

**Functional Family Therapy – CIMH Development Teams
Aggregate Program Performance Dashboard Report
CSS Data Download
FFT Clients Served from Program Inception through July 2013**

This aggregate program performance dashboard report describes youth referred to one of 39 active Functional Family Therapy (FFT) teams throughout the state of California participating in the CIMH-sponsored FFT Development Teams. This report presents available CSS data for youth and families served from each program's inception through July 2013. Data are inclusive of all therapists who are currently providing, or have previously provided, FFT services for these 39 teams.

Table 1. FFT Status – Clients Referred to FFT (N=11,760)	
Entry Rate*	Dropout Rate*
94.0% (n=11,055)	35.8% (n=3,963)

*Please see Appendix A. for a description of Entry and Dropout Rates.

Table 2. Client Demographics – Youth Who Entered FFT (n=11,055)									
	Gender			Ethnicity					
Age (in years)	Female	Male	Trans-gender	African-American	Asian/Pacific Islander	Biracial	Caucasian	Hispanic/Latino	Other
15.2 (n=8,503)	37.0% (n=4,086)	61.3% (n=6,779)	0.0% (n=2)	21.2% (n=2,345)	1.3% (n=142)	4.6% (n=511)	18.6% (n=2,056)	49.6% (n=5,481)	1.7% (n=189)

Note: Percentages may not total 100 due to missing data.

Table 3. FFT Process Data – Youth Who Had At Least One Session in the Behavior Change Phase (n=8,478)	
Clients With At Least One* Valid Required Outcome Measure of General Mental Health Functioning (YOQ or YOQ-SR) Prior to FFT	Families With At Least One* Completed Counseling Process Questionnaire* (CPQ) OR At Least One* Completed Family Self-Report (FSR) during FFT
85.4% (n=7,243)	87.4% (n=7,413)

*Including parent/caregiver report and/or child/youth self-report. A YOQ measure is valid if it has been administered within the appropriate age range and has a valid score. The denominator for the YOQ indicator includes clients who are within the valid age range for the measures.

*Please see Appendix A. for a description of the Youth Outcome Questionnaires, the Counseling Process Questionnaires, and the Family Self-Report measure.

Table 4. FFT Process Data – Youth Who Completed FFT* (n=6,148)				
Average Number of Sessions				Duration of Open FFT Case
Total	Engagement & Motivation Phase	Behavior Change Phase	Generalization Phase	Average: 37.4 (±30.8) weeks
14.3	4.2	6.3	3.7	Range: 3 – 571 weeks

*Please see Appendix A. for a definition of Completed.

Note: Duration of Open FFT Case is calculated as the difference between the Date of First Session and the Closed Date. Clients who return for services and have their FFT case re-opened in the CSS have a change to their Closed Date, which overinflates their actual duration in services.

Table 5. Outcome Data [±] – Youth Who Completed FFT [±] (n=6,148)					
Youth Outcome Questionnaire (YOQ and YOQ-SR) Total Score					
	Percent Improvement [±] from the Average Pre-FFT Score to the Average Post-FFT Score	Effect Size Estimate [±] (Cohen's <i>d</i>)	Percent of Clients Showing Reliable Change [±] from Pre-FFT to Post-FFT		
			Positive Change	No Change	Negative Change
Parental Figure 1	28.0%* (n=3,673) [pre=61.1]	.48	48.2% (n=1,772)	41.7% (n=1,530)	10.1% (n=371)
Parental Figure 2	21.4%* (n=643) [pre=64.2]	.38	41.1% (n=264)	46.5% (n=299)	12.4% (n=80)
Child/Youth	23.7%* (n=4,138) [pre=50.5]	.38	37.7% (n=1,561)	51.4% (n=2,126)	10.9% (n=451)

