



# **MN Kids Database**

# Profile of Hennepin County youth served in the 2012-13 school year

www.mnkidsdata.org

The MN Kids Database (MKD) is a collaborative project involving a number of school-based mental health providers in Minnesota. Using a web-based data tracking system, providers have been collecting a common set of data related to school-based services, including information about students served, billable and ancillary services provided, and student mental health outcomes. This brief summarizes the demographic information about the Hennepin County students tracked in the MKD for the 2012-13 school year.

Hennepin County students were served by 125 clinicians in 66 schools. During the school year, information on 1,641 Hennepin County students who received at least one school-based service during the school year.

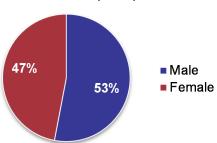
This brief provides a basic profile of youth served during the 2012-2013 academic year. This snapshot provides an overview of the demographic background of these youth, including gender, race, ethnicity, primary language, grade, emotional disturbance certification, prior mental health services, and primary insurance.

#### Gender

Over half of the students who received services during the 2012-13 school year were male. Of the 1,595 students with gender information recorded, 844 were male (53%) and 751 were female (47%) (Figure 1).



# I. STUDENT GENDER (N=1,595)



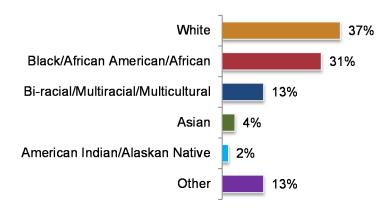
Note: Gender was missing for 46 students (3%). An "other" category is provided, but no students were recorded in this category.

### Race, ethnicity, and home language

# A diverse array of youth was served, with more than half of the students representing communities of color. The race categories used in the database were

color. The race categories used in the database were selected to align with those required by Minnesota's Department of Human Services (DHS). Thirty-seven percent of the students who received school-based mental health students were White, followed by Black/African American/African Ancestry (31%), Bi-racial/Multiracial/Multicultural (13%), Asian (4%), American Indian/Alaskan Native (2%), and Other (13%), which may include Hispanic youth (Figure 2).

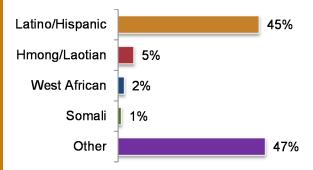
# 2. STUDENT RACE (N=1,536)



Note: Race information was missing for 105 students (6%).

Ethnicity was recorded for only about four in 10 (44%) students, so percentages should be viewed with caution. The ethnicity categories were also selected to align with those required by DHS. This categorization tends to be challenging for agencies to align with their existing internal reporting systems. About half of the students (45%) who had an ethnicity recorded were Latino/Hispanic. Forty-seven percent were listed in the Other category and may include those whose race is labeled Caucasian. The remaining students were identified as Somali, West African, or Hmong (Figure 3).

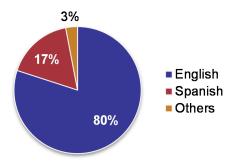
# 3. STUDENT ETHNICITY (N=727)



Note: Ethnicity was missing for 914 students (56%).

**Most of the students served spoke English at home.** The majority of the students served (80%) mainly spoke English at home. Seventeen percent of the students spoke Spanish and three percent spoke another language (Figure 4).

# 4. HOME LANGUAGE SPOKEN BY STUDENTS (N=1,472)



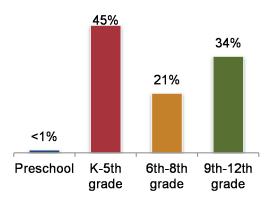
Note: Primary language spoken at home was missing for 169 students (10%).



#### Grade in school

Just under half of the students (45%) receiving services in the 2012-2013 school year were in Kindergarten to 5<sup>th</sup> grade. The other 55 percent were older, with 21 percent in in 6<sup>th</sup>-8<sup>th</sup> grade and 34 percent in 9<sup>th</sup>-12<sup>th</sup> grade. Less than one percent were in preschool (Figure 5).

