

UCLA MHSA Early Intervention Evaluation

Evaluation of Early Intervention Program Impact

Center for Healthier Children, Families & Communities
University of California, Los Angeles



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Goal

- Provide greater understanding of the impact of MHSA Early Intervention programs on consumer outcomes
 - UCLA investigated the impact on consumers of three “clusters” of early intervention programs across the state, including:
 - **Cluster 1** – Children and youth displaying emotional disturbance as a result of trauma
 - **Cluster 2** – Youth, transition-age youth, and younger adults with prodromal symptoms or experiencing first onset of psychosis
 - **Cluster 3** – Older adults experiencing early onset of depression or depressive symptoms



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Early Intervention Program Clusters

- Evaluation Inclusion Criteria:
 - Early intervention programs
 - PEI funding
 - Consumer population identified by clinical assessment
 - Promising or evidence-based treatment components and implementation

Early Intervention Program Clusters

- Program Clusters Identified:
 - Cluster 1
 - Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), and
 - Cognitive Behavioral Intervention for Trauma in Schools (CBITS).
 - Cluster 2
 - Portland Identification and Early Referral (PIER),
 - Early Diagnosis, and Preventative Treatment of Psychosis Illness (EDAPT or SacEDAPT), and
 - Prevention and Recovery in Early Psychosis (PREP).
 - Cluster 3
 - Program to Encourage Active Living for Seniors (PEARLS),
 - IMPACT, and
 - Healthy IDEAS (Identifying Depression, Empowering Activities for Seniors).

Cluster 1: Evaluation of Early Intervention Programs Serving Children & Youth Displaying Emotional Disturbance as a Result of Trauma

- **Change in severity of mental illness**
 - Largely consistent pattern of improvement
 - In many cases “clinically significant” reductions from more to less severe levels of symptoms or higher levels of functioning.
- **Rates of service utilization among underserved populations**
 - Most Cluster 1 programs served gender and race/ethnic minority groups (i.e., Hispanics and Black individuals) in relative proportion to (within 10% of) the estimated rate of need for service among their respective county populations.



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Cluster 2: Evaluation of Early Intervention Programs Serving Youth, Transition-Age Youth, and Younger Adults with Prodromal Symptoms or Experiencing First Onset of Psychosis

- **Change in the severity of mental illness**
 - Largely consistent pattern of improvement in severity of mental illness
 - In many cases clinically significant reductions from more to less severe levels of symptoms or higher levels of functioning.
- **Rates of Service Utilization Among Underserved Populations**
 - Most Cluster 2 programs served race/ethnic minority groups (e.g., Hispanics and Black individuals) in relative proportion to (within 10% of) the estimated rate of need for service among their respective county populations.
- **Involvement with the Justice System**
 - Respondents in Sacramento and San Francisco counties demonstrated statistically significant reduction in reports of arrest.



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Cluster 2: Evaluation of Early Intervention Programs Serving Youth, Transition-Age Youth, and Younger Adults with Prodromal Symptoms or Experiencing First Onset of Psychosis

- **School Participation**

- Analyses of the Sacramento and San Diego EDAPT and PIER programs found a proportional increase in participants who reported being in school, but this change was not statistically significant.

- **Employment Status**

- Slight improvement in the rate of employment among Cluster 2 participants reporting relevant data, but this change was not statistically significant.

- **Housing Status**

- Among Sacramento and San Diego EDAPT and PIER programs, few participants lacked permanent housing at intake.



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Cluster 3: Evaluation of Early Intervention Programs Serving Older Adults Experiencing Early Onset of Depression or Depressive Symptoms

- **Change in Severity of Mental Illness**

- Largely consistent pattern of clinically significant reductions from more to less severe levels.

- **Rates of Service Utilization Among Underserved Populations**

- In line with previous research indicating older men tend to be underserved, some programs served disproportionately more female consumers.
 - Served traditionally underserved race/ethnic groups (i.e., Hispanics and Black individuals) in approximate proportion to (within 10% of) their estimated need for service among their respective county populations.

- **Suicidal Thoughts and Behavior**

- Participants in the San Diego and Stanislaus PEARLS programs reported significant average improvement.



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Summary & Conclusions

- Change in the severity of mental illness
 - Analysis of three study clusters suggested clinically significant reductions
 - Suggests early intervention approaches studied are positively impacting participants.
- Rates of Service Utilization Among Underserved Populations
 - Race/ethnic and gender groups were served at different rates.
 - Suggest additional study of outreach to underserved populations (e.g., outreach processes, strategies, and goals), and rates of conversion to program participation (e.g., clinical assessment processes)
- Monitoring & Evaluation of: Justice System Involvement, Housing Status, School Participation, Employment Status, and Suicidal Thoughts/Behavior
 - The importance of these outcomes and limited available data point to need to build local capacity improved monitoring and evaluation.



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