



Board of
Behavioral
Sciences

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MEETING NOTICE

LCSW Education Committee

May 5, 2008

Department of Consumer Affairs
1625 N. Market Blvd.
Hearing Room, First Floor
Sacramento, CA 95834
(916) 574-7830

10:00 a.m. – 2:00 p.m.

- I. Introductions
- II. Purpose of the Committee
- III. Review of Information Sources and Key Stakeholders
- IV. Review of LCSW Occupational Analysis
- V. Presentation about Graduate Social Work Education from the California State University at Sacramento, Division of Social Work
- VI. Future Meeting Dates
- VII. Suggestions for Future Agenda Items
- VIII. Public Comment for Items Not on the Agenda

Public Comment on items of discussion will be taken during each item. Time limitations will be determined by the Chairperson. Items will be considered in the order listed. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda.



Arnold Schwarzenegger
Governor
State of California
State and Consumer
Services Agency
Department of
Consumer Affairs

THIS AGENDA AS WELL AS BOARD MEETING MINUTES CAN BE FOUND ON THE BOARD OF BEHAVIORAL SCIENCES WEBSITE AT www.bbs.ca.gov

NOTICE: The meeting facilities are accessible to persons with disabilities. Please make requests for accommodations to the attention of Christina Kitamura at the Board of Behavioral Sciences, 1625 N. Market Boulevard, Suite S-200, Sacramento, CA 95834, or by phone at 916-574-7835, no later than one week prior to the meeting. If you have any questions please contact the Board at (916) 574-7830.

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To: LCSW Education Committee

Date: April 23, 2008

From: Christy Berger
MHSA Coordinator

Telephone: (916) 574-7834

Subject: Review of Information Sources and Key Stakeholders

As the committee begins its work, it is useful to lay out the sources of information and key stakeholders that staff and the committee members have identified.

Information Sources:

1. BBS Occupational Analysis for Licensed Clinical Social Workers (LCSW)
2. Council on Social Work Education (CSWE) Accreditation Standards
3. California Social Work Education Center (CalSWEC) Mental Health Curriculum Competencies
4. Western Association of Schools and Colleges (WASC) Accreditation Standards
5. California Mental Health Services Act
6. California Demographic Information (**attached**)
7. LCSW and Associate Clinical Social Worker (ASW) Demographics (**attached**)
8. LCSW Student Demographics
9. Mental Health Consumer Statistics and Demographics (**attached**)
10. Incidence and Severity Data for Mental Illness (**attached**)

Key Stakeholders:

1. LCSWs
2. ASWs
3. Graduate Level Social Work Students and Educators
4. Clinical Supervisors
5. Mental Health Consumers
6. Degree Granting Institutions and Educational Administrators
7. Public and Private Mental Health Agencies
8. CalSWEC
9. National Association of Social Workers, California Chapter (NASW-CA)
10. California Society for Clinical Social Work (CSCSW)

These are all preliminary and we encourage all interested parties as to provide additional sources of information and stakeholders. Staff hopes to identify additional sources of information and input throughout the committee process.

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Demographic Report on Licensees and Registrants -Summary- December 2007

Introduction

In Fall 2006 the Board of Behavioral Sciences (BBS) conducted a demographic survey of its active licensees and registrants. The BBS mailed out approximately 64,000 demographic surveys and received 25,909 responses, a response rate of 40.48%. This is the BBS' first effort at obtaining and analyzing demographic information about its licensee and registrant populations. This report highlights some of the findings of the survey.

Acknowledgements

This report would not be possible without the extraordinary efforts of BBS staff. Many staff members volunteered to work extra hours on weekdays and weekends opening and keying-in survey responses.

Survey Instrument

Approximately 64,000 active licensees and registrants in Fall 2006 received the Demographic Survey. The survey requested respondents answer questions in eight categories.

Table 1. Survey Categories and Possible Responses

1. Race/Ethnicity American Indian or Alaskan Native – Asian - African American - Hispanic/Latino - Pacific Islander - Non-Hispanic White - Other/Multi-race	2. Language Capacity (other than English) Spanish – Chinese – Tagalog – Vietnamese – Korean – Other (Please Specify)
3. Gender Male – Female	4. Professional Data Age – Years in Practice
5. Category of License Marriage and Family Therapist (MFT) – Licensed Clinical Social Worker(LCSW) – Licensed Educational Psychologist (LEP) – Marriage and Family Therapist Intern (IMF) – Associate Clinical Social Worker (ASW)	6. Primary Practice Setting Private Practice – State/Federal Agency – County/Municipal Agency – Nonprofit/Charitable Organization – Licensed Health Care Facility – College or University – School (elementary, etc) – Other (Please Specify)
7. Specialty Certifications Please List	8. Have you ever been a subject matter expert (SME) for the Board? Yes – No

Data Limitations

Several survey categories gave the respondent the option of writing in a response as opposed to selecting from a list of options. Data analysis became difficult in these categories due to the variety of

responses received. These categories include Language Capacity, Primary Practice Setting, and Specialty Certifications.

Language Capacity - The nature of some write-in responses indicated respondents may have misinterpreted the question. For example, some respondents checked "Other" in the language category, writing in "English." However, the question asked the respondent only to indicate language fluency in addition to English. This partly compromised the integrity of responses indicating "Other" in this category. In this report, the category "Other" is left out of the analysis.

Primary Practice Setting – Responses varied greatly in this category among respondents. Some indicated one primary practice setting and others indicated multiple settings. This became problematic for data entry and difficult for analysis.

Specialty Certifications – The variety of responses and confusing acronyms for certifications greatly limited the usefulness of this data. Some respondents also used the space to provide general comments. Information on specialty certifications is omitted from this report.

General Licensee and Registrant Population Characteristics

Table 2. Statistical Breakdown of All Respondents

Race and Ethnicity	
Non-Hispanic White	74.40%
Hispanic Latino	8.38%
Multi Race/Other	6.36%
Asian	4.70%
African American	3.59%
American Indian/Alaska Native	0.78%
Pacific Islander	0.40%
No Response	1.41%
<i>25,548 Responses</i>	

Composition of Respondents	
MFT	49.71%
LCSW	29.16%
IMF	10.08%
ASW	8.43%
LEP	2.27%
No Response	0.35%
<i>25,822 Responses</i>	

Age of Respondents (in years)	
Mean =	51.44
Median =	53
<i>25,216 Responses</i>	

Gender	
Female	78.53%
Male	20.95%
No Response	0.53%
<i>25,775 Responses</i>	

Language Fluency (Excluding English)	
Spanish	11.83%
Chinese	1.21%
Korean	0.42%
Tagalog	0.36%
Vietnamese	0.34%
<i>3,669 Responses</i>	

Primary Practice Setting	
Private Practice	39.49%
Non Profit/Charitable	19.24%
County/Municipal Agency	13.02%
Licensed Health Care Facility	9.36%
Schools	5.19%
State/Federal Agency	3.66%
College or University	2%
No Response	1.95%
Other	6.12%
<i>25,409 Responses</i>	

Respondents' Years in Practice	
Mean =	15.53
Median =	14
<i>23,815 Responses</i>	

Past/Current SMEs	
Yes	2.23%

A statistical breakdown of all responses to the survey indicates several characteristics about the BBS' licensee and registrant population.

Race/Ethnicity Characteristics

The overwhelming majority of the respondents to this survey indicated a race/ethnicity of Non-Hispanic White (74.4%). The general California population is approximately 44.4% Non-Hispanic White.¹ The general California population is much more diverse than the total respondents to this survey.

When broken down by license and registration type, the registration response groups (ASW and IMF) resemble more closely the race/ethnicity of the California population. Of all response groups, the ASW response group most closely resembles the race/ethnicity characteristics of the general California population.

Language Fluency Characteristics

When compared to the general population, total respondents were less capable of speaking a language other than English. Approximately 25.80% of Californians speak fluent Spanish, while only 11.38% of total respondents to this survey can speak the language.² MFTs are the least likely to be able to speak Spanish (8.08%).

Much like race/ethnic diversity, the Spanish speaking abilities of ASW and IMF respondents are much higher (24.3% and 16.43%, respectively) than that of licensees.

Composition of Respondents

Nearly half (49.71%) of all respondents to the survey held an MFT license. As of September 2007, MFTs made up approximately 44% of all active licensees and registrations with the BBS. The composition of the respondents does not exactly reflect that of the current licensee/registrant breakdown.

Table 3. Comparison of Respondents and Active Licensees and Registrants

License/Registration	Survey Respondents	9/2007 Active Licensees/Registrants
MFT	49.71%	44.03%
LCSW	29.16%	25.55%
IMF	10.08%	16.32%
ASW	8.43%	11.43%
LEP	2.27%	2.68%

Primary Practice Setting Characteristics

When considering total respondents, a private practice setting was the most frequently identified primary practice setting (39.49%). When broken out by response group, identifying a private practice setting as their primary practice group was most common amongst MFTs (59.19%). A private practice setting placement also ranked first among LCSW respondents (27.77%). As one might assume, the majority of LEPs (65.03%) identified K-12 schools as their primary practice setting. The most frequently identified primary practice settings for IMFs and ASWs were non-profit/charitable organizations and county/municipal agencies.

Respondent Age Characteristics

The median age of all respondents was 53 years. The median ages of MFTs, LCSWs, and LEPs are clustered near the overall median age (MFT=56 yrs; LCSW=54 yrs; LEP=56 yrs). The median ages of

¹ State of California Department of Finance. (September 2007). California Current Population Survey Report: March 2006. Sacramento, California.

² United States Census Bureau. (2000). United States 2000 Census. Washington DC.

registrant respondents (IMFs and ASWs) are significantly younger. The median age for an IMF respondent was 40 years. ASWs, the youngest of all respondent groups, had a median age of 34 years.

The median age of a respondent category seems to have a correlation to race/ethnic diversity and second language fluency. The youngest response groups are the most racially and ethnically diverse and more apt to possess some second language fluency. This trend is especially apparent in the ASW response group.

Gender Characteristics

Females made up a staggering majority of the respondents. Just 20.95% of all respondents were males as opposed to 78.53% female respondents. This trend of a female dominated licensee population seems to be continuing as females make up an even larger percentage of IMF (82.73%) and ASW (85.77%) respondents.

Years in Practice Characteristics

LCSWs and LEPs indicated the most years in practice each with a median of 20. MFTs ranked third with a median of 15 years in practice. ASW and IMF registrants had significantly fewer years in practice with medians of 4 and 3 respectively.

Table 3. Age Distribution of Respondents

Age	All	MFT	LCSW	LEP	IMF	ASW
20-24	0.18%	0.02%	0.04%	0.00%	0.67%	1.03%
25-29	4.14%	0.83%	1.07%	0.17%	15.64%	21.76%
30-34	7.82%	3.72%	5.63%	4.70%	18.31%	32.57%
35-39	9.00%	6.39%	9.48%	9.76%	15.36%	10.34%
40-44	8.19%	7.03%	9.11%	4.88%	11.03%	9.35%
45-49	10.38%	10.59%	10.82%	10.10%	10.75%	7.28%
50-54	15.18%	16.33%	16.26%	16.90%	12.21%	7.85%
55-59	17.45%	20.34%	18.35%	20.91%	9.57%	5.73%
60-64	14.11%	17.19%	15.18%	16.55%	4.25%	3.20%
65-69	7.33%	9.05%	8.13%	7.84%	1.77%	0.52%
70-74	3.66%	5.15%	3.18%	4.18%	0.35%	0.28%
75-79	1.72%	2.26%	1.75%	2.96%	0.08%	0.09%
80-84	0.65%	0.79%	0.79%	0.87%	0.00%	0.00%
85+	0.21%	0.30%	0.20%	0.17%	0.00%	0.00%

Age Distribution

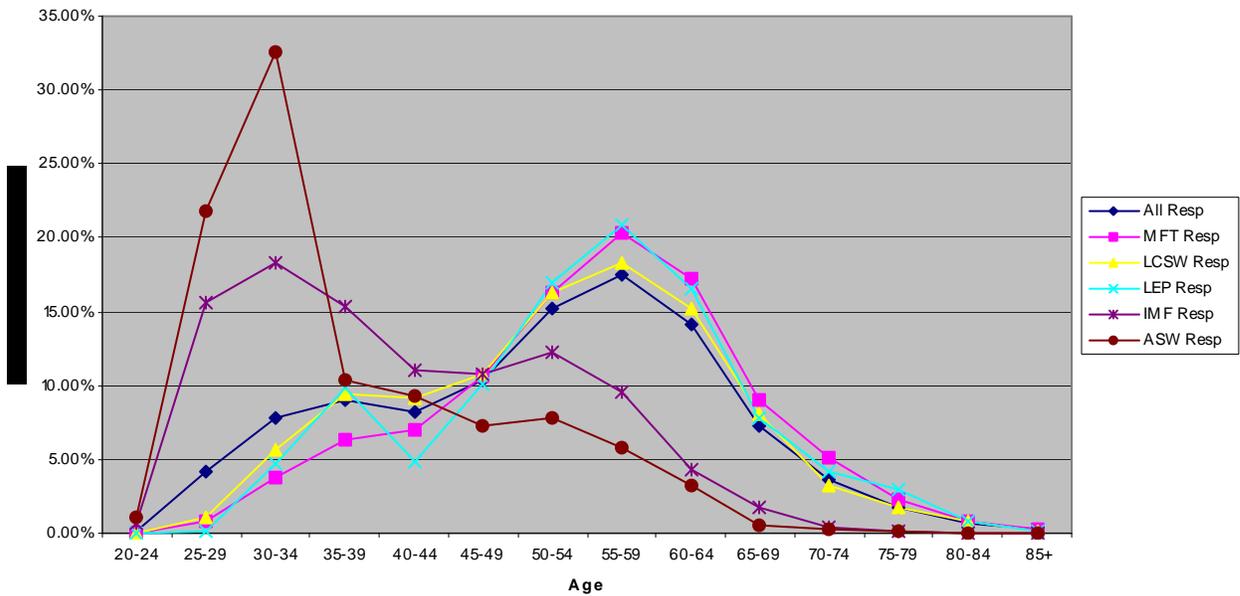


Table 4. Race/Ethnicity Distribution of Respondents and California Population³

Race/Ethnicity	All	CA Population	MFT	LCS	LEP	IMF	ASW
Non-Hispanic White	74.40%	44.40%	81.98%	72.49%	81.49%	61.51%	49.89%
Hispanic Latino	8.38%	34.90%	4.64%	8.96%	4.58%	14.78%	22.01%
Multi Race/Other	6.36%	N/A	6.37%	5.74%	4.58%	8.50%	6.32%
Asian	4.70%	11.90%	2.52%	5.78%	4.41%	6.93%	11.21%
African American	3.59%	6.40%	1.71%	4.65%	2.89%	6.32%	7.92%
American Indian/Alaska Native	0.78%	0.30%	0.71%	0.79%	0.51%	0.77%	1.14%
Pacific Islander	0.40%	1.70%	0.19%	0.45%	0.17%	0.73%	1.05%
No Response	1.41%		1.87%	1.14%	1.36%	0.46%	0.46%

