulse Control Disorders	2.6%
Schizophrenia and Other Psychotic Disorders	7.7%
Pervasive Developmental Disorders	0.0%
Personality Disorders	2.6%
Substance Induced Disorders	0.0%

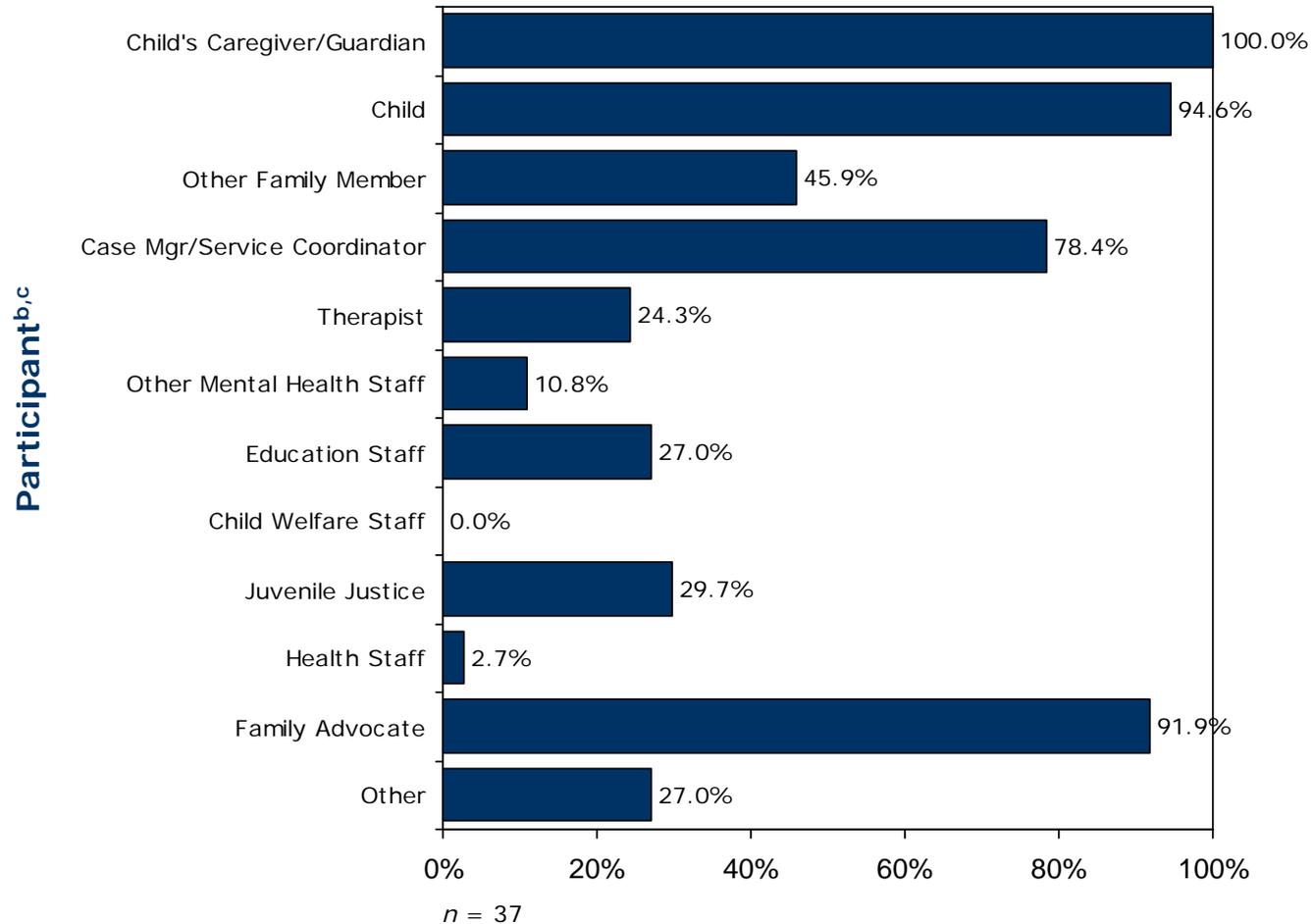
^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

^b Because youth may have more than one diagnosis, percentages may sum to more than 100%.

^c V Code refers to Relational Problems, Problems Related to Abuse or Neglect, and additional conditions. Percentage excludes V71.09 (no Axis I or II diagnosis).

^d Substance Use Disorders include caffeine intoxication.

Participation in Development of Service Plan^a

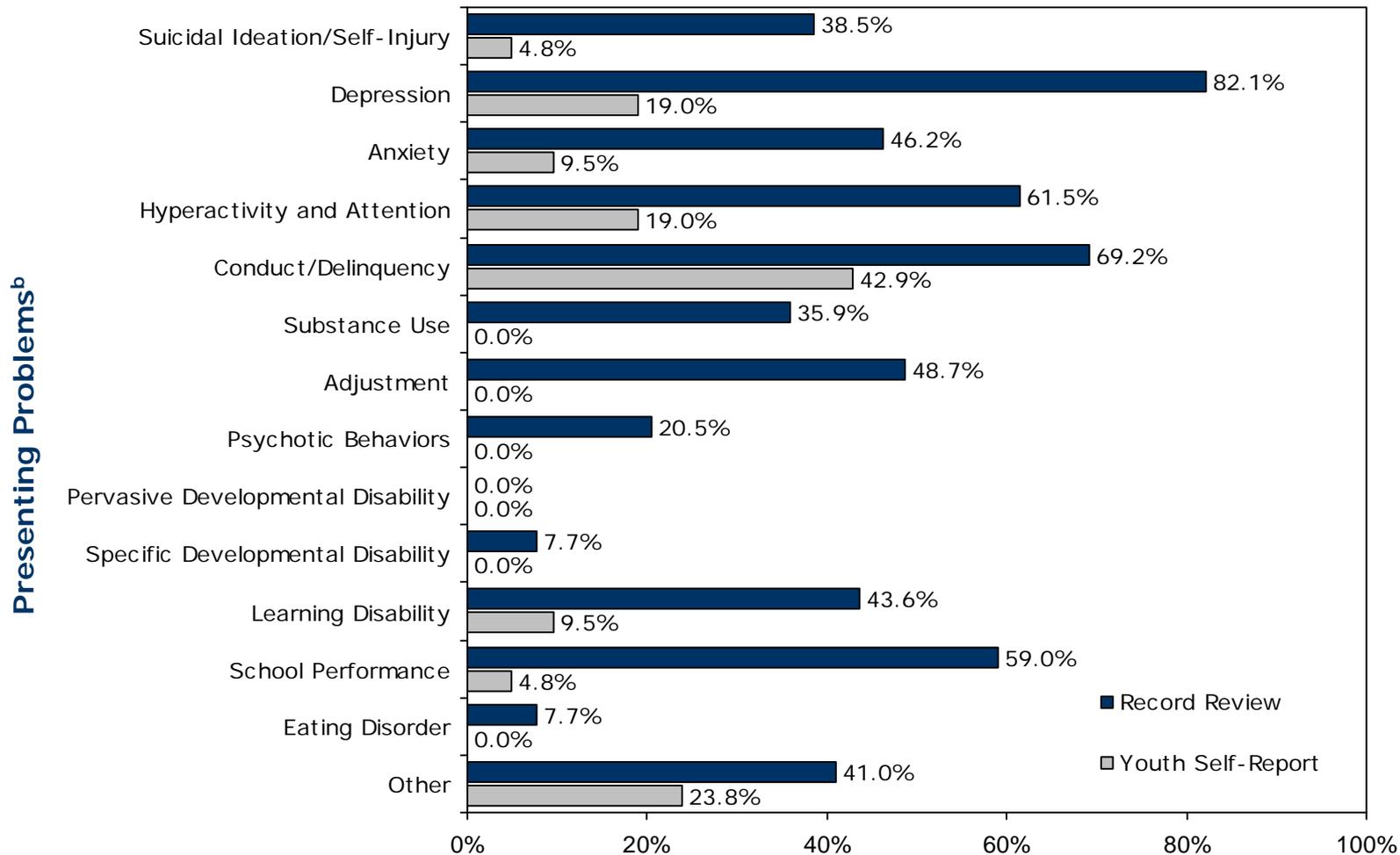


^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

^b Because more than one participant may be involved in the development of a particular service plan, percentages may sum to more than 100%.

^c Other includes School Resource Officer, Teacher, Psychiatrist, Youth Advocate, Foster Home Staff, Americorp Worker, School Principal, and Big Brother.