# 5. GRADE IN SCHOOL (N=1,152)



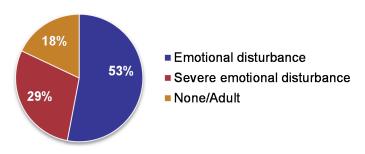
Note: Grade is missing for 489 students (30%).

# **Emotional disturbance**

Clinicians were asked to report whether students were classified with an Emotional Disturbance (ED) or Severe Emotional Disturbance (SED). Emotional disturbance is a general term and intended to reflect all categories of disorder described in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), as usually first evident in childhood or adolescence. Students with the most serious emotional disturbances (SED) may exhibit distorted thinking, excessive anxiety, bizarre motor acts, and abnormal mood swings. ED and SED disorders often seriously limit a child's capacity to function in primary aspects of daily living such as personal relations, living arrangements, work, school, and recreation.

Four in five students were classified as either ED or SED. Of the 1,231 students with information provided, eighty-two percent had an Emotional Disturbance (ED) or Severe Emotional Disturbance (SED) classification (53% ED, 29% SED). The remaining eighteen percent did not meet the criteria or were not classified because they were too old (Figure 6).

#### 6. SEVERE/EMOTIONAL DISTURBANCE CERTIFICATION STATUS (N=1,231)

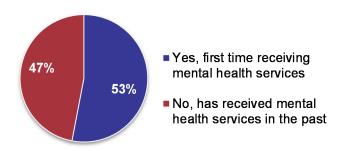


Note: ED/SED classification is missing for 410 students (25%).

# History of mental health service

Half of the students served (53%) were receiving their first mental health services. The remaining 47 percent of the students had received mental health services in the past (Figure 7).

# 7. FIRST TIME RECEIVING MENTAL HEALTH SERVICES (N=1,490)



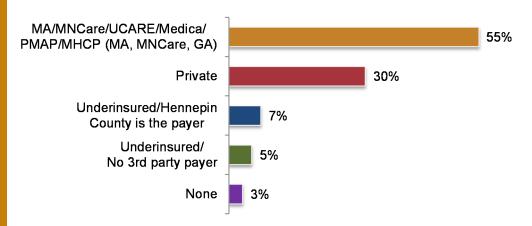
Note: First time receiving mental health services data are missing for 151 students (9%).

# **Primary insurance**

More than half of the students served were covered by public insurance. Of the 1,522 students who had information provided, more than half (55%) were covered by Medical Assistance (MA), Minnesota Care (MNCare) or UCare. Almost one-third (30%) were covered by private insurance. More than one in ten was underinsured with Hennepin County serving as the payer (7%) or with no 3<sup>rd</sup> party payer (5%)<sup>1</sup>. Three percent did not have any insurance at all (Figure 8).



# 8. PRIMARY INSURANCE COVERAGE (N=1,522)



Note: Primary insurance information is missing for 119 students (7%).

# History of MN Kids Database

The MN Kids Database partners were motivated by a desire to use system-level data to better understand the potential benefits of school-based mental health services, identify strategies for enhancing programming, and build a case for program sustainability.

The MN Kids Database is managed and owned by the partners that financially contributed to its creation and is not a government run website. Wilder Research serves as project manager, working with an external vendor to create the MN Kids Database, managing user agreements and fees, and preparing reports. An advisory group works closely with Wilder Research to oversee the development and implementation of the database.

A student is considered underinsured if they are not adequately covered for particular services or if they do not qualify for coinsurance requirements.

Disclaimers: The information entered into the MKD is not always complete for all students. There are a number of reasons for missing data. Some agencies did not use all data categories, depending upon the specific requirements of their funders. A few agencies electronically transferred their data into the MKD and did not collect some of the information that is now recorded in MKD, therefore some fields were missing for those students.