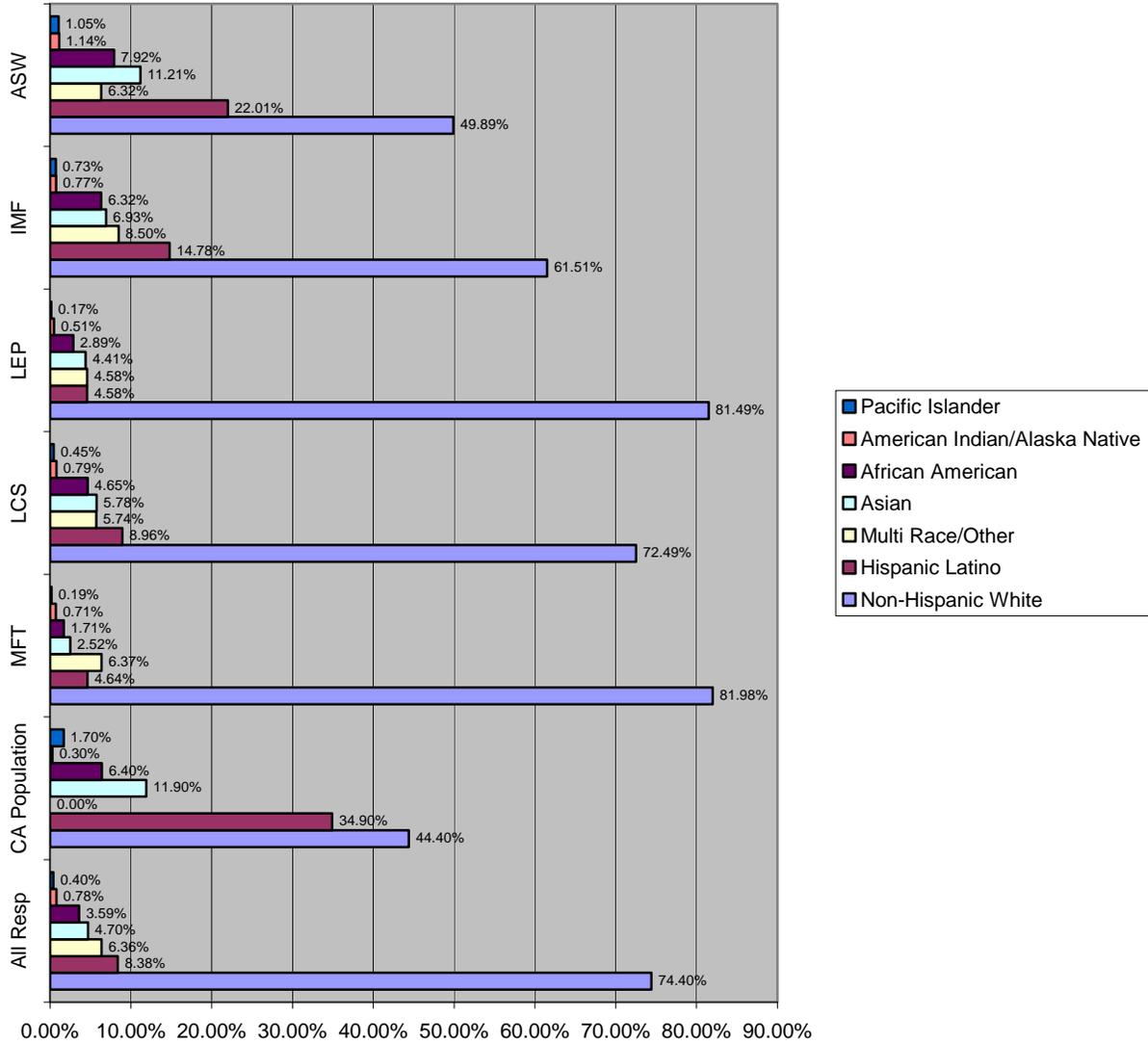
Table 5. Second Language Fluency of Respondents and California Population⁴

Language	All	CA Population	MFT	LCS	LEP	IMF	ASW
Spanish	11.83%	25.80%	8.08%	13.22%	9.51%	16.43%	24.30%
Chinese	1.21%	2.60%	0.64%	1.62%	1.36%	1.38%	2.88%
Korean	0.42%	0.95%	0.26%	0.33%	0.00%	0.65%	1.56%
Tagalog	0.36%	1.99%	0.16%	0.38%	0.00%	1.00%	0.78%
Vietnamese	0.34%	1.30%	0.16%	0.38%	0.17%	0.46%	1.10%

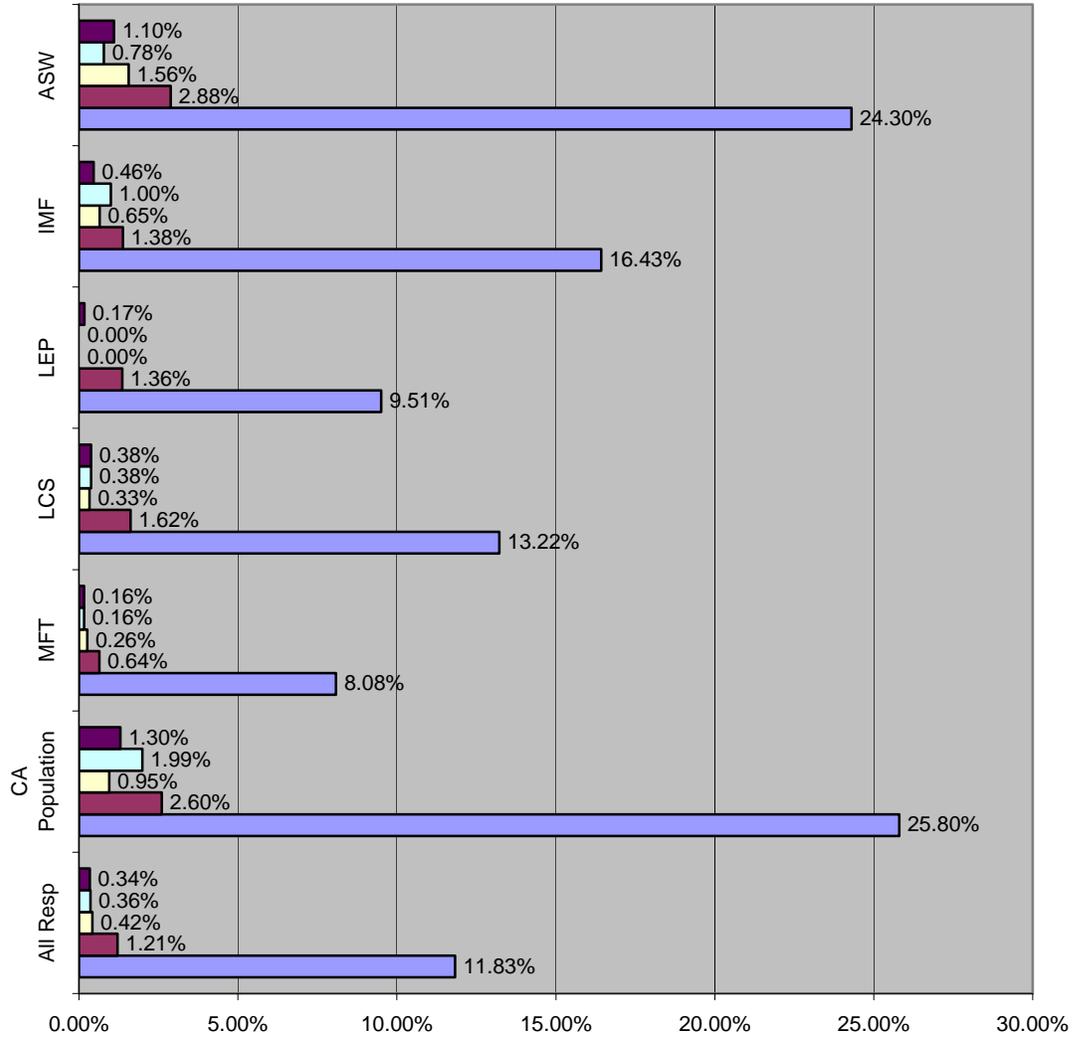
³ State of California Department of Finance. (September 2007). California Current Population Survey Report: March 2006. Sacramento, California.

⁴ United States Census Bureau. (2000). United States 2000 Census. Washington DC.

Race/Ethnicity



Language Fluency (excluding English)





**NEW STATE PROJECTIONS SHOW 25 MILLION MORE CALIFORNIANS BY 2050;
HISPANICS TO BE STATE'S MAJORITY ETHNIC GROUP BY 2042**

FOR IMMEDIATE RELEASE:

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SACRAMENTO – California's population is projected to reach almost 60 million people by 2050, adding over 25 million since the 2000 decennial census, according to long-range population projections released today by the California Department of Finance.

From less than 34 million Californians counted in that census, the new data series shows that the state will pass the 40 million mark in 2012, and exceed 50 million by 2032.

The new projections reveal that Hispanics are now expected to constitute the majority of Californians by 2042. By the middle of the century, the projections show that Hispanics will be 52 percent of the state's population, with Whites comprising 26 percent. Asians are expected to be 13 percent; Blacks, 5 percent; and Multirace persons, 2 percent. Both American Indian and Hawaiian/Pacific Islander groups will each make up less than 1 percent of the state by 2050.

The new projections are also available at the county level. Los Angeles will continue to be California's largest county, topping 13 million by mid-century. With 4.7 million people, Riverside County is expected to be the second largest county at that time, followed by San Diego, with about 4.5 million residents. Orange County will be fourth largest, with slightly under 4 million people.

These rankings are also reflected in counties' numerical change between 2000 and mid-century. Los Angeles County will increase by the greatest amount, adding almost 3.5 million people. Riverside will follow closely, adding almost 3.2 million. San Bernardino's period increment is projected to be 1.9 million, followed by that of San Diego, close to 1.7 million. Four counties – Kern, San Joaquin, Fresno and Orange – will each grow between 1 and 1.5 million people by 2050.

Sutter County is expected to more than triple in size and to experience the greatest percentage increase over the 50-year period – 255 percent. Other counties with notable percentage increases will be Yuba, Madera, Kern, and San Joaquin, demonstrating the shift in growth away from the coast that has been underway for several years. Only one county – Sierra – is expected to have fewer people, around 150 less, in 2050 than in 2000.

By 2050, the new projections indicate that Trinity County will have the highest percentage of Whites of any county, while Imperial County will continue to have the highest percentage of Hispanics. Alameda County will have the highest percentage of Asians; Santa Clara County will have the highest proportion of Pacific Islanders; and San Bernardino will have the largest proportion of Blacks. Finally, Alpine County will contain the largest percentage of American Indians, while Inyo County will continue to have the largest share of Californians identifying

-MORE-

themselves as Multirace persons. At mid-century Whites will be the majority population in just 23 counties. Hispanics are projected to be the majority race/ethnic group in 22 counties.

The Department of Finance uses a baseline cohort-component method to project population by age, gender and race/ethnicity. For this projection series, there are seven mutually exclusive race/ethnic groups: Hispanics and non-Hispanic American Indians, Asians, Blacks, Multirace persons, Pacific Islanders and Whites. A baseline projection assumes people have the right to migrate where they choose and no major natural catastrophes or war will befall the state or the nation. A cohort-component method traces people born in a given year through their lives. As each year passes, cohorts change as specified in the mortality and migration assumptions. New cohorts are formed by applying the fertility assumptions to women of childbearing age.

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NOTE TO EDS: Other population reports are available from the Department's website: <http://www.dof.ca.gov> under Demographic, Economic and Financial Research.