Presenting Problems^a Reported

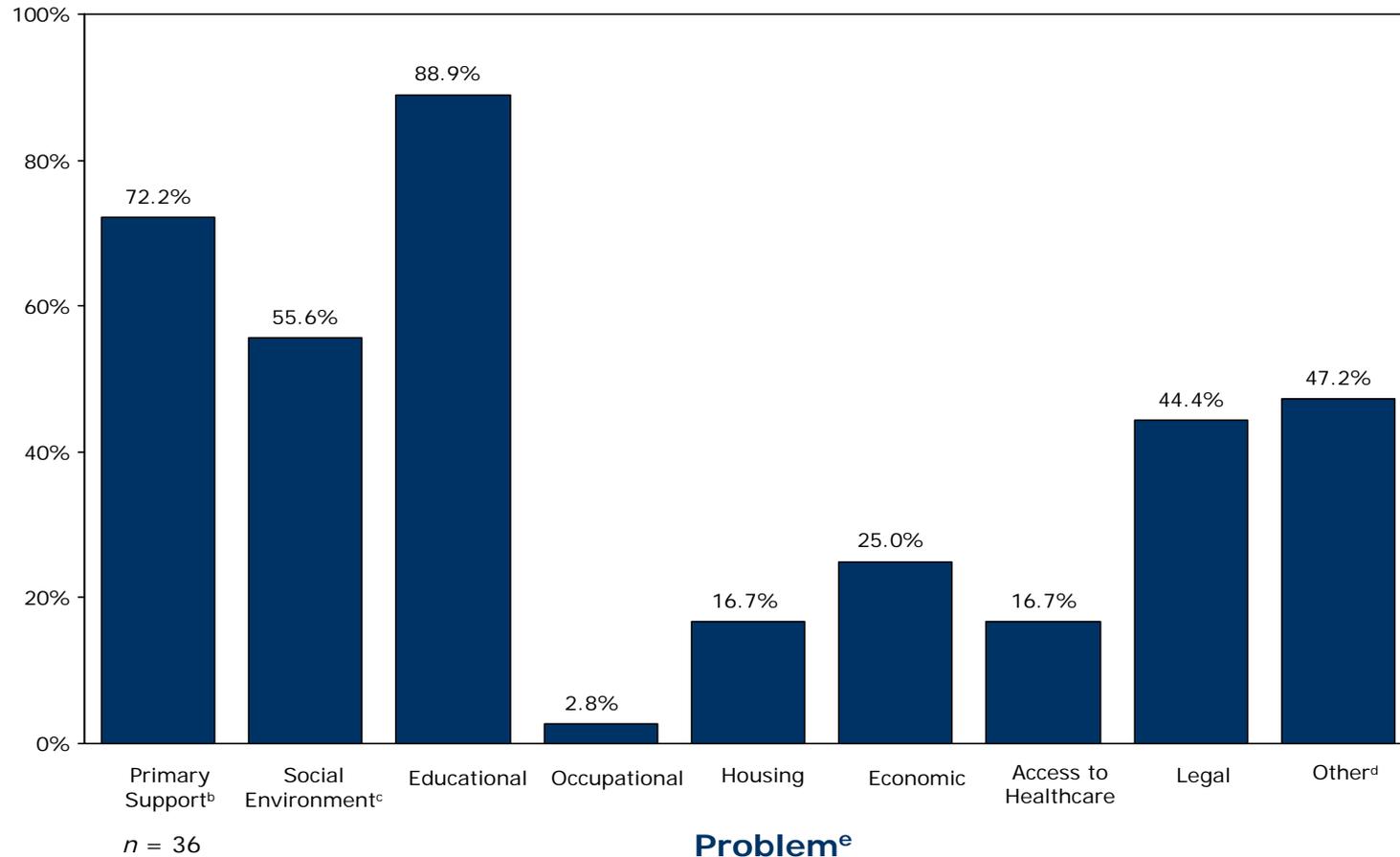


n (records reviewed) = 39
 number of youth = 21

^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF) and the Youth Information Questionnaire (YIQ).

^b Because youth may present with more than one problem, percentages may sum to more than 100%.

DSM Axis-IV: Psychosocial and Environmental Problems^a at Intake



^a Data reported were collected using the Enrollment and Demographic Information Form (EDIF).

^b Primary support problems include health problems in family, removal from the home, remarriage or divorce of parent, and child abuse or neglect.

^c Social environment problems include inadequate social support, death or loss of a friend, and adjustments to life-cycle transitions.

^d Other problems include discord with non-family caregivers, unavailability of social service agencies, and exposure to disasters.

^e Because youth may experience more than one psychosocial or environmental problem, percentages may sum to more than 100%.

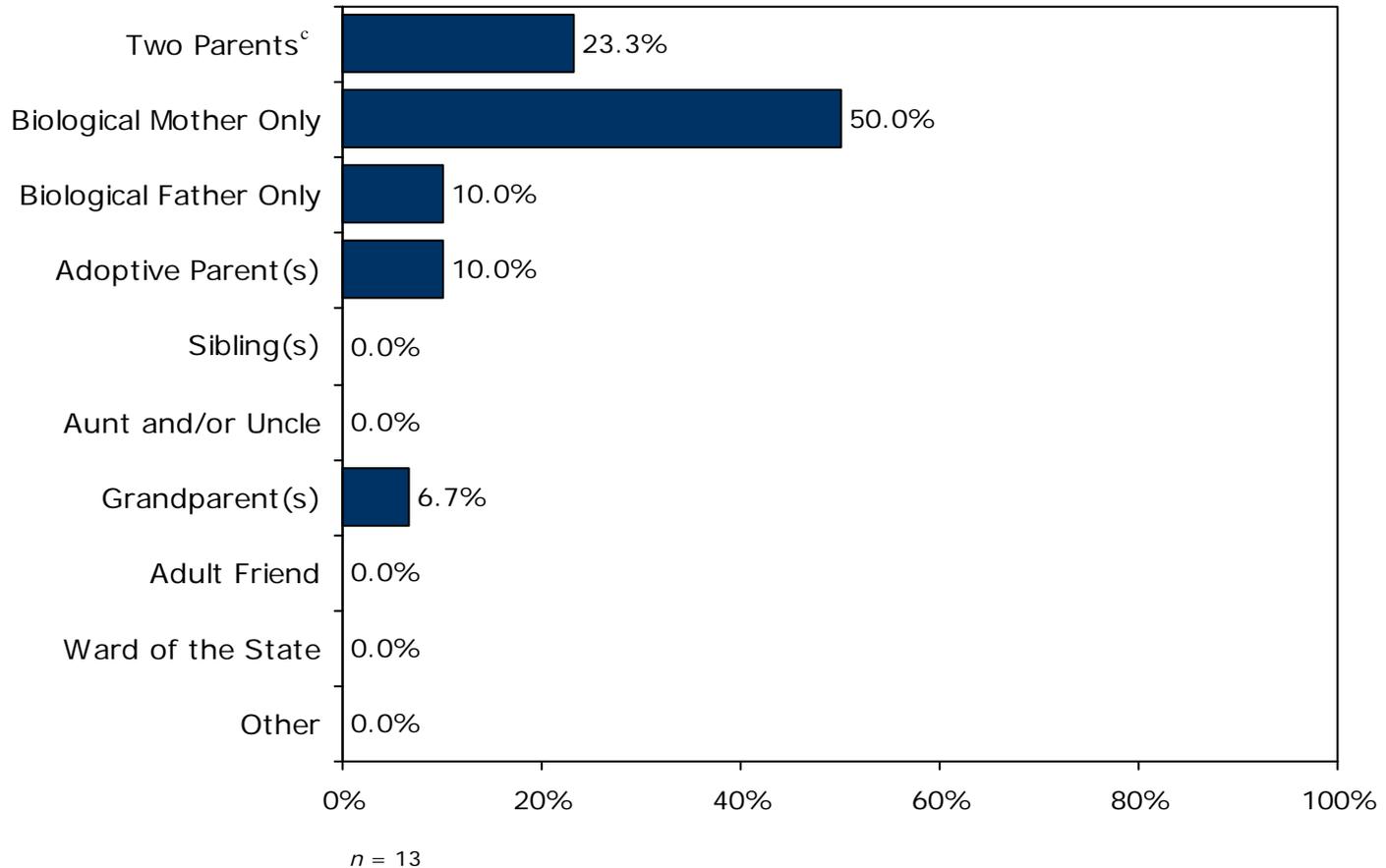
Family and Child History^a

- ❖ 75.9% of caregivers reported a family history of depression ($n = 29$).
- ❖ 55.2% reported a family history of mental illness, other than depression ($n = 29$).
- ❖ 53.6% reported a family history of substance abuse ($n = 28$).

