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The authors examined lifetime rates of mental health service use by youth active in at least one child-serving sector in a large metropolitan area. High lifetime rates of mental health service use were found for most of the sample; 87% of all youth used outpatient services at least once, and 45% used inpatient services. Youth involved in the mental health and special education sectors used services the most, while youth involved in the juvenile justice system used services the least.

The study included 1,706 randomly selected youth who were receiving services from one or more of the following child-serving sectors: (a) mental health, (b) alcohol/drug services, (c) child welfare, (d) juvenile justice, and (e) special education. On average, youth were 14.16 years old ($SD = 3.14$), and most were male (66%). Caucasians comprised over one-third (39%) of the sample, followed by Latino (27%), African American (19%), Asian-Pacific Islander (8%), and bi-racial or other (8%). Psychiatric diagnoses were identified with the DISC-IV, and the Service Assessment for Children and Adolescents (SACA) captured services received over the youth's lifetime and for the past 12 months. Selected results by child-serving sector follow:

- ✓ Youth involved in the *mental health sector* ($n = 919$) had high rates for specialty mental health outpatient services, specialty inpatient services, residential inpatient services and school-based services. Of all youth, 87% used outpatient services at least once, and 45% received inpatient services.
- ✓ Youth in the *special education sector* ($n = 428$) had high rates of school-based services and high rates for specialty mental health services. Almost all youth in this group (90%) used specialty outpatient services and over 40% had been hospitalized for a psychiatric problem. Youth in this group were less likely to have been involved with the child welfare and juvenile justice sectors when compared to the other groups. Of the entire sample, 71% received school-based services.
- ✓ Youth in the *child welfare sector* ($n = 453$) were likely to be placed in foster homes, residential treatment centers, group homes and emergency shelters, and to receive specialty mental health outpatient services. They were less likely to be involved with the juvenile justice system or to receive school-based services when compared to the other groups. Thirty-six percent of all youth were placed in foster care.
- ✓ Youth receiving care through the *alcohol/drug services sector* ($n = 175$) were highly likely to be placed in residential treatment centers and group homes. They were also likely to be placed in a juvenile detention center or to have contact with a probation officer. Further, they were likely to use informal outpatient services such as peer counseling. Compared to the rest of the sample, this group of youths was less likely to have used specialty mental health outpatient services. The percentage of youth involved with alcohol/drug services is not reported.
- ✓ Youth in the *juvenile justice system* ($n = 505$) showed a decreased likelihood of using most services when compared to youth served by the other sectors. This was the case for school-based services, specialty and non-specialty mental health outpatient services and other services provided outside the formal mental health system. These youth were likely to use services related to juvenile justice, to have special school placements, and to use informal outpatient services. Of all youth, 38% had come in contact with a probation or correctional officer, and 32% were placed in a detention center.

According to the authors, it is not surprising that the mental health and special education sectors would provide the highest rates of mental health services among all five child-serving sectors. However they note the low rates of service use among youth involved in the juvenile justice system and suggest that this finding merits additional investigation.