Department of Finance
Demographic Research Unit
Population Projections of California Counties

10 Largest Counties, 2050

Rank 2000	County	Rank 2050
1	Los Angeles	1
6	Riverside	2
3	San Diego	3
2	Orange	4
4	San Bernardino	5
5	Santa Clara	6
8	Sacramento	7
14	Kern	8
7	Alameda	9
10	Fresno	10

10 Fastest Growing Counties Based on Percent Change, 2000-2050

County	Estimated Population, July, 2000	Percent Change, 2000-50
1. Sutter	79,632	255.3
2. Yuba	60,598	232.2
3. Madera	124,696	231.7
4. Kern	665,519	216.4
5. San Joaquin	569,083	213.5
6. Merced	211,481	208.5
7. Riverside	1,559,039	203.5
8. Placer	252,223	197.8
9. Tulare	369,873	177.6
10. Mono	13,013	177.3

10 Fastest Growing Counties Based on Numerical Change, 2000-2050

County	Estimated Population, July, 2000	Numerical Change, 2000-50
1. Los Angeles	9,578,960	3,482,827
2. Riverside	1,559,039	3,171,883
3. San Bernardino	1,721,942	1,940,251
4. San Diego	2,836,303	1,672,425
5. Kern	665,519	1,440,505
6. San Joaquin	569,083	1,214,890
7. Fresno	804,508	1,123,903
8. Orange	2,863,834	1,123,791
9. Sacramento	1,233,575	942,933
10. Santa Clara	1,693,128	931,542

TABLE 1

COUNTY TOTAL POPULATION BY DECADE

	2000	2010	2020	2030	2040	2050
ALAMEDA	1,453,078	1,550,133	1,663,481	1,791,721	1,923,505	2,047,658
ALPINE	1,261	1,369	1,453	1,462	1,411	1,377
AMADOR	35,357	40,337	47,593	54,788	61,550	68,487
BUTTE	204,065	230,116	281,442	334,842	387,743	441,596
CALAVERAS	40,870	47,750	56,318	64,572	72,230	80,424
COLUSA	19,027	23,787	29,588	34,488	38,131	41,662
CONTRA COSTA	956,497	1,075,931	1,237,544	1,422,840	1,609,257	1,812,242
DEL NORTE	27,680	30,983	36,077	42,420	49,029	56,218
EL DORADO	158,621	189,308	221,140	247,570	280,720	314,126
FRESNO	804,508	983,478	1,201,792	1,429,228	1,670,542	1,928,411
GLENN	26,764	30,880	37,959	45,181	54,000	63,586
HUMBOLDT	126,839	134,785	142,167	147,217	150,121	152,333
IMPERIAL	143,763	189,675	239,149	283,693	334,951	387,763
INYO	18,181	19,183	20,495	22,132	23,520	25,112
KERN	665,519	871,728	1,086,113	1,352,627	1,707,239	2,106,024
KINGS	130,202	164,535	205,707	250,516	299,770	352,750
LAKE	58,724	67,530	77,912	87,066	96,885	106,887
LASSEN	34,108	37,918	42,394	47,240	51,596	55,989
LOS ANGELES	9,578,960	10,514,663	11,214,237	11,920,289	12,491,606	13,061,787
MADERA	124,696	162,114	212,874	273,456	344,455	413,569
MARIN	248,449	253,682	260,305	273,151	287,153	307,868
MARIPOSA	17,150	19,108	21,743	23,981	26,169	28,091
MENDOCINO	86,736	93,166	102,017	111,151	121,780	134,358
MERCED	211,481	273,935	348,690	439,905	541,161	652,355
MODOC	9,628	10,809	13,134	16,250	20,064	24,085
MONO	13,013	14,833	18,080	22,894	29,099	36,081
MONTEREY	404,031	433,283	476,642	529,145	584,878	646,590
NAPA	125,146	142,767	165,786	191,734	219,156	251,630
NEVADA	92,532	102,649	114,451	123,940	130,404	136,113
ORANGE	2,863,834	3,227,836	3,520,265	3,705,322	3,849,650	3,987,625
PLACER	252,223	347,543	428,535	512,509	625,964	751,208
PLUMAS	20,868	21,824	22,934	24,530	26,279	28,478
RIVERSIDE	1,559,039	2,239,053	2,904,848	3,507,498	4,103,182	4,730,922
SACRAMENTO	1,233,575	1,451,866	1,622,306	1,803,872	1,989,221	2,176,508
SAN BENITO	53,927	64,230	83,792	103,340	123,406	145,570
SAN BERNARDINO	1,721,942	2,177,596	2,581,371	2,958,939	3,309,292	3,662,193
SAN DIEGO	2,836,303	3,199,706	3,550,714	3,950,757	4,241,399	4,508,728
SAN FRANCISCO	781,209	818,163	844,466	854,675	858,532	854,852
SAN JOAQUIN	569,083	741,417	965,094	1,205,198	1,477,473	1,783,973
SAN LUIS OBISPO	248,322	269,734	293,540	316,613	338,760	364,748
SAN MATEO	711,031	736,667	761,455	786,069	807,587	819,125
SANTA BARBARA	401,115	434,497	459,498	484,570	509,920	534,447
SANTA CLARA	1,693,128	1,837,361	1,992,805	2,192,501	2,412,411	2,624,670
SANTA CRUZ	256,695	268,016	287,480	304,465	318,413	333,083
SHASTA	164,794	191,722	224,386	260,179	295,281	331,724
SIERRA	3,701	3,628	3,508	3,290	3,356	3,547
SISKIYOU	44,634	47,109	51,283	55,727	60,656	66,588
SOLANO	396,995	441,061	503,248	590,166	697,206	815,524
SONOMA	461,618	495,412	546,151	606,346	676,179	761,177
STANISLAUS	451,190	559,708	699,144	857,893	1,014,365	1,191,344
SUTTER	79,632	102,326	141,159	182,401	229,620	282,894
TEHAMA	56,130	65,593	79,484	93,477	108,345	124,475
TRINITY	13,155	15,172	18,236	22,136	26,030	30,209
TULARE	369,873	466,893	599,117	742,969	879,480	1,026,755
TUOLUMNE	54,863	58,721	64,161	67,510	70,325	73,291
VENTURA	758,884	855,876	956,392	1,049,758	1,135,684	1,229,737
YOLO	170,190	206,100	245,052	275,360	301,934	327,982
YUBA	60,598	80,411	109,216	137,322	168,040	201,327
CALIFORNIA	34,105,437	39,135,676	44,135,923	49,240,891	54,226,115	59,507,876

Table 2

YEAR 2000 COUNTY POPULATION BY RACE

County	TOTAL	White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	1,453,078	607,009	275,632	299,159	9,228	215,010	5,513	41,527
ALPINE	1,261	901	101	4	1	7	205	42
AMADOR	35,357	29,334	3,089	318	31	1,434	576	575
BUTTE	204,065	164,452	21,363	7,046	299	2,775	3,404	4,726
CALAVERAS	40,870	35,857	2,788	342	40	327	630	886
COLUSA	19,027	9,198	8,829	256	81	98	334	231
CONTRA COSTA	956,497	561,414	169,083	105,643	3,392	88,567	3,768	24,630
DEL NORTE	27,680	19,456	3,847	656	18	1,198	1,631	874
EL DORADO	158,621	135,355	14,787	3,340	183	776	1,306	2,874
FRESNO	804,508	324,947	353,921	66,240	711	41,134	6,423	11,132
GLENN	26,764	16,924	7,879	918	23	130	464	426
HUMBOLDT	126,839	104,562	8,053	2,095	238	1,075	6,793	4,023
IMPERIAL	143,763	28,965	104,267	2,662	84	5,214	1,817	754
INYO	18,181	13,594	2,275	178	18	20	1,701	395
KERN	665,519	332,431	255,578	22,184	759	38,401	6,074	10,092
KINGS	130,202	55,387	56,738	3,980	217	10,551	1,337	1,992
LAKE	58,724	47,476	6,679	502	90	1,242	1,457	1,278
LASSEN	34,108	24,309	4,696	280	150	3,110	988	575
LOS ANGELES	9,578,960	3,045,819	4,273,914	1,165,096	24,489	910,077	27,187	132,378
MADERA	124,696	59,198	55,213	1,595	178	4,843	1,746	1,923
MARIN	248,449	196,567	27,508	11,384	362	7,173	654	4,801
MARIPOSA	17,150	14,514	1,350	143	22	121	560	440
MENDOCINO	86,736	65,409	14,261	1,043	119	491	3,482	1,931
MERCED	211,481	88,105	95,961	14,738	307	7,718	1,177	3,475
MODOC	9,628	7,819	1,103	62	7	65	358	214
MONO	13,013	10,015	2,295	155	10	67	277	194
MONTEREY	404,031	165,285	188,989	23,743	1,652	14,358	1,847	8,157
NAPA	125,146	87,206	29,573	3,734	269	1,570	671	2,123
NEVADA	92,532	83,928	5,225	740	74	254	698	1,613
ORANGE	2,863,834	1,472,752	886,127	398,109	8,618	43,532	8,992	45,704
PLACER	252,223	211,482	24,399	7,439	351	1,956	1,713	4,883
PLUMAS	20,868	18,494	1,202	118	22	143	468	421
RIVERSIDE	1,559,039	801,110	566,592	57,464	3,436	94,534	10,405	25,498
SACRAMENTO	1,233,575	721,885	197,578	137,630	7,485	120,446	9,363	39,188
SAN BENITO	53,927	25,198	25,825	1,230	78	506	296	794
SAN BERNARDINO	1,721,942	763,664	678,020	81,589	4,607	153,650	10,249	30,163
SAN DIEGO	2,836,303	1,578,308	757,055	251,447	12,517	159,068	15,713	62,195
SAN FRANCISCO	781,209	347,117	110,217	241,821	3,680	59,809	2,110	16,455
SAN JOAQUIN	569,083	274,249	173,707	65,374	1,744	36,855	3,670	13,484
SAN LUIS OBISPO	248,322	190,264	40,525	6,544	251	4,810	1,541	4,387
SAN MATEO	711,031	360,423	155,505	142,989	9,853	24,288	1,605	16,368
SANTA BARBARA	401,115	229,881	137,184	16,131	623	8,520	2,198	6,578
SANTA CLARA	1,693,128	761,619	405,854	434,437	5,345	45,712	5,487	34,674
SANTA CRUZ	256,695	170,221	68,816	8,676	336	2,246	1,266	5,134
SHASTA	164,794	142,971	9,090	3,143	165	1,208	4,106	4,111
SIERRA	3,701	3,334	227	6	3	6	62	63
SISKIYOU	44,634	37,271	3,368	556	53	583	1,634	1,169
SOLANO	396,995	197,819	70,088	50,411	3,007	58,383	2,274	15,013
SONOMA	461,618	346,634	80,028	14,404	884	6,376	3,613	9,679
STANISLAUS	451,190	263,160	143,132	19,531	1,582	10,863	3,627	9,295
SUTTER	79,632	48,265	17,666	9,384	156	1,451	972	1,738
TEHAMA	56,130	44,260	8,842	453	54	304	1,032	1,185
TRINITY	13,155	11,369	533	73	16	62	609	493
TULARE	369,873	157,347	187,732	11,927	275	5,248	3,136	4,208
TUOLUMNE	54,863	46,773	4,476	397	87	1,157	893	1,080
VENTURA	758,884	433,052	254,062	40,751	1,442	13,681	3,344	12,552
YOLO	170,190	100,114	44,083	17,044	525	3,252	1,200	3,972
YUBA	60,598	39,862	10,537	4,680	108	1,826	1,340	2,245
CALIFORNIA	34,105,437	16,134,334	11,057,467	3,761,994	110,355	2,218,281	185,996	637,010

Table 2 continued

YEAR 2010 COUNTY POPULATION BY RACE

County	TOTAL	White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	1,550,133	554,155	364,470	376,874	11,539	185,484	7,935	49,676
ALPINE	1,369	944	122	4	1	7	236	55
AMADOR	40,337	32,410	4,676	374	31	1,467	619	760
BUTTE	230,116	178,452	31,448	7,037	329	3,057	4,345	5,448
CALAVERAS	47,750	39,684	5,284	368	48	341	681	1,344
COLUSA	23,787	10,382	12,171	331	97	108	382	316
CONTRA COSTA	1,075,931	563,060	254,818	137,229	5,356	87,727	5,045	22,696
DEL NORTE	30,983	20,809	5,099	751	18	1,249	2,043	1,014
EL DORADO	189,308	158,918	21,116	3,717	207	836	1,355	3,159
FRESNO	983,478	331,144	492,449	92,099	802	46,797	8,412	11,775
GLENN	30,880	18,235	10,322	1,057	23	152	512	579
HUMBOLDT	134,785	107,867	10,426	2,348	286	1,164	8,148	4,546
IMPERIAL	189,675	28,322	146,600	4,738	102	6,511	2,412	990
INYO	19,183	13,859	2,495	208	18	62	1,908	633
KERN	871,728	377,280	393,612	32,619	871	48,703	7,162	11,481
KINGS	164,535	64,833	78,139	4,448	265	13,213	1,470	2,167
LAKE	67,530	51,255	10,878	554	100	1,239	1,737	1,767
LASSEN	37,918	27,104	5,259	326	175	3,199	1,053	802
LOS ANGELES	10,514,663	2,913,695	5,079,973	1,397,967	29,522	877,423	31,089	184,994
MADERA	162,114	72,080	78,295	1,799	186	4,402	2,494	2,858
MARIN	253,682	181,215	47,170	11,037	402	7,740	683	5,435
MARIPOSA	19,108	16,190	1,458	159	22	122	615	542
MENDOCINO	93,166	64,203	19,197	1,121	128	522	5,861	2,134
MERCED	273,935	91,799	153,698	15,949	350	6,920	1,232	3,987
MODOC	10,809	8,889	1,136	62	7	65	384	266
MONO	14,833	9,682	4,348	175	10	69	303	246
MONTEREY	433,283	135,006	246,849	26,735	1,877	10,955	1,978	9,883
NAPA	142,767	83,009	46,599	7,856	301	1,707	697	2,598
NEVADA	102,649	92,157	6,631	804	74	267	729	1,987
ORANGE	3,227,836	1,419,887	1,158,270	517,787	11,883	44,873	12,880	62,256
PLACER	347,543	271,819	46,983	17,109	393	2,154	1,899	7,186
PLUMAS	21,824	19,104	1,383	136	22	149	517	513
RIVERSIDE	2,239,053	1,007,513	937,246	102,074	3,989	139,214	11,987	37,030
SACRAMENTO	1,451,866	746,974	297,898	183,156	13,238	136,147	10,489	63,964
SAN BENITO	64,230	22,817	37,905	1,582	78	587	315	946
SAN BERNARDINO	2,177,596	770,147	1,012,839	117,205	5,564	213,642	13,776	44,423
SAN DIEGO	3,199,706	1,700,006	941,997	306,194	18,014	136,769	28,776	67,950
SAN FRANCISCO	818,163	371,040	110,072	254,228	4,268	53,759	2,858	21,938
SAN JOAQUIN	741,417	293,928	265,001	107,303	2,068	51,277	4,838	17,002
SAN LUIS OBISPO	269,734	191,905	58,135	7,856	277	4,919	1,617	5,025
SAN MATEO	736,667	313,992	188,420	177,034	10,510	26,848	1,838	18,025
SANTA BARBARA	434,497	232,815	161,719	18,793	695	11,356	2,648	6,471
SANTA CLARA	1,837,361	744,753	475,255	500,916	15,733	47,092	8,517	45,095
SANTA CRUZ	268,016	149,546	95,178	13,491	368	2,715	1,528	5,190
SHASTA	191,722	162,541	11,608	5,727	191	1,421	4,896	5,338
SIERRA	3,628	3,232	251	6	3	6	62	68
SISKIYOU	47,109	37,989	4,314	633	59	622	1,860	1,632
SOLANO	441,061	198,512	96,228	67,734	3,526	51,289	3,029	20,743
SONOMA	495,412	326,723	120,241	23,359	966	7,897	4,953	11,273
STANISLAUS	559,708	267,271	234,342	27,182	1,877	14,007	4,653	10,376
SUTTER	102,326	53,117	31,683	13,028	181	1,582	1,024	1,711
TEHAMA	65,593	48,176	13,778	485	54	333	1,145	1,622
TRINITY	15,172	13,151	602	79	16	62	659	603
TULARE	466,893	167,520	268,343	16,326	306	4,964	4,226	5,208
TUOLUMNE	58,721	48,463	6,246	433	87	1,162	950	1,380
VENTURA	855,876	453,905	318,479	47,747	1,601	13,710	3,954	16,480
YOLO	206,100	108,101	62,790	22,385	615	5,020	1,453	5,736
YUBA	80,411	47,199	20,873	5,271	149	2,106	1,854	2,959
CALIFORNIA	39,135,676	16,438,784	14,512,817	4,684,005	149,878	2,287,190	240,721	822,281