Has the child ever . . .	
Been physically abused? ($n = 30$)	20.0%
Been sexually abused? ($n = 26$)	11.5%
Run away? ($n = 30$)	40.0%
Had substance abuse problems? ($n = 30$)	26.7%
Attempted suicide? ($n = 30$)	13.3%
Witnessed domestic violence? ($n = 30$)	43.3%
Lived with someone who was depressed? ($n = 30$)	73.3%
Lived with someone who had a mental illness (other than depression)? ($n = 29$)	37.9%
Lived with someone who was convicted of a crime? ($n = 30$)	36.7%
Lived with someone who had a substance abuse problem? ($n = 29$)	44.8%

^a Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I).

Custody Status^{a,b} at Intake



^a Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I).

^b Custody Status refers to legal custody. This may not reflect living arrangement, which is collected on the Living Situations Questionnaire (LSQ).

^c Includes two biological parents, or one biological parent and a step or adoptive parent.

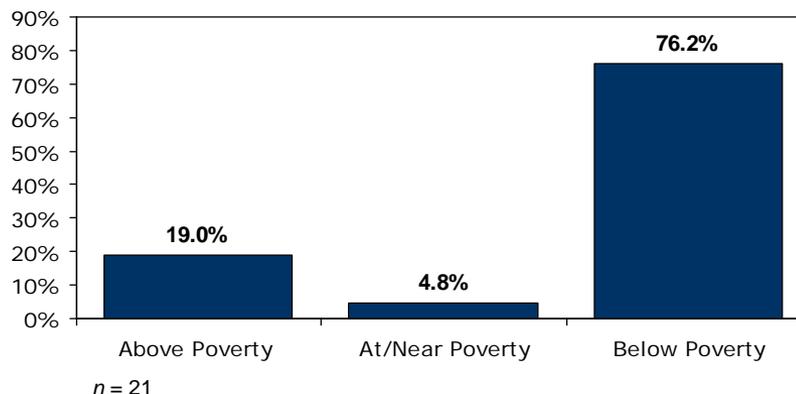
Economic and Employment Status^a at Intake

Family/Household Annual Income

Family Income ^b (n = 30)	
Less Than \$5,000	20.0%
\$5,000 – \$9,999	10.0%
\$10,000 – \$14,999	16.7%
\$15,000 – \$19,999	16.7%
\$20,000 – \$24,999	13.3%
\$25,000 – \$34,999	6.7%
\$35,000 – \$49,999	10.0%
\$50,000 – \$74,999	3.3%
\$75,000 – \$99,999	3.3%
\$100,000 and over	0.0%

Poverty Level

Poverty categories are based on the U.S. Department of Health and Human Services poverty guidelines. Federal poverty guidelines are only available for the 50 states. The categories take into account calendar year, state, family income, and household size. For example, according to these guidelines, in 2007 a family of four residing in the contiguous 48 States was living in poverty if its annual income was below \$20,650.



Employment History

Caregiver Employed in the Past 6 Months ^c (n = 28)	53.6%
Average Months of Employment in the Past 6 Months (n = 15)	5.6
Average Hours Worked Per Week in the Past 6 Months (n = 15)	38.0

^a Data reported were collected using the Caregiver Information Questionnaire-Intake (CIQ-I).

^b Family income is reported from the family with whom the child has lived with the most in the 6 months prior to data collection.

^c Only caregivers who reported being employed in the past 6 months were asked the average number of months and hours per week worked.

Section II: Living Situation

This section provides information on children's living situations. Information in this section was taken from the **Living Situations Questionnaire (LSQ)**.

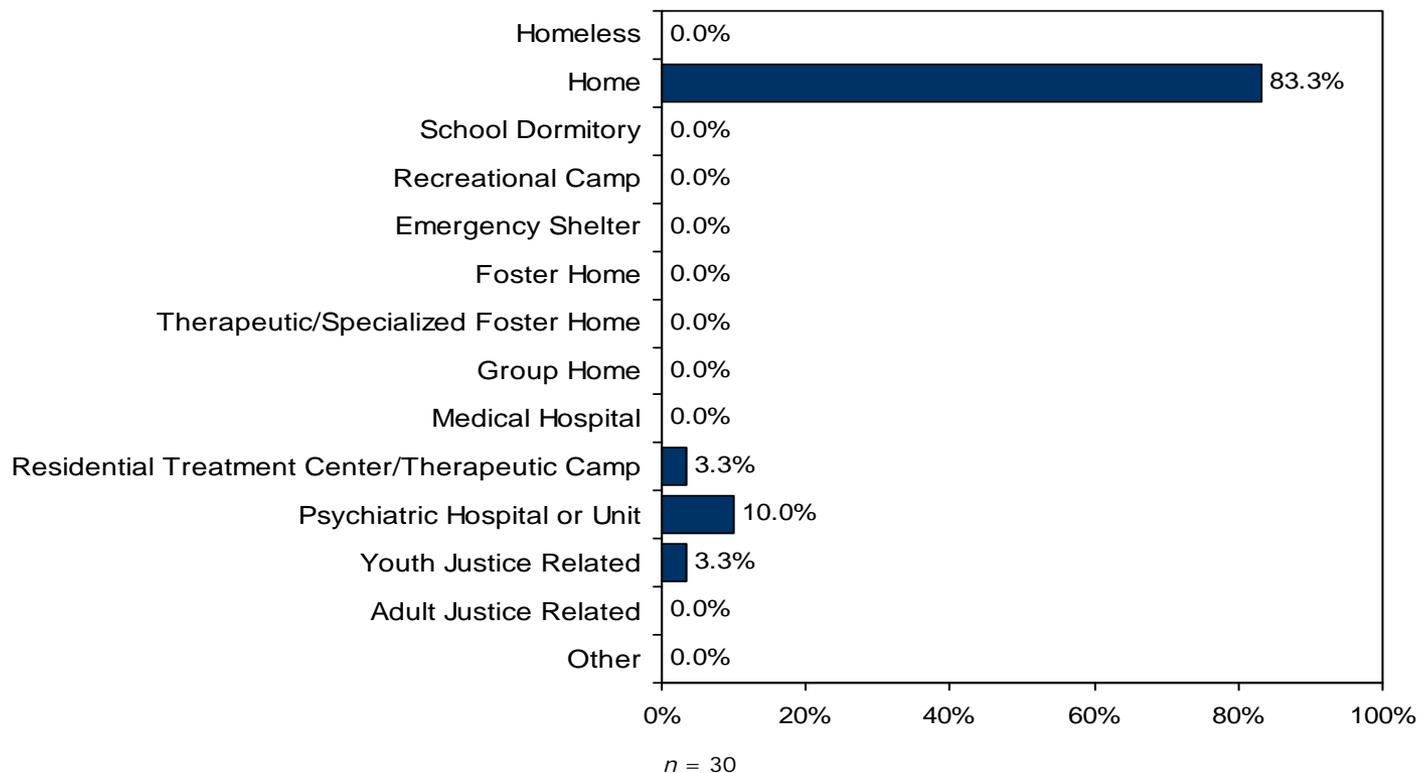
The LSQ is administered to caregivers and gathers information on where the child was living in the past 6 months, with whom the child was living, and the number of days spent in each living situation.

Living Situations^a at Intake

Child Lives With^{b...}

	Biological Family ^c	Adoptive Family ^d	Non-Parent Relative ^e	Non-Relative ^f	Independent Living ^g
(n = 30)	70.0%	10.0%	13.3%	16.7%	0.0%

Type of Living Situation



^a Data reported were collected using the Living Situations Questionnaire (LSQ). The LSQ reflects living situations during the 6 months prior to data collection.

^b Since a child may be living with more than one individual at intake, percentages may sum to more than 100%.

^c Includes both biological parents or one biological parent with or without a partner.