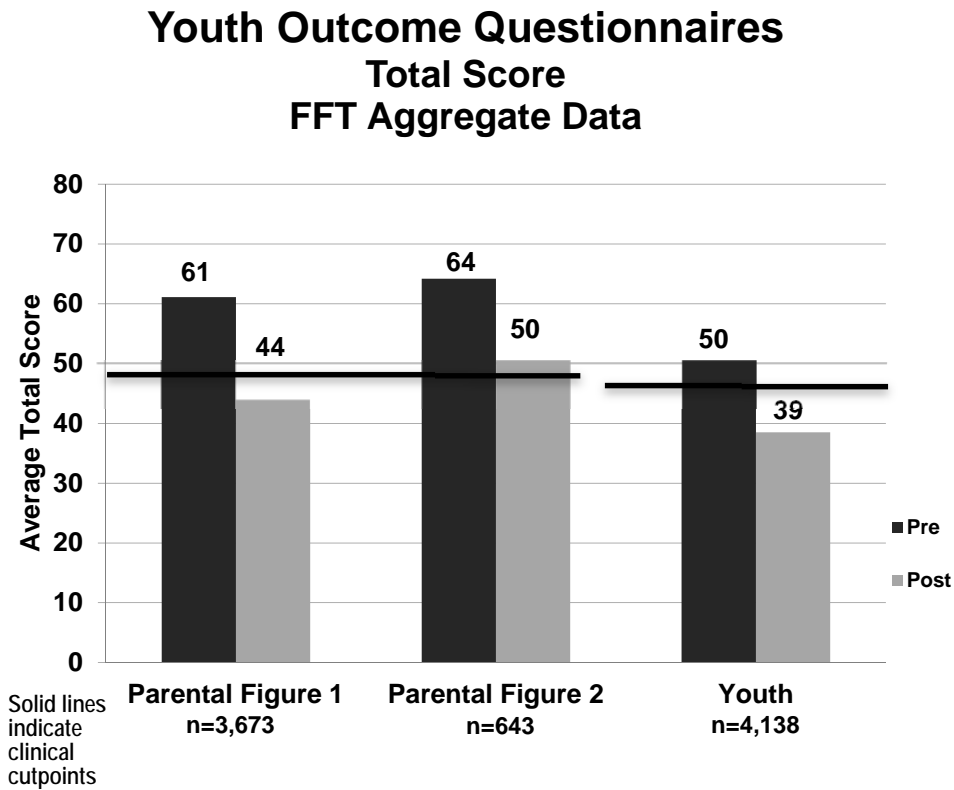
[±]Please see Appendix A. for a description of the FFT outcome measures and the outcome indicators (percent improvement in average scores; effect size estimate; and, percent of clients showing reliable change).

Note1: Possible YOQ scores range from -16-240. Scores of 46 or higher for youth self-report and 47 or higher for parent/caregiver report are most similar to clinical populations.

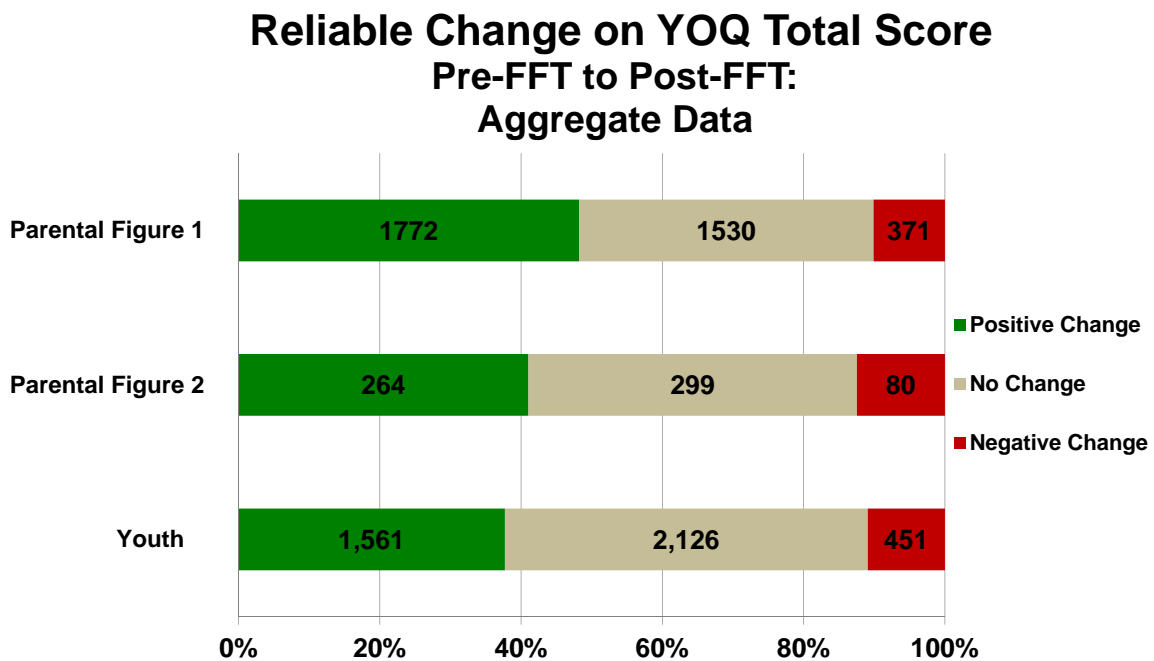
Note2: Follow-up analyses revealed no significant differences in FFT entry rate, dropout rate, length of service, number of total sessions, or change in outcomes by gender or ethnicity.