Table 2 continued

County	TOTAL	YEAR 2020 COUNTY POPULATION BY RACE						
		White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	1,663,481	506,702	463,001	446,882	14,309	169,536	10,691	52,360
ALPINE	1,453	969	142	4	1	7	275	55
AMADOR	47,593	36,843	7,122	461	31	1,513	690	933
BUTTE	281,442	209,497	47,868	7,754	365	3,327	6,092	6,539
CALAVERAS	56,318	43,695	8,754	406	56	363	749	2,295
COLUSA	29,588	12,132	15,953	435	99	129	451	389
CONTRA COSTA	1,237,544	564,682	364,825	177,600	8,306	90,765	6,554	24,812
DEL NORTE	36,077	22,752	6,862	906	18	1,711	2,587	1,241
EL DORADO	221,140	182,022	28,648	4,065	227	923	1,430	3,825
FRESNO	1,201,792	342,241	56,149	10,730	125,340	915	653,416	13,001
GLENN	37,959	21,250	13,720	1,339	23	178	706	743
HUMBOLDT	142,167	110,299	12,721	2,630	326	1,272	9,542	5,377
IMPERIAL	239,149	27,634	192,071	7,074	122	8,147	2,984	1,117
INYO	20,495	14,312	2,866	251	18	62	2,115	871
KERN	1,086,113	424,169	535,612	42,178	1,019	62,233	8,069	12,833
KINGS	205,707	75,001	103,787	4,993	325	17,453	1,635	2,513
LAKE	77,912	55,126	16,330	608	102	1,271	2,143	2,332
LASSEN	42,394	30,342	5,913	379	204	3,415	1,136	1,005
LOS ANGELES	11,214,237	2,622,397	5,905,060	1,582,652	34,636	822,305	34,640	212,547
MADERA	212,874	92,218	107,180	1,953	188	4,451	3,532	3,352
MARIN	260,305	163,149	71,141	10,635	435	8,110	707	6,128
MARIPOSA	21,743	18,487	1,609	178	22	122	707	618
MENDOCINO	102,017	63,535	24,845	1,238	148	564	9,156	2,531
MERCED	348,690	97,109	220,060	18,055	395	7,009	1,306	4,756
MODOC	13,134	11,003	1,297	62	7	65	396	304
MONO	18,080	9,397	7,805	195	10	69	338	266
MONTEREY	476,642	115,953	306,006	29,606	2,139	9,763	2,112	11,063
NAPA	165,786	80,342	67,193	12,419	334	1,808	728	2,962
NEVADA	114,451	101,965	8,229	869	74	286	767	2,261
ORANGE	3,520,265	1,294,712	1,465,316	616,929	15,009	43,893	13,873	70,533
PLACER	428,535	316,683	72,787	25,201	437	2,402	2,007	9,018
PLUMAS	22,934	19,766	1,654	156	22	166	581	589
RIVERSIDE	2,904,848	1,166,730	1,343,019	156,097	4,635	173,095	15,956	45,316
SACRAMENTO	1,622,306	764,684	374,677	217,548	17,307	155,677	11,161	81,252
SAN BENITO	83,792	22,270	57,302	1,922	77	737	416	1,068
SAN BERNARDINO	2,581,371	750,474	1,326,650	150,301	6,709	275,959	16,147	55,131
SAN DIEGO	3,550,714	1,793,884	1,125,754	360,288	25,516	129,758	40,845	74,669
SAN FRANCISCO	844,466	395,115	108,254	258,475	4,801	50,409	3,598	23,814
SAN JOAQUIN	965,094	322,204	380,092	163,056	2,442	71,438	6,388	19,474
SAN LUIS OBISPO	293,540	193,171	78,637	9,126	312	4,976	1,677	5,641
SAN MATEO	761,455	280,023	220,258	197,659	11,642	30,463	2,351	19,059
SANTA BARBARA	459,498	230,443	181,923	20,752	794	15,061	3,159	7,366
SANTA CLARA	1,992,805	738,743	560,058	548,927	30,498	47,586	12,589	54,404
SANTA CRUZ	287,480	139,942	119,705	16,501	407	3,228	2,042	5,655
SHASTA	224,386	186,944	14,480	8,990	231	1,726	5,994	6,021
SIERRA	3,508	3,075	270	6	3	6	80	68
SISKIYOU	51,283	40,150	5,463	782	59	665	2,166	1,998
SOLANO	503,248	200,362	129,209	92,716	4,124	47,431	4,452	24,954
SONOMA	546,151	313,493	168,306	34,144	1,060	10,345	6,375	12,428
STANISLAUS	699,144	275,186	348,466	36,225	2,170	19,540	5,891	11,666
SUTTER	141,159	62,101	55,551	18,480	218	1,730	1,100	1,979
TEHAMA	79,484	54,447	20,812	558	54	386	1,347	1,880
TRINITY	18,236	15,900	748	99	16	62	714	697
TULARE	599,117	183,761	374,740	23,047	366	5,436	5,771	5,996
TUOLUMNE	64,161	50,933	8,860	471	87	1,181	1,040	1,589
VENTURA	956,392	463,526	399,846	53,525	1,819	14,074	4,435	19,167
YOLO	245,052	116,259	83,049	28,187	699	7,611	1,731	7,516
YUBA	109,216	58,579	35,345	6,448	208	2,412	2,745	3,479
CALIFORNIA	44,135,923	16,508,783	18,261,267	5,527,783	196,576	2,390,459	299,599	951,456

Table 2 continued

County	TOTAL	YEAR 2030 COUNTY POPULATION BY RACE						
		White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	1,791,721	453,896	570,180	522,885	17,148	157,712	13,657	56,243
ALPINE	1,462	919	164	4	1	7	308	59
AMADOR	54,788	40,991	9,856	522	28	1,553	728	1,110
BUTTE	334,842	241,418	66,258	7,997	385	3,450	7,642	7,692
CALAVERAS	64,572	46,791	12,744	428	60	361	791	3,397
COLUSA	34,488	13,426	19,375	467	104	142	505	469
CONTRA COSTA	1,422,840	559,773	502,219	220,855	11,464	91,863	8,049	28,617
DEL NORTE	42,420	24,873	8,809	1,036	18	2,272	3,818	1,594
EL DORADO	247,570	200,194	35,995	4,217	247	968	1,416	4,533
FRESNO	1,429,228	349,834	824,824	158,969	982	65,989	12,880	15,750
GLENN	45,181	24,267	17,270	1,603	23	196	899	923
HUMBOLDT	147,217	111,020	14,650	2,802	360	1,326	10,664	6,395
IMPERIAL	283,693	25,533	234,445	9,392	142	9,608	3,321	1,252
INYO	22,132	15,002	3,340	278	18	62	2,204	1,228
KERN	1,352,627	477,348	719,004	53,871	1,131	77,216	8,966	15,091
KINGS	250,516	85,464	132,613	5,310	393	21,970	1,735	3,031
LAKE	87,066	57,244	22,255	641	100	1,297	2,462	3,067
LASSEN	47,240	33,885	6,612	418	229	3,707	1,170	1,219
LOS ANGELES	11,920,289	2,299,502	6,793,557	1,759,129	39,221	749,018	36,044	243,818
MADERA	273,456	116,312	141,680	2,063	185	4,445	4,745	4,026
MARIN	273,151	144,597	101,974	9,879	465	8,463	715	7,058
MARIPOSA	23,981	20,499	1,709	191	22	116	750	694
MENDOCINO	111,151	61,820	31,079	1,278	165	592	13,205	3,012
MERCED	439,905	101,543	304,592	19,191	427	6,984	1,321	5,847
MODOC	16,250	13,959	1,425	56	7	65	399	339
MONO	22,894	8,858	13,106	211	10	69	342	298
MONTEREY	529,145	96,630	374,591	31,550	2,322	9,468	2,166	12,418
NAPA	191,734	77,037	91,896	16,591	349	1,774	730	3,357
NEVADA	123,940	109,655	9,748	899	74	285	766	2,513
ORANGE	3,705,322	1,107,029	1,765,105	679,650	17,048	40,410	15,423	80,657
PLACER	512,509	356,274	106,391	33,487	471	2,498	1,982	11,406
PLUMAS	24,530	21,048	1,849	166	22	173	618	654
RIVERSIDE	3,507,498	1,280,673	1,739,015	206,889	5,057	202,486	18,650	54,728
SACRAMENTO	1,803,872	775,149	461,534	254,563	21,844	174,612	11,888	104,282
SAN BENITO	103,340	21,676	76,952	2,077	75	870	479	1,211
SAN BERNARDINO	2,958,939	731,650	1,606,190	189,153	7,595	337,664	17,928	68,759
SAN DIEGO	3,950,757	1,914,728	1,323,945	413,568	35,316	126,026	50,435	86,739
SAN FRANCISCO	854,675	411,210	105,883	255,910	5,152	46,629	4,129	25,762
SAN JOAQUIN	1,205,198	344,521	512,851	222,367	2,762	92,114	7,520	23,063
SAN LUIS OBISPO	316,613	189,398	103,564	10,487	330	4,958	1,640	6,236
SAN MATEO	786,069	247,584	252,514	215,191	12,533	33,807	2,896	21,544
SANTA BARBARA	484,570	227,501	202,141	22,890	870	19,128	3,561	8,479
SANTA CLARA	2,192,501	742,591	672,298	594,866	48,166	47,096	17,407	70,077
SANTA CRUZ	304,465	125,449	146,486	19,663	420	3,714	2,532	6,201
SHASTA	260,179	214,193	17,539	12,599	267	1,964	6,910	6,707
SIERRA	3,290	2,844	282	6	3	6	83	66
SISKIYOU	55,727	42,545	6,663	875	59	658	2,438	2,489
SOLANO	590,166	197,299	180,714	125,745	4,967	45,478	5,920	30,043
SONOMA	606,346	296,558	228,740	45,718	1,119	12,922	7,533	13,756
STANISLAUS	857,893	277,938	488,869	43,860	2,415	25,200	6,850	12,761
SUTTER	182,401	69,716	83,411	23,748	250	1,784	1,232	2,260
TEHAMA	93,477	60,467	28,291	609	51	417	1,482	2,160
TRINITY	22,136	19,511	891	109	16	62	757	790
TULARE	742,969	198,978	494,211	29,774	403	5,639	7,109	6,855
TUOLUMNE	67,510	51,596	11,290	497	87	1,186	1,083	1,771
VENTURA	1,049,758	448,196	501,082	57,947	1,942	13,944	4,453	22,194
YOLO	275,360	119,733	100,893	32,379	768	10,414	1,814	9,359
YUBA	137,322	69,307	50,331	7,193	275	2,640	3,499	4,077
CALIFORNIA	49,240,891	16,377,652	22,335,895	6,334,719	246,363	2,475,477	350,649	1,120,136