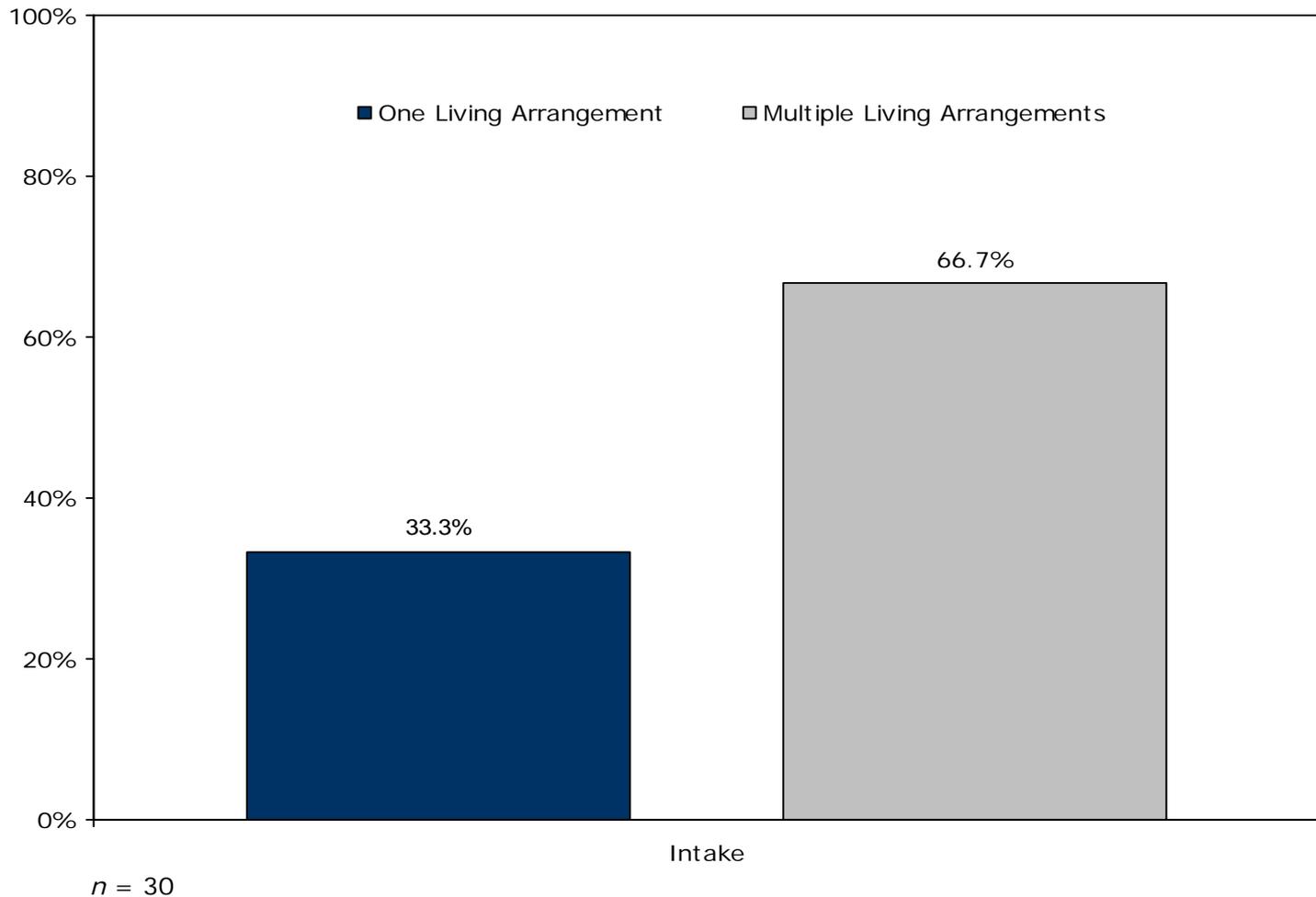
^d Includes two adoptive parents or one adoptive parent with or without a partner.

^e Includes two grandparents, one grandparent with or with a partner, or other relative with or without a partner.

^f Includes one or more foster parents, staff, or other care-giving adult.

^g Includes living alone, with a friend, or within a supervised living situation.

Stability of Children's Living Arrangements^a at Intake



^a Data reported were collected using the Living Situations Questionnaire (LSQ). Stability in children's living arrangements reflect stability during the 6 months prior to each data collection.

Section III: Education

This section provides information on children's education status and experiences in school. Information in this section was taken from the **Education Questionnaire Revised (EQ-R)**.

The EQ-R is administered to caregivers. It gathers information on school attendance, grade level, academic performance, school settings, Individual Education Plans, extracurricular activities, and disciplinary actions for children and youth enrolled in the Longitudinal Child and Family Outcomes Study. The questions address all levels of schooling from pre-kindergarten to postsecondary institutions, such as colleges and vocational/trade schools.

School Attendance and Performance^a at Intake

❖ 100.0% of children are attending school (n= 30).

Percent of Children Attending School	
Average Number of Absences (Excused and Unexcused) in the Past 6 Months (n = 28)	
Perfect Attendance (0 Absences)	10.7%
Less Than 1 Day Per Month	21.4%
About 1 Day a Month	21.4%
About 1 Day Every 2 Weeks	10.7%
About 1 Day a Week	10.7%
2 Days Per Week	17.9%
3 or More Days Per Week	7.1%
School Performance in the 6 Months Prior to Intake (n = 29)	
Grade Average "A"	0.0%
Grade Average "B"	24.1%
Grade Average "C"	34.5%
Grade Average "D"	17.2%
Failing About Half or More Classes	24.1%
School Does Not Grade the Children	0.0%
Other	0.0%

^a Data reported were collected using the Education Questionnaire-Revised (EQ-R).

Educational Placements and Individualized Educational Plans^a in the 6 Months Prior to Intake

Educational Placements in the 6 Months Prior to Intake^b (<i>n</i> = 30)	
Regular Public Day School	83.3%
Regular Private Day/Boarding School	0.0%
Home Schooling ^c	6.7%
Alternative/Special Day School	36.7%
School in 24-hour Restrictive Setting ^d	36.7%
Postsecondary School	0.0%
Other	0.0%
Had an Individualized Education Plan (IEP) in the Past 6 Months (<i>n</i> = 28)	
Individualized Education Plan	60.7%
Reasons for IEP^e (<i>n</i> = 17)	
Behavioral/Emotional Problems	76.5%
Learning Disability	47.1%
Developmental Disability or Mental Retardation	0.0%
Vision or Hearing Impairment	0.0%
Speech Impairment	17.6%
Physical Disability	0.0%
Other	5.9%

^a Data reported were collected using the Education Questionnaire-Revised (EQ-R).

^b Because individuals may have more than one educational placement, percentages may sum to more than 100%.

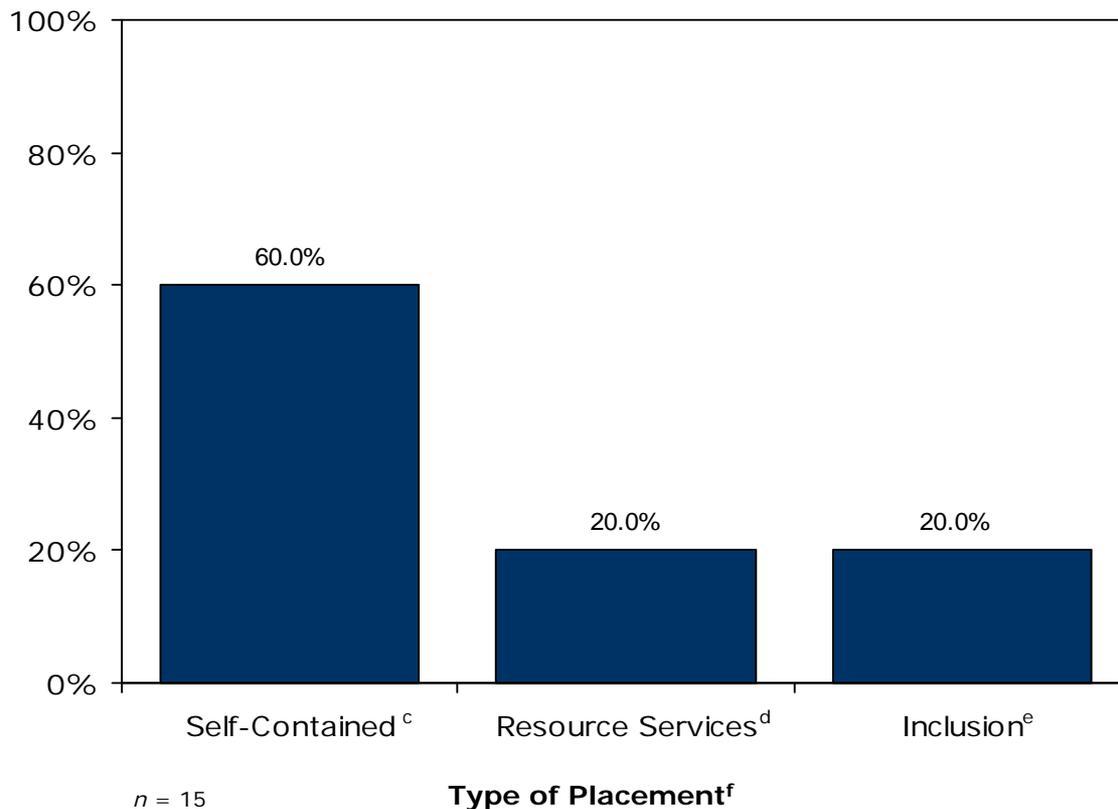
^c Includes home-based instruction and combination of home schooling and home-based instruction.