* A statistically significant difference, $p \leq .01$.

Graph 1. FFT Outcome Data – Youth Served Who Completed FFT (n=6,148)



Graph 2. FFT Outcome Data: Percent of Children Showing Reliable Change on the YOQ after Completion of FFT



Supplemental Program Performance Analyses for Phase III Sites

Thirty-one active FFT sites have progressed to Phase III implementation status (please see Appendix B for a listing of these teams). The following analyses provide program performance information for Phase III sites in one-year intervals for the previous four years (from August, 2008 through July, 2013). The reported indicators are in reference to clients who terminated FFT within each of the one-year intervals. Data are inclusive of all sites that are currently, or have previously been, FFT Phase III teams. Please note that a client's data may be included in more than one time interval as a result of returning for services and/or a reopening of the case in the CSS.

Graph 1. Percent of Closed Cases that Completed FFT

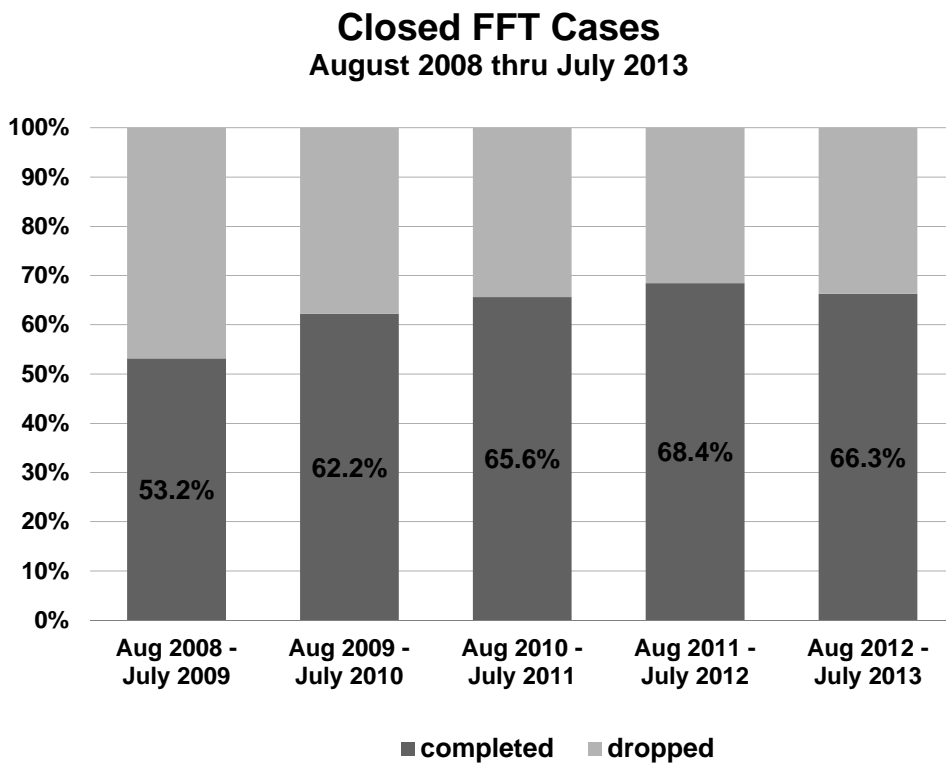


Table 1. Average Duration and Number of Total Sessions for Completed Cases

duration of FFT in weeks	39.3	42.0	41.8	37.1	34.5
total number of sessions	14.6	14.5	14.6	14.4	14.3
n for completed cases	435	684	909	1,233	1,149
	Aug 2008 – July 2009	Aug 2009 – July 2010	Aug 2010 – July 2011	Aug 2011– July 2012	Aug 2012– July 2013