Table 2 continued

County	TOTAL	YEAR 2040 COUNTY POPULATION BY RACE						
		White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	1,923,505	389,410	684,656	603,932	20,337	149,702	16,094	59,374
ALPINE	1,411	807	183	4	1	7	340	69
AMADOR	61,550	44,274	12,983	642	27	1,587	753	1,284
BUTTE	387,743	271,829	86,052	8,035	414	3,493	9,138	8,782
CALAVERAS	72,230	48,836	17,187	427	71	350	815	4,544
COLUSA	38,131	13,965	22,335	482	104	157	547	541
CONTRA COSTA	1,609,257	544,294	653,300	263,705	14,764	91,504	9,596	32,094
DEL NORTE	49,029	27,101	11,075	1,128	18	2,912	4,847	1,948
EL DORADO	280,720	222,930	45,795	4,286	261	986	1,323	5,139
FRESNO	1,670,542	354,632	1,008,594	195,597	1,047	76,974	15,104	18,594
GLENN	54,000	27,940	21,530	1,968	23	226	1,181	1,132
HUMBOLDT	150,121	110,143	16,436	2,817	394	1,330	11,672	7,329
IMPERIAL	334,951	24,474	281,629	11,914	156	11,598	3,804	1,376
INYO	23,520	15,447	3,802	315	18	62	2,240	1,636
KERN	1,707,239	557,689	956,455	69,149	1,246	94,959	10,214	17,527
KINGS	299,770	95,434	166,164	5,581	465	26,793	1,775	3,558
LAKE	96,885	57,996	29,963	665	97	1,363	2,860	3,941
LASSEN	51,596	37,071	4,047	1,155	469	250	7,157	1,447
LOS ANGELES	12,491,606	1,942,971	7,590,206	1,939,327	44,216	666,203	36,884	271,799
MADERA	344,455	145,614	180,919	2,241	180	4,453	6,218	4,830
MARIN	287,153	121,860	138,593	8,829	495	8,967	688	7,721
MARIPOSA	26,169	22,554	1,734	196	22	116	786	761
MENDOCINO	121,780	59,811	38,332	1,222	172	607	18,198	3,438
MERCED	541,161	105,853	399,711	19,825	471	7,235	1,256	6,810
MODOC	20,064	17,663	1,525	51	7	62	396	360
MONO	29,099	8,436	19,705	223	10	67	346	312
MONTEREY	584,878	78,284	445,710	33,507	2,447	9,469	2,096	13,365
NAPA	219,156	72,286	120,023	20,427	359	1,702	700	3,659
NEVADA	130,404	114,310	11,439	887	73	273	735	2,687
ORANGE	3,849,650	886,933	2,072,192	731,595	17,776	35,518	16,587	89,049
PLACER	625,964	409,357	153,126	44,936	510	2,507	1,845	13,683
PLUMAS	26,279	22,502	2,044	173	19	182	652	707
RIVERSIDE	4,103,182	1,402,299	2,126,348	255,773	5,323	229,565	20,814	63,060
SACRAMENTO	1,989,221	773,690	556,885	294,582	27,126	195,223	12,682	129,033
SAN BENITO	123,406	20,487	97,834	2,173	75	984	532	1,321
SAN BERNARDINO	3,309,292	698,945	1,866,013	228,503	8,457	406,150	19,125	82,099
SAN DIEGO	4,241,399	1,948,533	1,524,985	444,614	40,614	128,679	56,551	97,423
SAN FRANCISCO	858,532	428,211	98,566	251,546	5,314	42,740	4,584	27,571
SAN JOAQUIN	1,477,473	362,575	669,017	291,335	3,039	115,585	8,630	27,292
SAN LUIS OBISPO	338,760	181,682	132,139	11,865	340	4,815	1,497	6,422
SAN MATEO	807,587	215,332	282,503	231,417	13,431	36,538	3,442	24,924
SANTA BARBARA	509,920	220,894	225,601	25,187	919	23,691	4,075	9,553
SANTA CLARA	2,412,411	747,242	802,507	636,164	68,826	45,883	22,911	88,878
SANTA CRUZ	318,413	107,515	173,878	23,020	428	4,201	2,921	6,450
SHASTA	295,281	240,225	20,977	16,521	309	2,217	7,802	7,230
SIERRA	3,356	2,834	365	6	3	6	81	61
SISKIYOU	60,656	45,368	7,959	967	58	651	2,700	2,953
SOLANO	697,206	190,033	246,864	165,590	6,101	45,469	7,333	35,816
SONOMA	676,179	275,132	301,719	58,774	1,162	15,754	8,734	14,904
STANISLAUS	1,014,365	274,878	635,146	48,890	2,611	30,524	7,342	14,974
SUTTER	229,620	77,220	117,174	29,288	291	1,757	1,348	2,542
TEHAMA	108,345	66,565	36,697	624	46	441	1,587	2,385
TRINITY	26,030	23,176	1,029	112	16	62	757	878
TULARE	879,480	210,227	611,441	36,026	439	5,887	7,936	7,524
TUOLUMNE	70,325	51,112	14,466	496	87	1,160	1,071	1,933
VENTURA	1,135,684	415,640	614,669	60,862	2,011	13,549	4,291	24,662
YOLO	301,934	120,842	118,310	35,792	840	13,498	1,794	10,858
YUBA	168,040	80,491	67,775	7,822	362	2,806	4,206	4,578
CALIFORNIA	54,266,115	16,033,854	26,551,422	7,132,504	294,678	2,573,246	395,591	1,284,820

Table 2 continued

County	TOTAL	YEAR 2050 COUNTY POPULATION BY RACE						
		White	Hispanic	Asian	Pacific Islander	Black	American Indian	Multirace
ALAMEDA	2,047,658	324,681	800,205	680,019	23,613	141,409	18,366	59,365
ALPINE	1,377	731	200	4	1	7	365	69
AMADOR	68,487	47,369	16,525	758	27	1,616	743	1,449
BUTTE	441,596	302,148	107,237	7,890	417	3,533	10,584	9,787
CALAVERAS	80,424	50,896	22,163	424	68	338	795	5,740
COLUSA	41,662	14,477	25,225	498	94	177	581	610
CONTRA COSTA	1,812,242	533,120	817,824	306,521	18,328	90,928	11,118	34,403
DEL NORTE	56,218	29,512	13,594	1,229	16	3,620	5,929	2,318
EL DORADO	314,126	244,765	56,785	4,436	264	967	1,226	5,683
FRESNO	1,928,411	361,135	1,202,527	236,125	1,078	88,780	17,317	21,449
GLENN	63,586	31,825	26,267	2,375	23	261	1,465	1,370
HUMBOLDT	152,333	109,156	18,060	2,768	417	1,260	12,591	8,081
IMPERIAL	387,763	23,717	329,937	14,512	174	13,747	4,219	1,457
INYO	25,112	16,083	4,270	340	18	62	2,222	2,117
KERN	2,106,024	649,336	1,224,553	85,239	1,311	114,193	11,412	19,980
KINGS	352,750	105,544	203,230	5,848	537	31,836	1,738	4,017
LAKE	106,887	57,796	38,616	667	90	1,474	3,290	4,954
LASSEN	55,989	40,347	7,678	506	269	4,448	1,079	1,662
LOS ANGELES	13,061,787	1,587,993	8,405,036	2,109,318	49,101	583,499	37,316	289,524
MADERA	413,569	172,882	220,526	2,415	166	4,492	7,597	5,491
MARIN	307,868	100,516	181,087	7,584	496	9,554	606	8,025
MARIPOSA	28,091	24,395	1,733	197	22	110	808	826
MENDOCINO	134,358	58,731	46,285	1,153	181	605	23,538	3,865
MERCED	652,355	110,638	504,675	20,379	501	7,347	1,137	7,678
MODOC	24,085	21,611	1,583	45	7	60	388	391
MONO	36,081	8,010	27,107	234	10	59	339	322
MONTEREY	646,590	61,880	521,739	35,310	2,449	9,339	2,036	13,837
NAPA	251,630	68,356	152,455	24,352	364	1,647	643	3,813
NEVADA	136,113	118,200	13,346	844	62	253	674	2,734
ORANGE	3,987,625	665,410	2,388,961	773,427	18,217	30,251	17,579	93,780
PLACER	751,208	462,590	210,966	56,882	528	2,588	1,681	15,973
PLUMAS	28,478	24,467	2,206	178	16	197	663	751
RIVERSIDE	4,730,922	1,534,008	2,539,077	301,820	5,530	257,866	22,756	69,865
SACRAMENTO	2,176,508	769,393	656,330	334,936	32,610	216,565	13,335	153,339
SAN BENITO	145,570	19,620	120,679	2,178	71	1,056	573	1,393
SAN BERNARDINO	3,662,193	667,104	2,121,682	268,368	9,412	480,293	20,126	95,208
SAN DIEGO	4,508,728	1,971,741	1,724,513	469,980	45,687	130,686	61,950	104,171
SAN FRANCISCO	854,852	445,753	87,335	244,313	5,381	38,958	4,934	28,178
SAN JOAQUIN	1,783,973	381,757	848,850	368,075	3,190	140,946	9,722	31,433
SAN LUIS OBISPO	364,748	174,210	164,470	13,217	345	4,712	1,323	6,471
SAN MATEO	819,125	181,005	309,348	244,287	14,353	39,283	3,992	26,857
SANTA BARBARA	534,447	213,530	249,113	27,478	965	28,422	4,613	10,326
SANTA CLARA	2,624,670	747,511	948,986	660,427	90,527	44,339	28,365	104,515
SANTA CRUZ	333,083	90,062	201,928	26,262	427	4,790	3,178	6,436
SHASTA	331,724	267,254	24,653	20,588	348	2,474	8,717	7,690
SIERRA	3,547	2,921	464	6	3	6	89	58
SISKIYOU	66,588	49,039	9,458	1,058	58	642	2,999	3,334
SOLANO	815,524	183,242	320,860	208,049	7,364	45,837	8,764	41,408
SONOMA	761,177	257,437	385,807	72,465	1,126	18,809	9,882	15,651
STANISLAUS	1,191,344	271,002	803,184	53,515	2,654	36,122	7,787	17,080
SUTTER	282,894	84,884	156,830	34,969	318	1,711	1,436	2,746
TEHAMA	124,475	72,946	46,156	635	44	467	1,665	2,562
TRINITY	30,209	27,149	1,175	126	16	57	735	951
TULARE	1,026,755	222,368	737,937	42,961	480	6,093	8,772	8,144
TUOLUMNE	73,291	50,525	18,058	489	74	1,138	1,004	2,003
VENTURA	1,229,737	385,441	735,651	63,058	1,979	13,133	4,132	26,343
YOLO	327,982	121,591	135,853	39,031	872	16,833	1,704	12,098
YUBA	201,327	92,309	87,377	8,415	470	2,933	4,856	4,967
CALIFORNIA	59,507,876	15,712,119	31,028,375	7,889,183	343,169	2,682,828	437,454	1,414,748

TABLE 1A
NUMBER OF UNDUPLICATED CLIENTS BY DIAGNOSIS, RACE/ETHNICITY, GENDER, AND AGE GROUP
FISCAL YEARS 1990-1991 THROUGH 1997-1998

	1990-1991	1991-1992	1992-1993	1993-1994	1994-1995	1995-1996	1996-1997	1997-1998
TOTAL	320,704	330,768	334,461	341,325	347,183	341,730	363,441	390,695
<u>DIAGNOSIS</u>								
ADHD & CONDUCT DISORDERS	26,809	29,016	30,365	30,979	33,310	32,043	39,022	43,538
SCHIZOPHRENIA/OTHER PSYCHOTIC	84,679	84,484	87,021	88,493	89,976	78,426	88,689	93,173
DEPRESSIVE DISORDERS	72,491	79,987	83,884	88,357	91,405	84,219	96,189	105,761
BIPOLAR DISORDERS	19,186	19,789	20,873	22,468	23,398	22,985	24,534	26,032
ANXIETY DISORDERS	18,525	20,661	20,274	20,008	18,638	18,005	19,701	21,078
ADJUSTMENT DISORDER	43,917	40,036	36,115	33,434	32,998	27,099	32,324	34,457
OTHER MH	40,882	40,984	41,588	43,525	45,610	40,432	45,298	45,251
DEFERRED/MISSING	14,215	15,811	14,341	14,061	11,848	38,521	17,684	21,405
<u>RACE/ETHNICITY</u>								
WHITE	179,979	186,241	185,671	187,078	188,209	183,518	194,072	202,900
HISPANIC	56,837	60,051	62,271	64,218	66,040	63,284	67,618	76,273
BLACK	50,122	51,935	53,045	55,223	54,788	55,372	58,033	61,195
ASIAN/PACIFIC	15,453	18,097	20,009	20,221	20,174	20,415	21,390	22,225
OTHER	18,313	14,444	13,465	14,585	17,972	19,141	22,328	28,102
<u>GENDER</u>								
FEMALES	149,900	154,788	155,553	158,536	161,425	159,083	169,426	182,741
MALES	170,330	175,509	178,446	182,437	183,928	179,873	188,303	201,164
UNKNOWN	474	471	462	352	1,830	2,774	5,712	6,790
<u>AGE GROUP</u>								
0-4	2,783	2,974	2,952	2,924	2,930	2,961	3,584	4,057
5-9	15,847	16,400	16,381	16,898	18,337	19,043	22,765	26,465
10-12	13,872	15,019	15,061	15,163	15,757	16,201	19,006	21,886
13-17	32,941	35,353	36,787	37,348	39,359	40,595	46,263	52,260
18-20	12,103	12,097	11,912	11,791	12,213	12,027	12,765	14,516
21-39	139,501	140,901	139,908	142,241	138,402	128,105	127,137	129,142
40-59	77,593	81,967	85,725	90,281	94,282	97,019	104,647	112,950
60-64	8,656	8,645	8,453	8,486	8,570	8,583	8,955	9,780
65+	17,035	17,118	17,025	15,737	15,585	15,692	15,782	16,691
UNKNOWN	373	294	257	456	1,748	1,504	2,537	2,948

TABLE 1B
PERCENT OF UNDUPLICATED CLIENTS BY DIAGNOSIS, RACE/ETHNICITY, GENDER, AND AGE GROUP
FISCAL YEARS 1990-1991 THROUGH 1997-1998

	1990-1991	1991-1992	1992-1993	1993-1994	1994-1995	1995-1996	1996-1997	1997-1998
TOTAL	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00
<u>DIAGNOSIS</u>								
ADHD & CONDUCT DISORDERS	8.36	8.77	9.08	9.08	9.59	9.38	10.74	11.14
SCHIZOPHRENIA/OTHER PSYCHOTIC	26.40	25.54	26.02	25.93	25.92	22.95	24.40	23.85
DEPRESSIVE DISORDERS	22.60	24.18	25.08	25.89	26.33	24.64	26.47	27.07
BIPOLAR DISORDERS	5.98	5.98	6.24	6.58	6.74	6.73	6.75	6.66
ANXIETY DISORDERS	5.78	6.25	6.06	5.86	5.37	5.27	5.42	5.40
ADJUSTMENT DISORDER	13.69	12.10	10.80	9.80	9.50	7.93	8.89	8.82
OTHER MH	12.75	12.39	12.43	12.75	13.14	11.83	12.46	11.58
DEFERRED/MISSING	4.43	4.78	4.29	4.12	3.41	11.27	4.87	5.48
<u>RACE/ETHNICITY</u>								
WHITE	56.12	56.31	55.51	54.81	54.21	53.70	53.40	51.93
HISPANIC	17.72	18.16	18.62	18.81	19.02	18.52	18.60	19.52
BLACK	15.63	15.70	15.86	16.18	15.78	16.20	15.97	15.66
ASIAN/PACIFIC	4.82	5.47	5.98	5.92	5.81	5.97	5.89	5.69
OTHER	5.71	4.37	4.03	4.27	5.18	5.60	6.14	7.19
<u>GENDER</u>								
FEMALES	46.74	46.80	46.51	46.45	46.50	46.55	46.62	46.77
MALES	53.11	53.06	53.35	53.45	52.98	52.64	51.81	51.49
UNKNOWN	0.15	0.14	0.14	0.10	0.53	0.81	1.57	1.74
<u>AGE GROUP</u>								
0-4	0.87	0.90	0.88	0.86	0.84	0.87	0.99	1.04
5-9	4.94	4.96	4.90	4.95	5.28	5.57	6.26	6.77
10-12	4.33	4.54	4.50	4.44	4.54	4.74	5.23	5.60
13-17	10.27	10.69	11.00	10.94	11.34	11.88	12.73	13.38
18-20	3.77	3.66	3.56	3.45	3.52	3.52	3.51	3.72
21-39	43.50	42.60	41.83	41.67	39.86	37.49	34.98	33.05
40-59	24.19	24.78	25.63	26.45	27.16	28.39	28.79	28.91
60-64	2.70	2.61	2.53	2.49	2.47	2.51	2.46	2.50
65+	5.31	5.18	5.09	4.61	4.49	4.59	4.34	4.27
UNKNOWN	0.12	0.09	0.08	0.13	0.50	0.44	0.70	0.75

The Department of Mental Health's (DMH) Client and Services Information (CSI) System collects data pertaining to mental health clients and the services they receive at the county level.