^d Includes hospital, juvenile justice facility, residential treatment center, group home, and group shelter.

^e Because individuals may have more than one reason for an IEP, percentages may sum to more than 100%.

Special Education Placements^a in the 6 Months Prior to Intake

❖ Caregiver report indicated that 62.1% of 29 children took special education classes.^b



^a Data reported were collected using the Education Questionnaire-Revised (EQ-R).

^b This includes children who took special education classes in which either all children or only some children in the class were receiving special education, and children who received any other kind of special education.

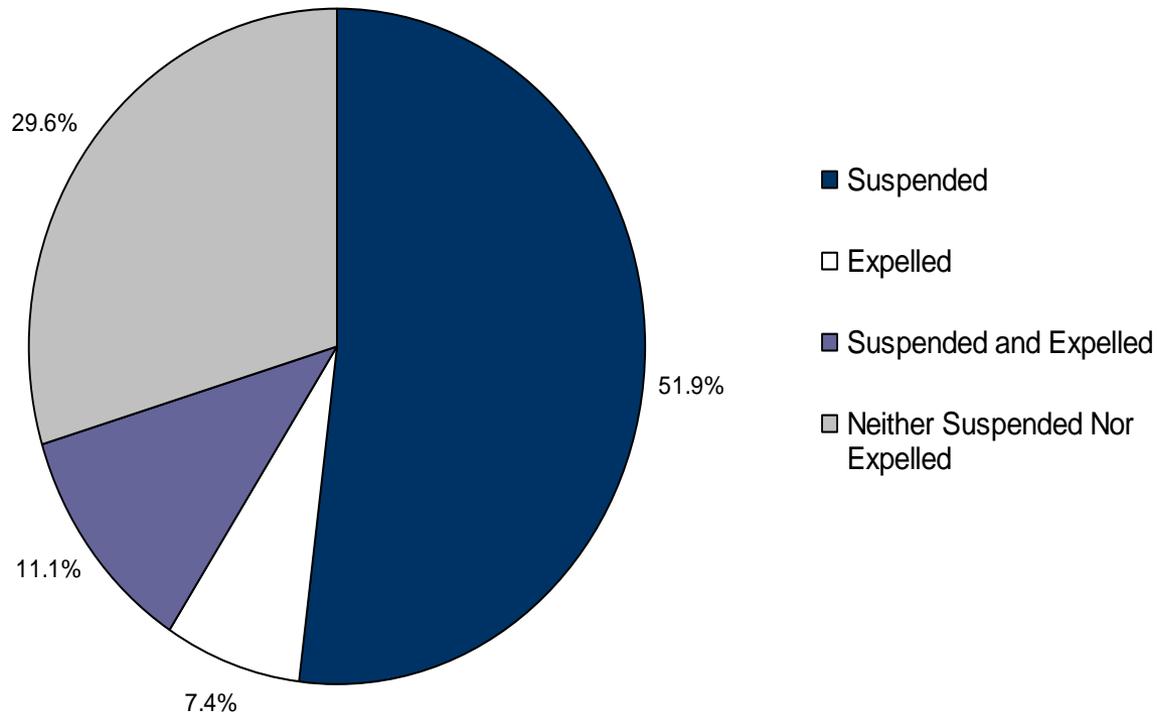
^c Self-Contained refers to special education classes in which all the children in the class are receiving special education for all or most of the day.

^d Resource Services refers to special education classes in which all the children leave their general education class to receive special education instruction, in specific subjects, for a portion of the day.

^e Inclusion refers to special education provided in the general education class, in which some children receive special education and others do not.

^f Because children may have received more than one type of placement over the past 6 months, percentages may sum to more than 100%.

School Disciplinary Actions^a in the 6 Months Prior to Intake



Disciplinary Actions in the Past 6 Months

n = 27

^a Data reported were collected using the Education Questionnaire-Revised (EQ-R).

Section IV: Juvenile Justice Involvement

This section provides information youths' contacts with the criminal justice system. Information in this section was taken from the **Delinquency Survey–Revised (DS–R)**.

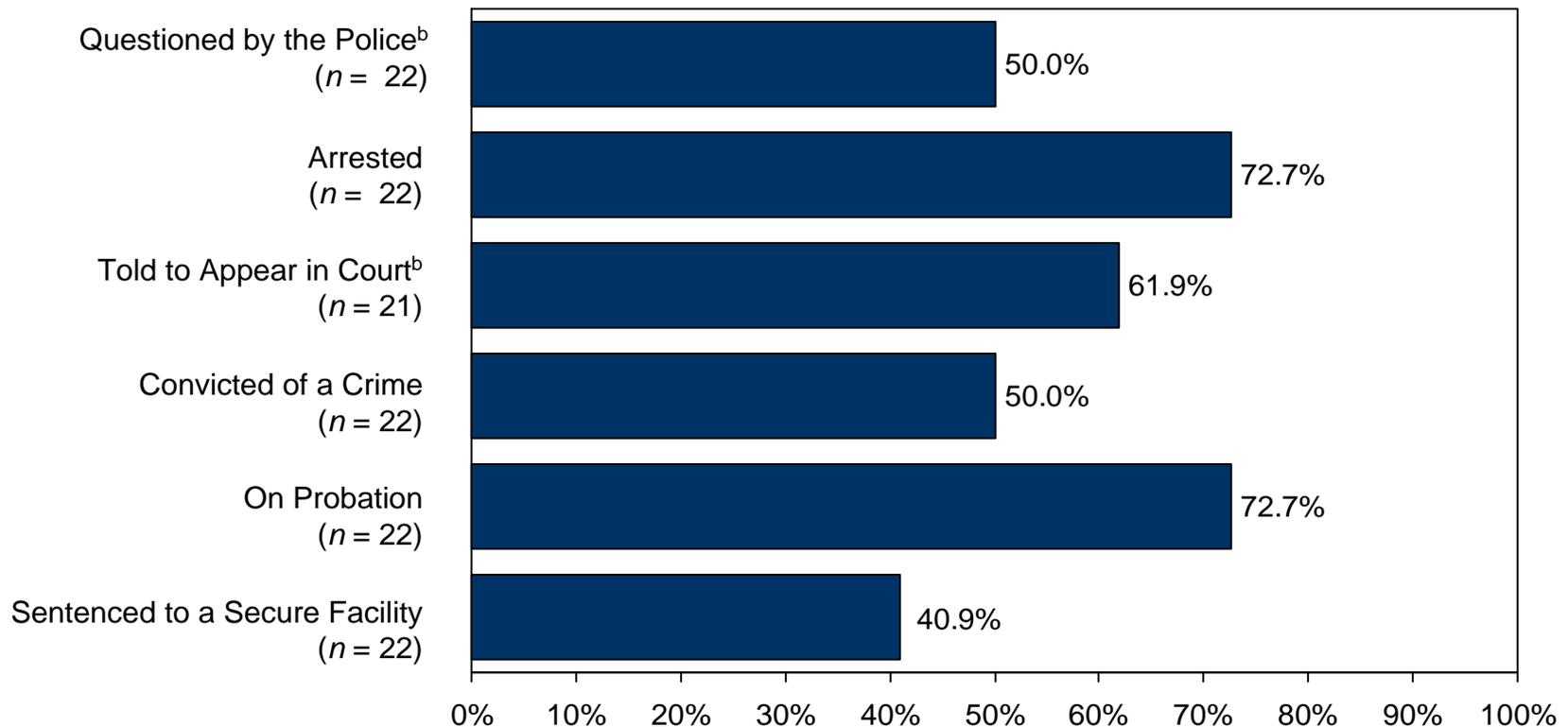
The DS–R gathers information on the types of illegal, violent, or delinquent activities youth have engaged in and the frequency of these acts, as well as information on law enforcement contacts and the results of those contacts. The DS-R is administered to youth 11 years and older who are enrolled in the Longitudinal Child and Family Outcomes Study.

