



Evaluating the Impact of Prevention and Early Intervention Activities on the Mental Health of California's Population

Katherine E. Watkins
 Audrey Burnam
 Edward Okeke
 Claude Setodji

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Purpose of Meeting

- To brief the Mental Health Services Oversight and Accountability Commission (MHSOAC) on the development of the Prevention and Early Intervention (PEI) statewide evaluation framework

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Background

- MHSOAC coordinated with the California Mental Health Services Authority (CalMHSA) to seek the development of a statewide evaluation framework for evaluating and monitoring the long-term impact of PEI funding on the population.
- CalMHSA selected RAND to develop the framework.

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RAND's Tasks

- Develop a strategic evaluation plan for assessing and monitoring the long-term impact of PEI funding on the mental health of California's population
- Framework should provide a foundation that the state, counties, and programs can use to monitor performance improvement
- Framework should focus on reducing the negative outcomes identified by the MHSA: suicide, homelessness, incarceration, prolonged suffering, removal of children from the home, unemployment, and school drop-out

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Stakeholder Input Was Essential at Every Step

- Conducted interviews with 48 key stakeholders—technical subject matter experts, county and state administrators, family members and consumers
- Reviewed progress and draft frameworks with Statewide Evaluation Experts team, CalMHSA board and the MHSOAC staff and evaluation sub-committee
- Presented frameworks at county workgroup meetings
- Revised approach and frameworks in response to feedback

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Final Report Consists of the Following:

- Report
 - Background, methods and rationale for framework(s)
 - Analytic approaches
 - Key recommendations
- Appendices
 - Frameworks
 - Data base descriptions (41)
 - Measure specifications for each key outcome
 - Alternative statistical approaches

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CalMHSA Board has Endorsed the Report

On August 9, 2012 the CalMHSA Board :

- Endorsed *Evaluating the Impact of PEI Activities on the Mental Health of California's Population*, dated July 10, 2012, prepared by the RAND Corporation.
- Approved that the Framework be utilized in the CalMHSA Training/Technical Assistance and Capacity Building Project as a foundational tool for evaluation of PEI.
- Approved submission and endorsement of the Framework to the MHSOAC for their use and consideration in MHSOAC evaluation activities.

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**A Statewide Evaluation Framework:
The Vision**

- Capture system transformation
- Monitor progress towards mental health equity
- Allow MHSOAC to fulfill oversight responsibility

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Key Conclusions: the Vision is Achievable

- It is feasible to evaluate the impact of MHSOAC and PEI funding in real time, without major new data collection efforts
- Framework would provide important information on current program activities and would establish a basis for longer-term monitoring of program activities and outcomes
- Analyses would be descriptive, and identify gaps between need and program activities, and need and population outcomes

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Framework Development

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Key Assumption

- Reductions in the key outcomes are longer-term, system wide effects, rather than the direct effects of PEI programs
 - Most PEI programs don't target key outcomes but rather earlier, intermediate outcomes
 - PEI is meant to be part of a continuum of services; Key outcomes should be reduced if the entire continuum of prevention, early intervention and treatment is strengthened
 - Benefits of PEI often logically depend on access to and use of appropriate interventions and resources

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Implications of Key Assumption

- Changes in key outcomes should be measured for the population as a whole
- Effects of PEI programs on outcomes cannot be distinguished from effects of treatment
- Long-term tracking of key outcomes is essential. Benefits of system transformation are likely to be small and undetectable in the short-run, but with sustained programmatic efforts small effects should accumulate
- Essential to collect information about the specific programs that were funded and the utilization and quality of these programs