A basic principle of the CSI system is that it reflects both Medi-Cal and non-Medi-Cal clients, and services provided in the County/City/Mental Health Plan program. This includes all providers whose legal entities are reported to the County Cost Report under the category Treatment Program and the individual and group practitioners, most of which were formerly in the Fee-For-Service system. These practitioners are individual or group practice psychiatrists, psychologists, Licensed Clinical Social Workers (LCSW), Marriage, Family and Child Counselors (MFCC), and Registered Nurses (RN) as well as the Mixed Specialty group practices.

In county-staffed providers, all clients and services must be reported. In contract providers, those clients and services provided under the contract with the county mental health program must be reported.

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

AGE GROUP		
	Number	Percent
Total	659,572	100%
0-11	87,686	13.3%
12-17	115,773	17.6%
18-20	29,572	4.5%
21-39	192,104	29.1%
40 - 59	196,088	29.7%
60 - 64	17,707	2.7%
65 & Up	20,601	3.1%
Unknown/Not Reported	41	0.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

GENDER		
	Number	Percent
Total	659,572	100%
Male	338,528	51.3%
Female	320,424	48.6%
Other	41	0.0%
Unknown/Not Reported	579	0.1%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

RACE/ETHNICITY		
	Number	Percent
Total	659,572	100%
White	290,671	44.1%
Hispanic	159,330	24.2%
Black	114,123	17.3%
American Native	6,682	1.0%
Asian/Pacific Islander subtotal	39,296	6.0%
Amerasian	653	0.1%
Asian Indian	701	0.1%
Cambodian	3,329	0.5%
Chinese	5,686	0.9%
Filipino	5,479	0.8%
Guamanian	183	0.0%
Hawaiian Native	226	0.0%
Japanese	1,331	0.2%
Korean	2,329	0.4%
Laotian	2,848	0.4%
Samoan	411	0.1%
Vietnamese	7,704	1.2%
Other Asian/Pacific Islander	8,416	1.3%
Other	9,555	1.4%
Unknown/Not Reported	39,915	6.1%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

PRIMARY LANGUAGE		
	Number	Percent
Total	659,572	100%
English	514,653	78.0%
Spanish	55,705	8.4%
American Sign Language	692	0.1%
Other Sign Language	87	0.0%
Arabic	445	0.1%
Armenian	1,356	0.2%
Cambodian	3,028	0.5%
Cantonese	1,375	0.2%
Farsi	832	0.1%
French	74	0.0%
Hebrew	106	0.0%
Hmong	1,894	0.3%
Ilocano	75	0.0%
Italian	69	0.0%
Japanese	553	0.1%
Korean	1,673	0.3%
Lao	1,357	0.2%
Mandarin	1,258	0.2%
Other Chinese Dialect	2,019	0.3%
Mien	478	0.1%
Polish	45	0.0%
Portuguese	227	0.0%
Russian	1,459	0.2%
Samoan	167	0.0%
Tagalog	2,168	0.3%
Thai	816	0.1%
Turkish	56	0.0%
Vietnamese	6,924	1.0%
Other Non-English	8,611	1.3%
Unknown/Not Reported	51,370	7.8%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS BY DIAGNOSIS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

	Number	Percent
Total	659,572	100%
Depressive Disorders	178,927	27.1%
Bipolar Disorders	71,290	10.8%
Schizophrenia	74,897	11.4%
Psychotic Disorders (not Schizophrenia)	39,383	6.0%
Post-Traumatic Stress Disorders	21,802	3.3%
Other Anxiety Disorders	26,608	4.0%
Cognitive Disorders	2,772	0.4%
Personality Disorders	1,808	0.3%
Adjustment Disorders	62,298	9.4%
Substance-Related Disorders	27,257	4.1%
Attention Deficit and Hyperactivity Disorders	31,948	4.8%
Disruptive Behavior Disorders	36,340	5.5%
Other Disorders of Childhood	13,811	2.1%
Other Conditions	12,917	2.0%
Unspecified Diagnosis (Not psychotic)	2,735	0.4%
Deferred Diagnosis	35,425	5.4%
No Mental Health Disorder	18,621	2.8%
Missing	733	0.1%

SERVICES PROVIDED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS BY MODE OF SERVICE AND
 UNITS OF SERVICE BY MODE AND SERVICE FUNCTION
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

24-HOUR SERVICES	
Number of Clients Receiving any Type of 24-Hour Service	47,629
Type of Facility/Service	
Total 24 Hour Units of Service (Days)	2,205,548
IMD Basic	381,743
Hospital	352,781
IMD with Patch	298,894
Adult Residential	246,310
Semi-Supervised Living	217,341
Other Residential	209,900
Skilled Nursing Facility Intensive	177,546
Adult Crisis Residential	106,813
Psychiatric Health Facility	93,057
Jail Inpatient	42,151
Mental Health Rehabilitation Center	54,923
Indpenedent Living	24,089

DAY SERVICES	
Number of Clients Receiving any Type of Day Services	81,372
Type of Facility/Service	
Total Day Service Units of Service (Days)	2,014,764
Crisis Stabilization	107,259
Day Treatment Intensive	656,481
Day Rehabilitation	1,041,168
Skilled Nursing Facility Augmentation	51,211
Vocational Services	32,128
Socialization	126,517

OUTPATIENT	
Number of Clients Receiving any Type of Outpatient Services	631,068
Type of Service	
Total Outpatient Units of Service (Contacts)	14,774,982
Mental Health Services	6,785,069
Case Management/Brokerage	3,067,407
Medication Support	2,839,040
Collateral	1,608,239
Crisis Intervention	318,680
Therapeutic Behavioral Services	102,732
Professional Inpatient Visit to Client in a Hospital or long term facility	53,815

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING 24-HOUR SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

AGE GROUP		
	Number	Percent
Total	47,629	100%
0-11	521	1.1%
12-17	2,887	6.1%
18-20	2,739	5.8%
21-39	21,003	44.1%
40 - 59	18,211	38.2%
60 - 64	1,094	2.3%
65 & Up	1,172	2.5%
Unknown/Not Reported	2	0.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING 24-HOUR SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

GENDER		
	Number	Percent
Total	47,629	100%
Male	26,951	56.6%
Female	20,659	43.4%
Other	1	0.0%
Unknown/Not Reported	18	0.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING 24-HOUR SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

RACE/ETHNICITY		
	Number	Percent
Total	47,629	100%
White	25,720	54.0%
Hispanic	8,574	18.0%
Black	8,086	17.0%
American Native	546	1.1%
Asian/Pacific Islander subtotal	2,669	5.6%
Amerasian	41	0.1%
Asian Indian	72	0.2%
Cambodian	93	0.2%
Chinese	523	1.1%
Filipino	522	1.1%
Guamanian	18	0.0%
Hawaiian Native	19	0.0%
Japanese	143	0.3%
Korean	180	0.4%
Laotian	73	0.2%
Samoan	29	0.1%
Vietnamese	481	1.0%
Other Asian/Pacific Islander	475	1.0%
Other	601	1.3%
Unknown/Not Reported	1,433	3.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING 24-HOUR SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

PRIMARY LANGUAGE		
	Number	Percent
Total	47,629	100%
English	40,979	86.0%
Spanish	2,354	4.9%
American Sign Language	32	0.1%
Other Sign Language	7	0.0%
Arabic	28	0.1%
Armenian	43	0.1%
Cambodian	53	0.1%
Cantonese	88	0.2%
Farsi	41	0.1%
French	12	0.0%
Hebrew	11	0.0%
Hmong	47	0.1%
Ilocano	7	0.0%
Italian	4	0.0%
Japanese	36	0.1%
Korean	83	0.2%
Lao	37	0.1%
Mandarin	41	0.1%
Other Chinese Dialect	178	0.4%
Mien	9	0.0%
Polish	4	0.0%
Portuguese	12	0.0%
Russian	50	0.1%
Samoan	7	0.0%
Tagalog	198	0.4%
Thai	107	0.2%
Turkish	0	0.0%
Vietnamese	313	0.7%
Other Non-English	495	1.0%
Unknown/Not Reported	2,353	4.9%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING 24-HOUR SERVICES BY DIAGNOSIS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

	Number	Percent
Total	47,629	100%
Depressive Disorders	10,583	22.2%
Bipolar Disorders	7,617	16.0%
Schizophrenia	14,044	29.5%
Psychotic Disorders (not Schizophrenia)	8,345	17.5%
Post-Traumatic Stress Disorders	342	0.7%
Other Anxiety Disorders	255	0.5%
Cognitive Disorders	241	0.5%
Personality Disorders	53	0.1%
Adjustment Disorders	1,894	4.0%
Substance-Related Disorders	2,433	5.1%
Attention Deficit and Hyperactivity Disorders	141	0.3%
Disruptive Behavior Disorders	217	0.5%
Other Disorders of Childhood	63	0.1%
Other Conditions	479	1.0%
Unspecified Diagnosis (Not psychotic)	14	0.0%
Deferred Diagnosis	292	0.6%
No Mental Health Disorder	540	1.1%
Missing	76	0.2%

SERVICES PROVIDED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS AND UNITS OF SERVICE
 BY 24-HOUR SERVICES AND SERVICE FUNCTION
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

24-HOUR SERVICES	
Number of Clients Receiving any Type of 24-Hour Service	47,629
Type of Facility/Service	
Total 24 Hour Units of Service (Days)	2,205,548
IMD Basic	381,743
Hospital	352,781
IMD with Patch	298,894
Adult Residential	246,310
Semi-Supervised Living	217,341
Other Residential	209,900
Skilled Nursing Facility Intensive	177,546
Adult Crisis Residential	106,813
Psychiatric Health Facility	93,057
Jail Inpatient	42,151
Mental Health Rehabilitation Center	54,923
Indpenendent Living	24,089

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING DAY SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

AGE GROUP		
	Number	Percent
Total	81,372	100%
0-11	4,064	5.0%
12-17	12,906	15.9%
18-20	4,849	6.0%
21-39	30,610	37.6%
40 - 59	25,394	31.2%
60 - 64	1,482	1.8%
65 & Up	2,054	2.5%
Unknown/Not Reported	13	0.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING DAY SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

GENDER		
	Number	Percent
Total	81,372	100%
Male	46,188	56.8%
Female	35,125	43.2%
Other	4	0.0%
Unknown/Not Reported	55	0.1%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING DAY SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

RACE/ETHNICITY		
	Number	Percent
Total	81,372	100%
White	39,365	48.4%
Hispanic	16,301	20.0%
Black	15,465	19.0%
American Native	637	0.8%
Asian/Pacific Islander subtotal	4,458	5.5%
Amerasian	67	0.1%
Asian Indian	110	0.1%
Cambodian	161	0.2%
Chinese	884	1.1%
Filipino	926	1.1%
Guamanian	21	0.0%
Hawaiian Native	26	0.0%
Japanese	203	0.2%
Korean	285	0.4%
Laotian	185	0.2%
Samoan	52	0.1%
Vietnamese	693	0.9%
Other Asian/Pacific Islander	845	1.0%
Other	1,364	1.7%
Unknown/Not Reported	3,782	4.6%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING DAY SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

PRIMARY LANGUAGE		
	Number	Percent
Total	81,372	100%
English	68,751	84.5%
Spanish	4,834	5.9%
American Sign Language	59	0.1%
Other Sign Language	10	0.0%
Arabic	44	0.1%
Armenian	69	0.1%
Cambodian	89	0.1%
Cantonese	119	0.1%
Farsi	59	0.1%
French	18	0.0%
Hebrew	15	0.0%
Hmong	75	0.1%
Ilocano	9	0.0%
Italian	8	0.0%
Japanese	64	0.1%
Korean	156	0.2%
Lao	52	0.1%
Mandarin	103	0.1%
Other Chinese Dialect	321	0.4%
Mien	15	0.0%
Polish	6	0.0%
Portuguese	16	0.0%
Russian	105	0.1%
Samoan	15	0.0%
Tagalog	650	0.8%
Thai	60	0.1%
Turkish	4	0.0%
Vietnamese	416	0.5%
Other Non-English	609	0.7%
Unknown/Not Reported	4,621	5.7%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING DAY SERVICES BY DIAGNOSIS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