Since only youth who are 11 years or older complete the DS-R, the number of participants who responded to each item may be noticeably less than in previous slides.

Criminal Justice History^a at Intake

❖ 86.4% of youth reported some type of criminal justice contact prior to intake ($n = 22$).

➤ Have you **ever** been . . . ?



^a Data reported were collected using the Delinquency Survey-Revised (DS-R).

^b Because you were suspected of committing a crime.

Delinquent Behavior^a in the 6 Months Prior to Intake

- ❖ 90.9% of youth reported engaging in some type of delinquent or illegal behavior in the 6 months prior to intake ($n = 22$).

➤ In the past 6 months, how many times have you . . .

Violent Crimes	No Times	1 Time	2 or More Times
Been a bully or threatened other people without use of a weapon? ($n = 22$)	59.1%	18.2%	22.7%
Taken a purse, money, or other things from someone by force or threat? ($n = 22$)	100.0%	0.0%	0.0%
Been physically cruel to animals? ($n = 22$)	86.4%	9.1%	4.5%
Hit someone or got into a physical fight? ($n = 22$)	18.2%	22.7%	59.1%
Hurt someone badly enough they needed bandages or a doctor? ($n = 22$)	72.7%	13.6%	13.6%
Threatened someone with a weapon or used a weapon in a fight? ($n = 22$)	72.7%	18.2%	9.1%
Forced someone to have sex with you when they did not want to? ($n = 22$)	100.0%	0.0%	0.0%

^a Data reported were collected using the Delinquency Survey-Revised (DS-R).

Delinquent Behavior^a in the 6 Months Prior to Intake (continued)

➤ In the past 6 months, how many times have you . . .

Property Crimes	No Times	1 Time	2 or More Times
Taken something from a store without paying for it? (<i>n</i> = 22)	59.1%	18.2%	22.7%
Bought, received, possessed, or sold any stolen goods? (<i>n</i> = 22)	77.3%	9.1%	13.6%
Broken into a house or building to steal something or just to look around? (<i>n</i> = 22)	68.2%	27.3%	4.5%
Taken a car, truck, or motorcycle that didn't belong to you? (<i>n</i> = 22)	86.4%	9.1%	4.5%
Intentionally set a building, car, or other property on fire? (<i>n</i> = 22)	81.8%	18.2%	0.0%

^a Data reported were collected using the Delinquency Survey-Revised (DS-R).

Delinquent Behavior^a in the 6 Months Prior to Intake (continued)

➤ In the past 6 months, how many times have you . . .

Other Behaviors	No Times	1 Time	2 or More Times
Been in trouble with the police for skipping school? (<i>n</i> = 22)	45.5%	36.4%	18.2%
Been in trouble with the police for running away? (<i>n</i> = 22)	68.2%	13.6%	18.2%
Received a ticket or citation for a traffic violation? (<i>n</i> = 22)	100.0%	0.0%	0.0%
Driven a car or motorcycle while under the influence of alcohol or illegal drugs? (<i>n</i> = 22)	95.5%	4.5%	0.0%

^a Data reported were collected using the Delinquency Survey-Revised (DS-R).

Section V: Substance Use

This section provides information on the types of substances used by youth and the frequency with which these substances are used. Information in this section was taken from the instruments listed below, which are administered to youth 11 years and older who are enrolled in the Longitudinal Child and Family Outcomes Study. Since only youth who are 11 years or older complete these instruments, the number of participants who responded to each item may be noticeably less than in previous slides.

GAIN Quick–R: Substance Problem Scale (GAIN): Substance use, abuse, and dependency are measured by the GAIN. Results from three GAIN scales are reported: the Substance Use and Abuse Scale–9 (SUAS–9), the Substance Dependence Scale–7 (SDS–7), and the Substance Problem Scale (SPS). Scores on the SUAS–9 range from 0 to 9. Higher scores indicate a greater problem with substance use and abuse. Scores on the SDS–7 range from 0 to 7. Higher scores indicate a larger degree of substance dependency. Scores on the SPS are calculated by taking the sum of the SUAS–9 and SDS–7. The resulting scores range from 0 to 16, with higher scores indicating more problems with substance use, abuse, and dependency. Finally, for all three GAIN scales, the urgency of the problem can be determined by calculating the percentage of items endorsed on each scale. 0% to 24% indicates no or minimal urgency, 25% to 74% indicates moderate urgency, and 75% to 100% indicates high urgency.

Substance Use Survey–Revised (SUS–R): The SUS–R gathers information on youth’s use of alcohol, tobacco, and other drugs (illegal, prescription, and over-the-counter). In addition to the types of substances used, information such as age of first use and frequency of use over the past 30 days is captured.

Substance Use^a Prior to Intake

❖ 77.3% of youth reported using at least one substance prior to the intake interview ($n = 22$).

Substance ^b	Ever Used	Average Age of First Use
Alcohol	50.0% ($n = 22$)	10.8 ($n = 11$)
Cigarettes	54.5% ($n = 22$)	10.4 ($n = 12$)
Chewing Tobacco/Snuff	13.6% ($n = 22$)	
Marijuana/Hashish	59.1% ($n = 22$)	11.7 ($n = 13$)
Cocaine (all forms)	4.5% ($n = 22$)	
Hallucinogenics (e.g., LSD, 'shrooms)	0.0% ($n = 22$)	
PCP	0.0% ($n = 22$)	
Ketamine (Special K)	0.0% ($n = 22$)	
MDMA (Ecstasy, X)	13.6% ($n = 22$)	
GHB	0.0% ($n = 22$)	
Inhalants	18.2% ($n = 22$)	
Heroin	0.0% ($n = 22$)	
Amphetamines/Stimulants	0.0% ($n = 22$)	
Pain Killers (e.g., Darvocet, Vicodin)	0.0% ($n = 22$)	
Ritalin, Adderall, Desoxyn	4.5% ($n = 22$)	
Tranquilizers (e.g., Valium, Xanax)	13.6% ($n = 22$)	
Barbituates/Sedatives (e.g., Seonol, Nembutal)	4.5% ($n = 22$)	
Non-Prescription/OTC (e.g., diet pills, No-Doz)	4.5% ($n = 22$)	

^a Information gathered from the Substance Use Survey-Revised (SUS-R).

^b Shaded areas indicate categories with fewer than 10 youth responses, data were not presented for these substances.

Section VI : Child Clinical Measures

This section provides clinical information on the children participating in the Longitudinal Child and Family Outcomes Study. Information on functional impairment, depression, and anxiety is presented, along with information on children's behavioral and emotional problems. Finally, measures of children's behavioral and emotions strengths are included in addition to measures of adaptive behaviors. Information in this section was taken from the following instruments:

Columbia Impairment Scale (CIS): The CIS, administered to caregivers, provides a global measure of impairment. CIS scores range from 0 to 52. Higher scores indicate a greater level of impairment. A score of 15 or higher is considered clinically impaired.

Revised Children's Manifest Anxiety Scale (RCMAS): The RCMAS, completed by youth, measures anxiety. The RCMAS is comprised of four subscales: Worry/Oversensitivity, Social Concerns/Concentration, Physiological Anxiety, and the Lie Scale. The Lie Scale measures inaccurate self-report. It may indicate that the child is "faking good", or that the child has an inflated view of him/herself. Scores for each subscale are converted to standardized scores (T-scores), and have varying ranges; minimum values range from 2 to 3 and maximum values range from 17 to 19. Higher scores indicate a greater level of anxiety. The RCMAS total anxiety T-score ranges from 18 to 92. Total T-scores greater than 60 indicate high levels of impairment.

Reynolds Adolescent Depression Scale–2nd Edition (RADS–2): The RADS–2, completed by youth, measures adolescent depression. RADS-2 is comprised of four subscales: Dysphoric Mood, Anhedonia/Negative Affect, Negative Self-evaluation, and Somatic Complaints. Scores are converted to standardized scores (T-scores), and have varying ranges; minimum scores range from 29 to 40 and maximum scores range from 76 to 90. Total T-scores of less than 61 represent normal range, 61 to 64 represent mild clinical depression range, 65 to 69 represent moderate clinical depression range, and greater than or equal to 70 represent severe clinical depression range.