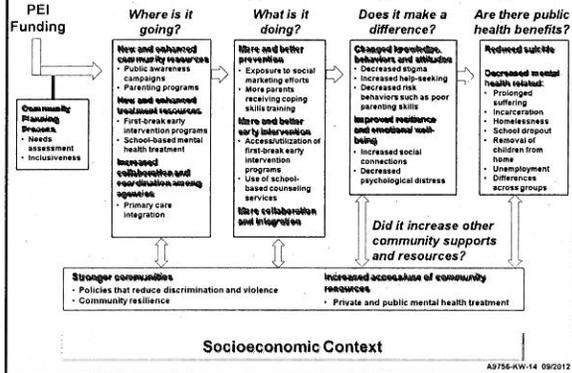
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We Created Two Types of Frameworks

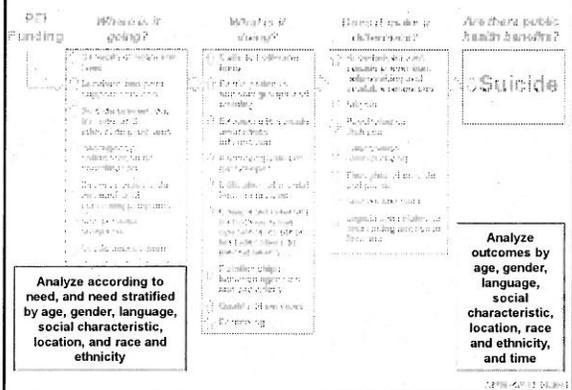
- The “overall approach” framework highlights the at a conceptual level the steps between PEI funding and population health
- The “outcome-specific” evaluation frameworks identify the programs and activities that should be logically linked to specific key outcomes
- Both types of frameworks identify the key components to be measured and tracked over time

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An Approach to Understanding the Impact of Statewide Prevention and Early Intervention (PEI) Funding



Suicide Prevention Framework



Analytic Approaches

- Technically difficult to evaluate the ***causal*** relationships between PEI program activities and key outcomes
- Can relate changes in PEI program activity and changes in outcomes
 - Time trend analysis of observational data
 - Difference in Differences design
 - Synthetic Control method

We recommend establishing a surveillance system and using descriptive statistics to monitor the effects of PEI/MHSA, supplemented by rigorous evaluations of effectiveness for selected PEI programs

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A Statewide Evaluation Framework: Questions it Can Answer

- What did funding achieve?
- Are we putting in place the types of programs we intended to (as defined by the community planning process), and reaching the populations we wanted?
- Is mental health equity increasing?
- How does California compare to the nation? How do counties compare to each other?

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Recommendations

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Track Population-Level Outcomes

- Because reductions in key outcomes are longer-term, system-wide effects, measure and track key outcomes for the population as a whole, rather than only among individuals exposed to a specific program
- Initial benefits of system transformation are likely to be small, but with sustained efforts small effects should result in a positive trend over time
- MHSA meant to strengthen the entire system (prevention, early intervention and treatment) and program benefit often depends on access to other resources

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Use and Strengthen Existing Data to Track Population Outcomes

- Data exists for many key outcomes and can be analyzed by important group categories such as age, gender, geographic region and need
- Changes in resilience and well-being are likely to be early population-level indicators of the impact of the MHSA
- In some cases these data have limitations and could be improved
 - State suicide data
 - California Healthy Kids Survey

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Standardize Information Provided by Programs

- Essential to develop standardized measures of the “Where is it going?” and “What is it doing?” boxes
- At minimum should include information about types of specific programs funded, target population and utilization
- Next steps would be to report on demographic and social characteristics of individuals reached by programs and quality of programs

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Conduct Targeted Evaluations of Program Effectiveness

- Opportunities exist to strengthen the evidence base for PEI interventions
- Recommend that the state or counties strategically conduct rigorous evaluations of strategically selected promising programs
- Do not recommend attempting to determine the comparative effectiveness of different programs using routine monitoring of outcomes

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Develop Indicators of Program Quality and Cultural Competence

- Few standardized and accepted measures of the quality of PEI services
- No broadly accepted and reliable measures of cultural competence that could serve as performance indicators
- May be an area for further research and investment
 - Conduct rigorous evaluations of promising programs
 - Obtain advice from national experts on state-of-the-art approaches to cultural competence

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