	Number	Percent
Total	81,372	100%
Depressive Disorders	16,961	20.8%
Bipolar Disorders	11,191	13.8%
Schizophrenia	12,623	15.5%
Psychotic Disorders (not Schizophrenia)	14,429	17.7%
Post-Traumatic Stress Disorders	1,314	1.6%
Other Anxiety Disorders	1,318	1.6%
Cognitive Disorders	504	0.6%
Personality Disorders	120	0.1%
Adjustment Disorders	6,847	8.4%
Substance-Related Disorders	6,964	8.6%
Attention Deficit and Hyperactivity Disorders	1,928	2.4%
Disruptive Behavior Disorders	3,159	3.9%
Other Disorders of Childhood	843	1.0%
Other Conditions	1,505	1.8%
Unspecified Diagnosis (Not psychotic)	51	0.1%
Deferred Diagnosis	578	0.7%
No Mental Health Disorder	734	0.9%
Missing	303	0.4%

SERVICES PROVIDED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS AND UNITS OF SERVICE
 BY DAY SERVICES AND SERVICE FUNCTION
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

DAY SERVICES	
Number of Clients Receiving any Type of Day Services	81,372
Type of Facility/Service	
Total Day Service Units of Service (Days)	2,014,764
Crisis Stabilization	107,259
Day Treatment Intensive	656,481
Day Rehabilitation	1,041,168
Skilled Nursing Facility Augmentation	51,211
Vocational Services	32,128
Socialization	126,517

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING OUTPATIENT SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

AGE GROUP		
	Number	Percent
Total	631,068	100%
0-11	87,135	13.8%
12-17	113,460	18.0%
18-20	27,492	4.4%
21-39	179,857	28.5%
40 - 59	186,634	29.6%
60 - 64	17,075	2.7%
65 & Up	19,380	3.1%
Unknown/Not Reported	35	0.0%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
NUMBER OF CLIENTS RECEIVING OUTPATIENT SERVICES
BY SELECTED DEMOGRAPHIC CHARACTERISTICS
STATEWIDE DATA FOR FISCAL YEAR 2002-03

GENDER		
	Number	Percent
Total	631,068	100%
Male	322,290	51.1%
Female	308,180	48.8%
Other	38	0.0%
Unknown/Not Reported	560	0.1%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING OUTPATIENT SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

RACE/ETHNICITY		
	Number	Percent
Total	631,068	100%
White	276,107	43.8%
Hispanic	154,131	24.4%
Black	110,157	17.5%
American Native	6,514	1.0%
Asian/Pacific Islander subtotal	37,756	6.0%
Amerasian	625	0.1%
Asian Indian	667	0.1%
Cambodian	3,286	0.5%
Chinese	5,420	0.9%
Filipino	5,175	0.8%
Guamanian	172	0.0%
Hawaiian Native	221	0.0%
Japanese	1,236	0.2%
Korean	2,265	0.4%
Laotian	2,816	0.4%
Samoan	404	0.1%
Vietnamese	7,447	1.2%
Other Asian/Pacific Islander	8,022	1.3%
Other	8,933	1.4%
Unknown/Not Reported	37,470	5.9%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING OUTPATIENT SERVICES
 BY SELECTED DEMOGRAPHIC CHARACTERISTICS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

PRIMARY LANGUAGE		
	Number	Percent
Total	631,068	100%
English	491,994	78.0%
Spanish	54,123	8.6%
American Sign Language	678	0.1%
Other Sign Language	82	0.0%
Arabic	433	0.1%
Armenian	1,337	0.2%
Cambodian	3,012	0.5%
Cantonese	1,353	0.2%
Farsi	820	0.1%
French	68	0.0%
Hebrew	100	0.0%
Hmong	1,878	0.3%
Ilocano	71	0.0%
Italian	64	0.0%
Japanese	516	0.1%
Korean	1,645	0.3%
Lao	1,347	0.2%
Mandarin	1,234	0.2%
Other Chinese Dialect	1,909	0.3%
Mien	477	0.1%
Polish	44	0.0%
Portuguese	224	0.0%
Russian	1,439	0.2%
Samoan	159	0.0%
Tagalog	1,750	0.3%
Thai	787	0.1%
Turkish	56	0.0%
Vietnamese	6,825	1.1%
Other Non-English	8,378	1.3%
Unknown/Not Reported	48,265	7.6%

PERSONS SERVED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS RECEIVING OUTPATIENT SERVICES BY DIAGNOSIS
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

	Number	Percent
Total	631,068	100%
Depressive Disorders	173,160	27.4%
Bipolar Disorders	67,651	10.7%
Schizophrenia	71,767	11.4%
Psychotic Disorders (not Schizophrenia)	34,051	5.4%
Post-Traumatic Stress Disorders	21,614	3.4%
Other Anxiety Disorders	26,196	4.2%
Cognitive Disorders	2,394	0.4%
Personality Disorders	1,794	0.3%
Adjustment Disorders	58,259	9.2%
Substance-Related Disorders	23,253	3.7%
Attention Deficit and Hyperactivity Disorders	31,815	5.0%
Disruptive Behavior Disorders	35,852	5.7%
Other Disorders of Childhood	13,734	2.2%
Other Conditions	12,310	2.0%
Unspecified Diagnosis (Not psychotic)	2,751	0.4%
Deferred Diagnosis	35,450	5.6%
No Mental Health Disorder	18,398	2.9%
Missing	619	0.1%

SERVICES PROVIDED IN COUNTY MENTAL HEALTH PROGRAMS
 NUMBER OF CLIENTS AND UNITS OF SERVICE
 BY OUTPATIENT SERVICES AND SERVICE FUNCTION
 STATEWIDE DATA FOR FISCAL YEAR 2002-03

OUTPATIENT	
Number of Clients Receiving any Type of Outpatient Services	631,068
Type of Service	
Total Outpatient Units of Service (Contacts)	14,774,982
Mental Health Services	6,785,069
Case Management/Brokerage	3,067,407
Medication Support	2,839,040
Collateral	1,608,239
Crisis Intervention	318,680
Therapeutic Behavioral Services	102,732
Professional Inpatient Visit to Client in a Hospital or long term facility	53,815

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To: LCSW Education Committee

Date: April 23, 2008

From: Christy Berger
MHSA Coordinator

Telephone: (916) 574-7834

Subject: Review of LCSW Occupational Analysis

What is an Occupational Analysis?

An occupational analysis is a method for identifying the tasks performed in a profession or on a job and the knowledge, skills, and abilities required to perform that job safely and competently. This provides a comprehensive description of current practice. The results of an occupational analysis are used to form the basis of a licensing examination, helping to ensure that it is job-related. An occupational analysis is performed in accordance with legal, professional and technical standards.

The LCSW Occupational Analysis and Examination Outline

Last performed in 2004 for Licensed Clinical Social Workers (LCSW), the occupational analysis began with telephone interviews of LCSWs in diverse practice settings to gather information about the tasks that are performed in practice and the knowledge required to perform those tasks. That information was reviewed and refined during several workshops with LCSWs, and was then incorporated into a questionnaire. The questionnaire asked LCSWs to:

- Rate the importance of each task and knowledge area associated with the respondent's own practice
- Rate the frequency with which each task is performed by that LCSW
- Indicate when the ability to perform each task is acquired
- Indicate to what extent possession of the knowledge is required upon entry to the profession.

The questionnaires were mailed to 2,370 LCSWs throughout California, and 417 completed questionnaires were returned. Several panels of LCSWs reviewed the results of the questionnaire in order to develop a new LCSW examination outline. This process included a review of the mean rating that each task and knowledge statement received. These mean ratings help establish the criticality of each task and knowledge statement, which in turn helps to determine whether or not each particular statement becomes a part of the examination outline.

The examination outline, upon which the LCSW examinations are based, consists of seven overall content areas. A description of each content area and the associated task and knowledge statements can be found in the attachment. Task statements are linked to one or more relevant knowledge statements, so a knowledge statement may appear more than once throughout the examination outline, while a task will appear only once.

Each content area is weighted proportionately relative to other content areas, based on the number of task statements included in that content area and the total of the tasks' critical index ratings. The resulting outline for the LCSW examination program, currently in effect, is as follows:

LCSW Examination Outline

I. Biopsychosocial Assessment 23%

- A. Assessing for Risk
- B. Assessment of Client Readiness and Appropriateness of Treatment
- C. In-depth Assessment
 - 1. Comprehensive Exploration of Symptom
 - a. Psychological factors
 - b. Cultural/personal factors
 - 2. Comprehensive Evaluation of Problem
 - a. Social-environmental history
 - b. Medical and developmental history
 - c. History of substance use/abuse
 - 3. Comprehensive evaluation of inter- and intra-personal resources

II. Diagnostic Formulation 6%

III. Treatment Plan Development 11%

- A. Identify/prioritize objectives, goals and methods of treatment
- B. Integrate/coordinate concurrent treatment modalities and adjunctive resources
- C. Monitoring, evaluation, and revision

IV. Resource Coordination 9%

- A. Service identification and coordination
- B. Client advocacy and support

V. Therapeutic Interventions 40%

- A. Crisis intervention
- B. Short-term therapy
- C. Children and adolescents
- D. Adults (individual and group therapy)
- E. Couples
- F. Families
- G. Managing the therapeutic process

VI. Legal Mandates and Obligations 5%

- A. Protective issues/mandated reporting
- B. Professional conduct

VII. Ethical Standards 6%

The Board hopes to conduct the next LCSW occupational analysis in fiscal year 2009/10.

Attachment

Full LCSW Examination Outline

I. Biopsychosocial Assessment (23%) – This area assesses the candidate’s ability to identify and assess the biopsychosocial aspects of the presenting problem.

1A Biopsychosocial Assessment: Assessing for Risk	
Tasks	Knowledge
<p>14. Evaluate client’s level of distress to assess the impact of the presenting problem on the person in the situation.</p> <p>27. Assess for suicide potential by evaluating client’s intent, means, and history to determine need for immediate intervention.</p> <p>40. Evaluate level of danger client presents to self and/or others to determine need for immediate intervention.</p> <p>53. Evaluate client for grave disability to determine need for immediate intervention.</p> <p>67. Evaluate degree of risk of abuse or neglect of a child to determine need for referral to a child protective services agency.</p> <p>79. Evaluate degree of risk of abuse or neglect of dependent adult or elderly client to determine need for referral to an adult protective services agency or ombudsman.</p> <p>91. Evaluate degree of risk by identifying the client’s immediate support systems and the client’s ability to access them.</p> <p>103. Identify precipitating events to determine the need for crisis intervention.</p> <p>245. Identify presenting complaint to determine client’s understanding of the problem.</p>	<p>11. Knowledge of psychological, physical, and behavioral indicators of abuse and neglect.</p> <p>22. Knowledge of socio-cultural factors that affect the assessment of client risk.</p> <p>44. Knowledge of risk factors that indicate a high potential for suicide within age, gender, and cultural groups.</p> <p>55. Knowledge of legal criteria for identifying clients who require involuntary treatment or detention.</p> <p>66. Knowledge of methods for assessing the risk of decompensation and hospitalization.</p> <p>88. Knowledge of criteria for evaluating the safety of a child’s environment.</p> <p>99. Knowledge of physical, behavioral, and psychological indicators of suicidal and/or self-injurious behavior.</p> <p>131. Knowledge of criteria for determining whether client’s living situation constitutes high risk for abuse.</p> <p>142. Knowledge of methods and techniques for eliciting client’s perception of presenting complaint.</p> <p>148. Knowledge of risk factors that indicate a client’s potential for causing harm to others.</p> <p>166. Knowledge of criteria for assessing the risk of abuse, neglect, or exploitation of elder and dependent adults.</p> <p>186. Knowledge of risk factors associated with diagnostic categories and clinical populations that indicate a high potential for suicidal and/or self-injurious behavior.</p>
1B Biopsychosocial Assessment: Assessment of Client Readiness and Appropriateness of Treatment	
<p>113. Assess for language barriers that will impede the therapeutic process to determine whether treatment can be provided or referral is indicated.</p> <p>125. Assess for cultural factors that will influence or impact the therapeutic process to determine whether treatment can be provided or referral is indicated.</p>	<p>33. Knowledge of the effect of language differences on the therapeutic process.</p> <p>77. Knowledge of the role of client motivation in therapeutic change.</p> <p>120. Knowledge of cultural beliefs regarding therapy and mental health.</p> <p>201. Knowledge of developmentally appropriate techniques for eliciting information about the client’s thoughts and feelings during the interview process.</p>

1B Assessment of Client Readiness and Appropriateness of Treatment continued

I. Biopsychosocial Assessment (23%) – This area assesses the candidate’s ability to identify and assess the biopsychosocial aspects of the presenting problem.

Tasks	Knowledge
<p>137. Identify client's presenting problem and goals for therapy to determine whether treatment can be provided or referral is indicated.</p>	<p>208. Knowledge of methods and techniques for facilitating the client's ability to communicate thoughts and feelings during the interview process. 212. Knowledge of techniques for evaluating the congruence between the client's nonverbal and verbal communications. 237. Knowledge of how cultural factors impact the ways a client seeks assistance for psychosocial problems.</p>
<p>1C1A Biopsychosocial Assessment: In-depth assessment – Comprehensive Exploration of Symptoms (Psychological Factors)</p>	
<p>42. Gather information regarding the mental health history of the client and the client's family to assist in developing a comprehensive assessment. 54. Assess client's physical appearance and presentation to evaluate effects of presenting problem on client's functioning. 105. Identify psychiatric and physical symptoms or characteristics to determine need for psychiatric or medical referral. 138. Evaluate client's ability to care for self by assessing impact of cognitive or physical impairments. 139. Evaluate effects of client and family's spiritual beliefs on presenting problem. 150. Gather collateral information pertaining to client and client's presenting problem to formulate a differential diagnosis. 162. Identify perceptual, cognitive, and personality issues that suggest referral for vocational testing. 174. Gather information regarding perception and cognition to identify symptoms of psychopathology. 186. Assess client's mood, affective responses, and impulse regulation to identify patterns of emotional functioning. 198. Identify symptoms of perceptual, cognitive, and learning disorders that require referral for educational testing. 210. Identify perceptual and cognitive functions that require referral for psychological testing.</p>	<p>10. Knowledge of the effects of aging on client's independent functioning. 32. Knowledge of methods for assessing the client's degree of acculturation. 160. Knowledge of behavioral, physiological, and psychological indicators of emotional distress in assessing client's psychosocial functioning. 172. Knowledge of behavioral, physiological, and psychological factors that indicate a need for psychiatric or medical evaluation. 192. Knowledge of methods and techniques for assessing the impact of the client's level of acculturation on the presenting problem. 197. Knowledge of methods and techniques for assessing the impact of the mental health history of the client's family on the client's current problems and issues. 211. Knowledge of methods and techniques for assessing the client's ability to provide for self-care needs. 223. Knowledge of types of information available in employment, medical, psychological, and school records to provide assessment and diagnostic information. 248. Knowledge of the effects of mood disturbance on psychosocial functioning. 258. Knowledge of strategies for gathering information from adjunctive resources. 262. Knowledge of psychological, cognitive, and behavioral factors that indicate a need for psychological and vocational testing. 264. Knowledge of the effect of mental disorders on psychosocial functioning. 267. Knowledge of methods and techniques for assessing the impact of the client's previous mental health treatments on the client's current problems and issues.</p>

<p>1C1B In-depth Assessment – Comprehensive Exploration of Symptoms (Cultural/Personal Factors)</p>	
Tasks	Knowledge

I. Biopsychosocial Assessment (23%) – This area assesses the candidate’s ability to identify and assess the biopsychosocial aspects of the presenting problem.