Section VI: Child Clinical Measures (continued)

Child Behavioral Checklist (CBCL 1.5 - 5): The CBCL 1.5–5 is administered to caregivers and measures behavioral and emotional problems in children between the ages of 1.5 and 5. The CBCL 1.5–5 produces seven narrow-band syndrome scores; Emotionally Reactive, Anxious/Depressed, Somatic Complaints, Withdrawn, Sleep Problems, Attention Problems, and Aggressive Behavior; two broadband syndrome scores: Internalizing and Externalizing; and a Total Problem score. T-scores between 65 and 69 (93rd and 97th percentile) on the narrow-band syndrome scales are in the borderline clinical range. T-scores greater than 69 are in the clinical range. T-scores between 60 and 63 (83rd and 90th percentile) on Internalizing, Externalizing, and Total Problems are in the borderline clinical range. T-scores above 63 are in the clinical range.

Child Behavioral Checklist (CBCL 6-18): The CBCL 6–18 is administered to caregivers and measures behavioral and emotional problems in children between the ages of 6 and 18. The CBCL 6–18 produces eight narrow-band syndrome scores; Anxious/Depressed, Withdrawn/Depressed, Somatic Complaints, Social Problems, Thought Problems, Attention Problems, Rule-Breaking Behavior, and Aggressive Behavior; two broadband syndrome scores: Internalizing and Externalizing; and a Total Problem score. T-scores between 65 and 70 (93rd and 97th percentile) on the narrow-band syndrome scales are in the borderline clinical range. T-scores greater than 70 are in the clinical range. On the Internalizing, Externalizing, and Total Problems scales, T-scores between 60 and 63 (84th and 90th percentile) are in the borderline clinical range. T-scores above 63 are in the clinical range.

The CBCL is also comprised of three competency subscales, as well as a total competency scale. Higher scores on the competency scales indicate greater competence. The three competence subscales have a T-score range from 20 to 65, with scores under 30 in the clinical range (i.e., less competence) (2nd percentile), scores between 31 and 36 in the borderline clinical range, and scores over 36 below the clinical range (i.e., greater competence). The Total Competence scale has a T-score range from 10 to 80, with scores under 37 in the clinical range (i.e., less competence), scores between 37 and 40 in the borderline clinical range, and scores over 40 below the clinical range (i.e., greater competence).

Section VI: Child Clinical Measures (continued)

Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (BERS–2C):

The BERS–2C is administered to caregivers. It measures children’s emotional and behavioral strengths in six different areas: Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength, and Career Strength. Scaled scores on the strength subscales range from 1 to 16, with an average score between 8 and 12. Higher scores indicate greater strengths.

A strength index can be calculated and is based on the sum of the subscale scores, excluding career strength. The strength index ranges from 38 to 161, with an average index in the 90–110 range. A higher index indicates greater overall strengths.

Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS–2Y):

The BERS–2Y is a youth version of the BERS–2C. It is administered to youth 11 years and older. As with the caregiver version, the BERS–2Y measures children’s emotional and behavioral strengths in six different areas: Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength, and Career Strength. On the youth version, however, scaled scores on the strength subscales range from 1 to 18, but the average range remains the same at 8–12. The calculation, range, and average score of the strength index remain the same as well (i.e., 38 to 161, with an average index between 90 and 110). Higher subscale scores and strength indexes indicate greater overall strengths.

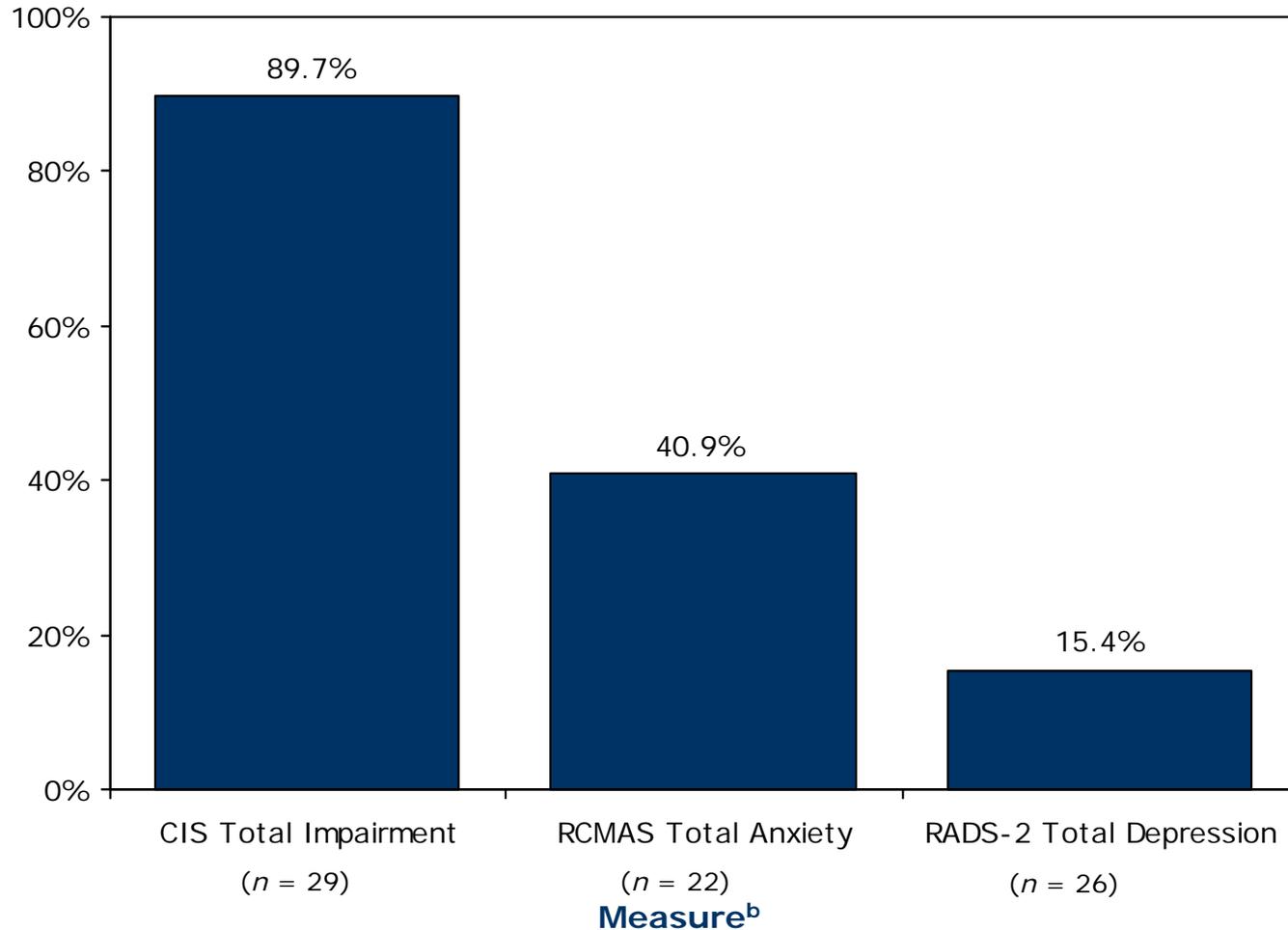
Child Impairment and Anxiety and Adolescent Depression at Intake

Measure	Average Score	Clinical Impairment Range
Columbia Impairment Scale^a		
Overall Level of Impairment (<i>n</i> = 29)	27.1	15.0–52.0
Revised Child’s Manifest Anxiety Scale^b		
Worry/Oversensitivity Subscale (<i>n</i> = 22)	11.1	
Social Concerns/Concentration Subscale (<i>n</i> = 21)	10.4	
Physiological Anxiety Subscale (<i>n</i> = 22)	11.3	
Total Anxiety Score (<i>n</i> = 22)	55.7	61.0-92.0
Reynolds Adolescent Depression Scale–2^b		
Dysphoric Mood Subscale (<i>n</i> = 26)	49.9	
Anhedonia/Negative Affect Subscale (<i>n</i> = 26)	50.9	
Negative Self-Evaluation Subscale (<i>n</i> = 25)	51.7	
Somatic Complaints Subscale (<i>n</i> = 26)	52.9	
Total Depression Score (<i>n</i> = 26)	52.0	61.0–90.0

^a The Columbia Impairment Scale (CIS) measures problems during the 6 months prior to data collection.

^b The Revised Child’s Manifest Anxiety Scale (RCMAS) and the Reynolds Adolescent Depression Scale-2 (RADS-2) measure problems at the time of data collection.

Percent Scoring in the Clinical Range^a of Impairment, Anxiety, and Depression at Intake



^a A score of 15 or higher is considered clinically impaired on the Columbia Impairment Scale (CIS). A total T-score greater than 60 indicates a high level of impairment on the Revised Children's Manifest Anxiety Sale (RCMAS). A score of 61 and higher on the Reynolds Adolescent Depression Scale-Second Edition (RADS-2) indicates a clinical level of depression.