Graph 2. Percent Change in YOQ Scores by Informant

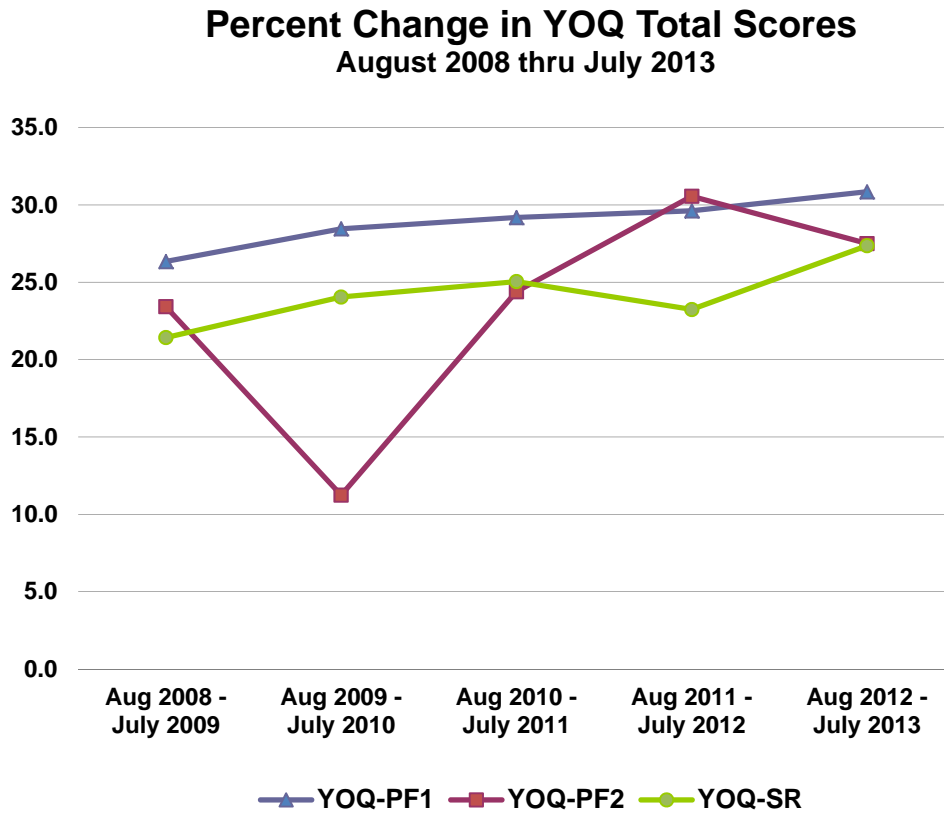


Table 2. Number of Cases within Each 'Percent Change in YOQ' Displayed in Graph 2

n for YOQ-PF1	219	416	544	792	827
n for YOQ-PF2	50	81	107	94	107
n for YOQ-SR	260	466	618	885	921
	Aug 2008 – July 2009	Aug 2009 – July 2010	Aug 2010 – July 2011	Aug 2011– July 2012	Aug 2012– Jan 2013

Appendix A. Description of FFT Process and Outcome Measures and Outcome Indicators

FFT Client Status – Definitions for Entry, Dropout, and Completed

The *Entry Rate* reflects the proportion of youth who were referred for FFT and had at least one session with an FFT therapist. The numerator is the number of youth with at least one FFT session; and, the denominator is the number of youth referred for FFT.

The *Dropout Rate* is the proportion of youth who started FFT and did not advance to the generalization phase. The numerator has two components: 1) the number of youth who entered FFT and had a therapist-identified dropout reason; and/or, 2) the number of youth with closed cases but no sessions in the generalization phase (suggesting that FFT ended prior to the generalization phase). The denominator is the number of youth who entered FFT (those with at least one session).

A client is considered to have *Completed FFT* if: 1) they participated in at least one session in the generalization phase; and, 2) the case status is closed FFT.

Counseling Process Questionnaire (CPQ)

The *Counseling Process Questionnaire (CPQ)* is a self-report process measure used as a routine part of FFT clinical service delivery until early 2011. The CPQ was completed by each family member participating in FFT at every other session during a course of FFT. The CPQ assessed family members' perceptions of the therapeutic process, therapeutic progress, and the therapeutic alliance.

Family Self Report (FSR)

The *Family Self Report (FSR)*, which replaced the CPQ in early 2011, is a 7-item inventory completed by each family member a minimum of six times throughout the FFT service delivery process. The main purpose of the FSR is to give the family an opportunity to tell the therapist how they view the counseling process and therapist. In addition, the FSR provides the therapist with independent perspectives on alliance, matching, and resistance of family members, all of which can inform the clinical process for each family.