^b The CIS measures problems during the 6 months prior to data collection. The RCMAS and RADS-2 measure problems at the time of data collection.

Child Competence and Behavioral and Emotional Problems^a in the 6 Months Prior to Intake

Measure	CBCL 6–18 Average Score	Clinical Range
Competence		
Social	35.8 (<i>n</i> = 24)	<30.0
Activities	38.2 (<i>n</i> = 26)	<30.0
School	33.5 (<i>n</i> = 25)	<30.0
Total Competence	30.7 (<i>n</i> = 23)	<37.0
Behavioral and Emotional Problems		
Social Problems	69.2 (<i>n</i> = 26)	>70.0
Thought Problems	73.1 (<i>n</i> = 26)	>70.0
Rule-Breaking Behavior	71.4 (<i>n</i> = 26)	>70.0
Withdrawn	69.2 (<i>n</i> = 26)	>70.0
Somatic Complaints	64.5 (<i>n</i> = 26)	>70.0
Anxious/Depressed	68.0 (<i>n</i> = 26)	>70.0
Attention Problems	70.9 (<i>n</i> = 26)	>70.0
Aggressive Behavior	77.2 (<i>n</i> = 26)	>70.0
Internalizing Problems	68.9 (<i>n</i> = 26)	>63.0
Externalizing Problems	74.2 (<i>n</i> = 26)	>63.0
Total Problems	73.9 (<i>n</i> = 26)	>63.0

^a Data reported were collected using the Child Behavioral Checklist 6-18 (CBCL 6-18).

Caregiver and Youth Report of Behavioral and Emotional Strengths^a in the 6 Months Prior to Intake

	BERS-2C Average Score	BERS-2C <i>n</i>	BERS-2Y Average Score	BERS-2Y <i>n</i>
Strength Subscales^b				
Interpersonal Strength Subscale	5.9	26	9.6	22
Family Involvement Subscale	6.5	26	10.2	22
Intrapersonal Strength Subscale	7.9	26	10.5	22
School Functioning Subscale	5.9	23	9.5	22
Affective Strength Subscale	7.8	26	10.5	22
Career Strength Subscale	9.0	24	10.0	21
Strength Index^c	79.8	23	100.2	22

^a Data reported were collected using the Behavioral and Emotional Rating Scale-Second Edition, Parent Rating Scale (BERS-2C) and Behavioral and Emotional Rating Scale-Second Edition, Youth Rating Scale (BERS-2Y). BERS-2 reflects behavioral and emotional strengths during the 6 months prior to data collection.

^b Strength subscales on the BERS-2C range from 1 to 16, and on the BERS-2Y from 1 to 18. Average scores on both instruments range between 8 and 12. Higher scores indicate greater strength.

^c Strength indexes for both BERS-2C and BERS-2Y range from 38 to 161, with an average index between 90 and 110. A higher index indicates greater overall strengths.

Section VII: Caregiver and Family Measures

This section provides information on caregivers' perceptions of family functioning and the strain associated with caring for a child with behavioral and emotional problems. Information in this section was taken from the following instruments, which are administered to caregivers:

Caregiver Strain Questionnaire (CGSQ): The CGSQ assesses the extent to which caregivers are affected by the special demands associated with caring for a child with emotional and behavioral problems. The CGSQ is comprised of three subscales, which range in severity from 0 to 5. Objective Strain refers to observable disruptions in family and community life (e.g., interruption of personal time, lost work time, financial strain). Subjective Externalized Strain relates to negative feelings about the child such as anger, resentment, or embarrassment. Subjective Internalized Strain refers to the negative feelings that the caregiver experiences, such as worry, guilt, and fatigue. Higher scores on each of these scales indicate greater strain. A Global Strain score is calculated by summing the three subscales (i.e., Objective Strain, Subjective Externalized Strain, and Subjective Internalized Strain) to provide an indication of the total impact of the special demands on the family. Global Strain scores range from 0 to 15. As with the individual subscales, higher scores indicate greater strain.

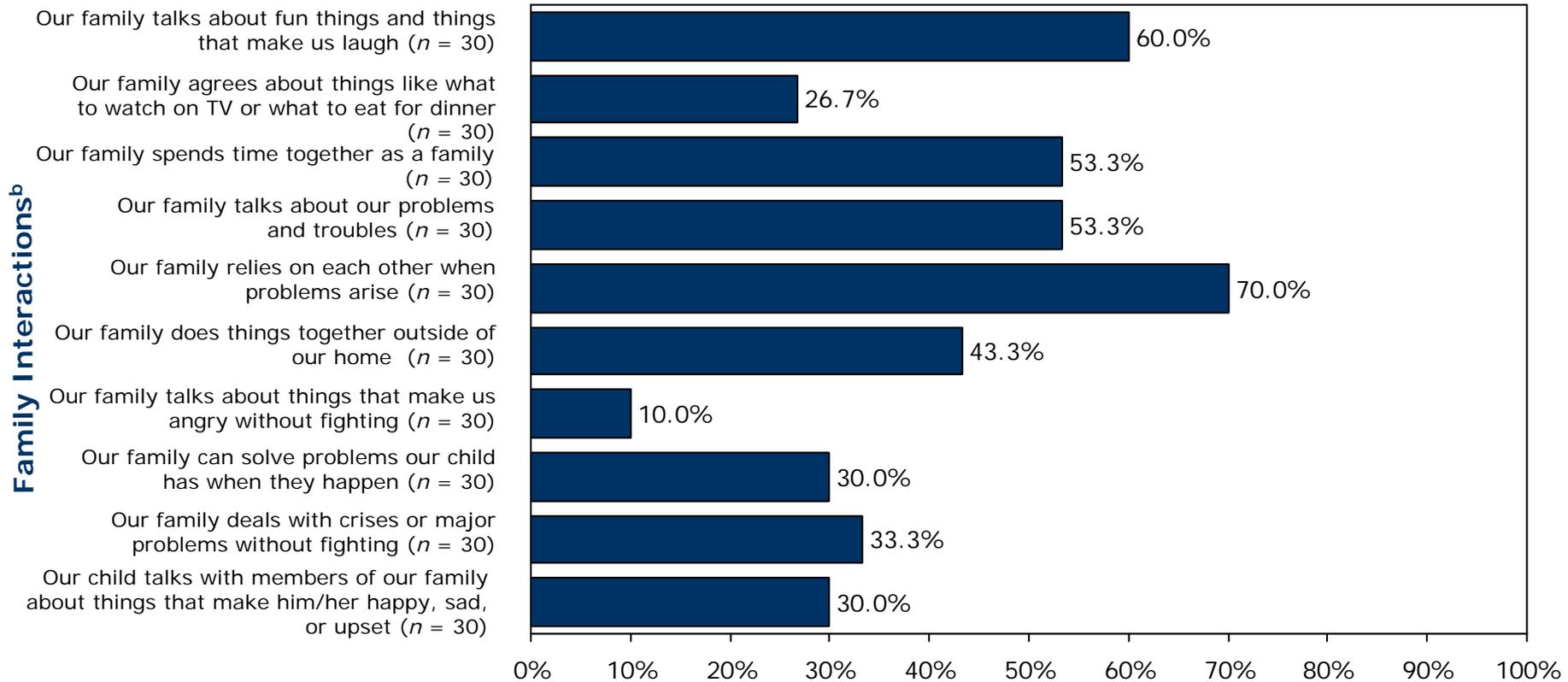
Family Life Questionnaire (FLQ): The FLQ assesses family communication, decision-making, and support and bonding. The FLQ consists of 10 statements describing positive family interactions. Using a 5-point scale, caregivers are asked to rate how often each interaction occurs in their family. Responses range from "Never" (1) to "Always" (5).

Caregiver Strain in the 6 Months Prior to Intake

	Average Score
Caregiver Strain Questionnaire Subscales^a	
Objective Strain Subscale (<i>n</i> = 30)	2.9
Subjective Externalized Strain Subscale (<i>n</i> = 30)	2.8
Subjective Internalized Strain Subscale (<i>n</i> = 30)	4.0
Global Strain Scale (<i>n</i> = 30)	9.7

^a Data reported were collected using the Caregiver Strain Questionnaire. The range in scores for each subscale is 0 to 5; the range in scores for the Global Strain scale is 0 to 15. Higher scores indicate greater strain.

Caregiver Assessment of Family Life^a in the 6 Months Prior to Intake



^a Data reported were collected using the Family Life Questionnaire (FLO).

^b Percentages reported combine the responses "Most of the time" and "Always."

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