Youth Outcome Questionnaires (YOQ and YOQ-SR)

The *Youth Outcome Questionnaires (YOQ and YOQ-SR)* are outcome measures completed before and after participation in FFT. These 64-item standardized questionnaires assess children's global mental health functioning within the prior week according to both youth self-reports (ages 12-18) and reports of their parents/caregivers (for children ages 4-17).

Possible Total YOQ and YOQ-SR scores range from -16-240. Scores of 47 or higher for parent/caregiver report and 46 or higher for youth self-report are most similar to clinical populations.

The percent improvement in Total YOQ and YOQ-SR Scores from pre-FFT to post-FFT is reported when available.

Appendix A. Description of FFT Process and Outcome Measures and Outcome Indicators (cont'd)

Outcome Indicator: Percent Improvement in Average Pre- and Post- Scores

The percent improvement in the average YOQ scores from pre-FFT to post-FFT is reported each informant, when available. A paired t test analysis is conducted with each set of scores; and, when the difference observed is not likely to be due to chance ($p < .01$), this is indicated with a footnote.

In addition to reporting the percent of change in average scores in Table 5, Graph 1 of the program report presents the average pre-scores and the average post-scores for each informant, with solid lines indicating the clinical cutpoints.

Outcome Indicator: Effect Size Estimate, Cohen's *d*

Cohen's *d* is a standardized effect size measure that estimates the magnitude, or strength, of a relationship. In this dashboard report it estimates the strength of the relationship between the average pre score and the average post score, expressed in terms of standard deviations. An effect size of .5 indicates that the average pre score is .5 standard deviations greater than the average post score. While there is no absolute agreement about what magnitude of an effect size is necessary to establish practical or clinical significance, conventional interpretations of Cohen's *d* are that effect sizes of .2 to .3 represent a "small" effect; effect sizes around .5 reflect a "medium" effect; and, effect sizes of .8 or greater represent a "large" effect. However, an alternate schema has been proposed for the social sciences, where the recommended minimum effect size representing a "practically" significant effect is .41, with 1.15 representing a moderate effect and 2.70 a strong effect [see Ferguson, C.J. (2009). An Effect Size Primer: A Guide for Clinicians and Researchers. *Professional Psychology: Research and Practice*, 40 (5), 532-538].

Outcome Indicator: Percent of Clients Showing Reliable Change

The percent of clients showing reliable change reflects those with an amount of change on an outcome measure from pre-FFT to post-FFT that meets or exceeds the value of the Reliable Change Index (RCI). RCI, as calculated using the Jacobson-Truax (1991) method, is the amount of change that can be considered reliable based on the difference from pre- to post-, taking the variability of the pre-treatment group and measurement error into consideration. It reflects an amount of change that is not likely to be due to measurement error ($p < .05$) [see Wise, E.A. (2004). Methods for Analyzing Psychotherapy Outcomes: A Review of Clinical Significance, Reliable Change, and Recommendations for Future Directions. *Journal of Personality Assessment*, 82(1), 50-59].

The percent of clients with positive change, no change, and negative change are reported in Table 5; and, Graph 2 of the program report presents reliable change in these three categories for each informant.

Appendix B. Phase III Sites

- Aviva
- Children's Institute, Inc – Team 1
- Children's Institute, Inc – Team 2
- Comprehensive Youth Services – Team 1
- EMQ-Families First
- Family Service Agency of San Francisco
- Humboldt County Mental Health – Children, Youth and Family Services
- Imperial County
- Kern County Mental Health – Children's System
- Los Angeles Child Guidance Clinic
- Los Angeles County Probation, Team 2
- Los Angeles County Department of Mental Health – Long Beach Child and Adolescence Program
- Marin County – Juvenile Probation
- Napa County Probation
- Penny Lane Centers, Team 1
- Penny Lane Centers, Team 3
- Placer County Children's System of Care
- Sacramento RBS Group Home Project - Martin's Achievement Place, Quality Group Home, and Sacramento Children's Receiving Home
- San Bernardino County – Integrated New Family Opportunities
- Shields for Families, Team 1
- Shields for Families, Team 2
- Shields for Families, Team 3
- Shields for Families, Team 4
- Shields for Families, Team 5
- Stanford Youth Solutions
- Star View Community Services, Team 1
- Star View Community Services, Team 2
- Sutter-Yuba Mental Health
- Yolo County – CommuniCare Health Centers