<p>163. Assess client’s degree of acculturation to determine impact on presenting problem.</p> <p>175. Identify impact of client’s experience of life stressors within context of client’s race, culture, country of origin, age, gender, religion, sexual orientation, marital status, and level of ability.</p> <p>187. Assess nature of client’s familial relationships by evaluating the family structure within the client’s cultural identity.</p> <p>199. Gather information regarding role identification within context of client’s race, culture, and country of origin, age, gender, religion, sexual orientation, marital status, and level of ability.</p> <p>212. Identify impact of client’s culture on client’s presentation of psychological or physical problems.</p>	<p>205. Knowledge of methods and techniques for assessing the impact of other peoples’ values, culture, and life experiences on the client’s presenting problem.</p> <p>218. Knowledge of methods and techniques for assessing the client’s experience of social and cultural biases and discrimination and their impact on the presenting problem.</p> <p>231. Knowledge of methods and techniques for assessing how the client’s values, personal preferences, and cultural identity impact the presenting problem.</p>
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1C2A Biopsychosocial Assessment: In-depth Assessment – Comprehensive Evaluation of Problem (Social-environmental History)

<p>15. Gather information about client’s interpersonal relationships to identify patterns of behavior in different life settings.</p> <p>28. Assess history of trauma and abuse to determine impact on current functioning.</p> <p>41. Evaluate impact of psychosocial and environmental stressors on client’s symptomatology.</p> <p>55. Identify events precipitating current problem through interviews with client and collateral sources.</p> <p>68. Gather information regarding client’s family history to determine the impact of significant relationships and events on current problems.</p> <p>80. Assess impact of familial patterns of interaction on client’s current problem through interviews with client and collateral sources.</p> <p>248. Assess client’s employment history to evaluate past and present impact of presenting problem in occupational settings.</p>	<p>43. Knowledge of methods for assessing the impact of family history on client functioning.</p> <p>54. Knowledge of methods for assessing the effects of the client’s physical condition on past and current psychosocial functioning.</p> <p>65. Knowledge of the cycle of abuse that perpetuates intergenerational violence and trauma.</p> <p>87. Knowledge of how cultural influences affect the client’s perception of life events as traumatic.</p> <p>98. Knowledge of the effects of family structure and dynamics on the client’s development of role identity and patterns of interpersonal interaction.</p> <p>130. Knowledge of the interrelationship between client’s behavior in social and work environments and behavior in other areas of client’s life.</p> <p>141. Knowledge of how to assess the relationship between life events and the stressors the client experiences.</p> <p>253. Knowledge of the effects of socio-cultural factors on the client’s presenting problem.</p>
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1C2B In-depth Assessment – Comprehensive Evaluation of Problem (Medical and Developmental History)

Tasks	Knowledge
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I. Biopsychosocial Assessment (23%) – This area assesses the candidate’s ability to identify and assess the biopsychosocial aspects of the presenting problem.

<p>56. Gather information regarding the developmental history of the client and client’s family members to determine course of developmental progression.</p> <p>69. Identify possible deficits in client’s developmental level to determine need for further evaluation.</p> <p>92. Gather information regarding client’s use of complementary and alternative treatments to evaluate client’s approach to medical problems.</p> <p>104. Gather information regarding client’s personal and familial medical history to determine impact on the person in the situation.</p> <p>114. Assess client’s perception of the impact of physical limitations on adaptive functioning.</p> <p>126. Assess how client’s medical conditions affect past and current adaptive functioning.</p> <p>151. Assess impact of patterns of familial interaction and beliefs on client’s physical health and wellness.</p>	<p>9. Knowledge of theories of aging and development that explain biological and cognitive changes.</p> <p>21. Knowledge of the relationship between medical conditions and psychosocial functioning.</p> <p>42. Knowledge of the relationship between level of functioning and normative developmental stages throughout the life span.</p> <p>76. Knowledge of symptoms of medical conditions that may impact client psychosocial functioning.</p> <p>118. Knowledge of common physical conditions, psychological issues, and behavioral patterns associated with specific developmental or life phases.</p> <p>119. Knowledge of the effects of medications and their impact on the client’s adaptive functioning.</p> <p>149. Knowledge of developmental processes of individual growth and change.</p> <p>154. Knowledge of methods and techniques for assessing the impact of client’s family medical history on current problems and issues.</p> <p>181. Knowledge of the effects of social, cultural, and environmental influences on aging and health.</p> <p>191. Knowledge of the effect of biological and environmental influences on specific developmental and life phases.</p> <p>234. Knowledge of theories of stages of cognitive development.</p>
<p>1C2C Biopsychosocial Assessment: In-depth Assessment – Comprehensive Evaluation of Problem (History of Substance Use/Abuse)</p>	
<p>3. Assess impact of client’s substance abuse on family members and significant others to determine need for concurrent services.</p> <p>16. Assess social and familial factors associated with or contributing to the client’s substance use.</p> <p>93. Assess types and patterns of use to determine substance abuse and/or dependence.</p>	<p>64. Knowledge of the impact of substance use or abuse on family and social relationships and role functioning.</p> <p>86. Knowledge of the effect of substance use and abuse on psychosocial functioning.</p> <p>97. Knowledge of physical and behavioral signs indicating current substance intoxication and/or withdrawal.</p> <p>140. Knowledge of physical and behavioral indicators associated with substance abuse.</p> <p>256. Knowledge of the impact of social, cultural, and familial factors on substance use and abuse.</p> <p>271. Knowledge of physical and behavioral indicators associated with substance dependence.</p>

<p>1C3 Biopsychosocial Assessment: Comprehensive Evaluation of Inter- and Intra-personal Resources</p>	
<p>Tasks</p>	<p>Knowledge</p>
<p>29. Evaluate effectiveness of client’s coping strategies and</p>	<p>20. Knowledge of methods for assessing adaptive and maladaptive coping</p>

I. Biopsychosocial Assessment (23%) – This area assesses the candidate’s ability to identify and assess the biopsychosocial aspects of the presenting problem.

<p>strengths by identifying patterns of reactions and responses to life stressors.</p> <p>81. Identify information regarding client’s past and present coping strategies and strengths as they relate to the presenting problem.</p> <p>107. Assess client’s ability and willingness to access personal and community resources.</p> <p>115. Gather information regarding family members’ coping strategies and strengths to assist in treatment planning.</p> <p>127. Gather information regarding interpersonal relationships to evaluate and assess client’s ability to access and utilize support systems.</p> <p>152. Assess current living conditions to determine impact of the environment on the person in the situation.</p> <p>176. Collect information from collateral sources to assist in developing clinical assessment and intervention strategies.</p> <p>200. Assess impact of the client’s family and social network on the presenting problem.</p> <p>219. Assess socioeconomic factors to determine the impact of financial stressors on current problem.</p> <p>234. Assess ability and willingness of the client’s family and social network to support client’s treatment.</p>	<p>mechanisms in dealing with life stressors.</p> <p>31. Knowledge of how to obtain and integrate relevant clinical information from collateral sources to increase an understanding of the client in the environment.</p> <p>53. Knowledge of affective reactions to life stressors or situations that impact psychosocial functioning.</p> <p>75. Knowledge of the effect of economic factors and stressors on psychosocial functioning.</p> <p>108. Knowledge of theories of coping and adaptive responses to life events.</p> <p>129. Knowledge of the relationship between social supports and adaptive functioning.</p> <p>229. Knowledge of methods for assessing client’s ability to access personal and community resources.</p>
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II. Diagnostic Formulation (6%) – This area assesses the candidate’s ability use assessment information to formulate an accurate differential diagnosis for developing a treatment plan and interventions within the client’s socio-cultural context.

2 Diagnostic Formulation	
Tasks	Knowledge
17. Integrate information about the client's premorbid functioning in developing a differential diagnosis or problem formulation.	8. Knowledge of Diagnostic and Statistical Manual of Mental Disorders classifications of symptoms and disorders.
70. Compare assessment information with diagnostic criteria in formulating differential diagnoses.	41. Knowledge of the clinical process of developing a diagnosis or problem description to clarify therapeutic issues.
82. Incorporate information about the client's physiological status in formulating differential diagnoses.	52. Knowledge of how to evaluate and integrate information about the client's premorbid condition and precipitating events into the formulation of a differential diagnosis.
94. Integrate information regarding the impact of the client's cultural/ethnic background and beliefs on the experience and presentation of symptoms in formulating a differential diagnosis.	63. Knowledge of criteria for classifying complex levels of addiction (cross addiction).
106. Integrate results of mental status examination in developing a differential diagnosis or problem formulation.	85. Knowledge of situations that require consultation with a client-identified expert for clarifying diagnosis or problem formulation within the framework of the client's culture and beliefs.
128. Integrate collateral information from referral sources in developing a differential diagnosis or problem formulation.	96. Knowledge of the relationship between biochemistry and psychiatric disorders.
140. Identify persistence of symptoms to determine if problem is acute or chronic.	139. Knowledge of how to evaluate and integrate client's past mental and medical health history to formulate a differential diagnosis.
164. Develop clinical diagnosis or problem formulation to provide basis for interventions.	155. Knowledge of situations that require consultation with other professionals in developing or clarifying a diagnosis or problem formulation.
188. Identify onset or initial presentation of symptoms to determine duration of the problem.	161. Knowledge of methods for integrating assessment information to identify areas and level of impairment in client's functioning.
217. Identify extent of impairment and its impact on the client's level of functioning to develop a diagnostic impression.	167. Knowledge of the defining characteristics of symptoms that indicate provisional diagnoses.
228. Integrate assessment information to determine depth and breadth of impairment on adaptive functioning.	173. Knowledge of the psychoactive qualities of substances that contribute to dependence, physical addiction, or impairment.
239. Integrate information about the precipitating events in developing a differential diagnosis or problem formulation.	185. Knowledge of the social work diagnostic framework for identifying and evaluating presenting symptoms.
246. Identify psychological and environmental stressors to determine impact on symptomatology.	204. Knowledge of the impact of cultural factors on the formulation of a differential diagnosis.
	219. Knowledge of the relationship between psychosocial and environmental factors and symptom development.
	233. Knowledge of the relationship between onset of signs and symptoms and duration of the problem.
	240. Knowledge of behavioral, physiological, and psychological indicators of developmental disorders.

II. Diagnostic Formulation (6%) – This area assesses the candidate’s ability use assessment information to formulate an accurate differential diagnosis for developing a treatment plan and interventions within the client’s socio-cultural context.

2 Diagnostic Formulation continued	
Tasks	Knowledge
	250. Knowledge of the relationship between persistence of symptoms and the course of the problem. 276. Knowledge of methods for differentiating between disorders that share common symptoms. 279. Knowledge of criteria for classifying substance use, abuse, and dependency. 283. Knowledge of the short and long-term side effects of medications and their effect on the client’s presenting symptoms.

III. Treatment Plan Development (11%) – This area assesses the candidate’s ability to develop a culturally relevant treatment plan based on assessment and diagnostic information. The treatment plan includes a definition of the problem, measurable goals and objectives, and clinical interventions consistent with the client’s readiness for, and ability to engage in treatment, and relevant to the phases of therapy.

3A Treatment Plan Development: Identify/Prioritize Objectives, Goals and Methods of Treatment	
Tasks	Knowledge
30. Incorporate interventions into the treatment plan that address the needs associated with client’s clinical diagnosis.	7. Knowledge of methods and techniques for enhancing client motivation in treatment.
43. Identify level of intervention required to address the client’s areas and degree of impairment in developing the treatment plan.	19. Knowledge of methods for engaging mandated, resistant, and noncompliant clients in the therapeutic process.
57. Develop mutually agreed upon treatment goals based on assessment and diagnostic information.	30. Knowledge of client characteristics that affect client adaptation in different therapeutic modalities or treatment settings.
108. Integrate aspects of client’s value and belief systems into the development of the treatment plan.	40. Knowledge of methods and techniques for educating client about the therapeutic process.
116. Develop measurable objectives to facilitate treatment goals.	74. Knowledge of the components of a treatment or service plan for each phase of the therapeutic process.
153. Select therapeutic interventions by evaluating presenting problem in conjunction with treatment goals.	107. Knowledge of methods for determining service priorities by evaluating level of impairment in areas of client functioning.
165. Identify client and therapist values that impact the therapeutic process to direct the treatment approach.	117. Knowledge of methods for determining the timing of interventions according to phase of therapy.
177. Select treatment modalities based on client needs, diagnosis, and assessment.	128. Knowledge of methods for prioritizing symptoms to determine target areas for improving client functioning.
189. Develop preliminary termination plan to provide a structure for treatment.	150. Knowledge of techniques and procedures for engaging the client in the mutual development of treatment goals and objectives.
201. Develop preliminary termination plan with client to maintain therapeutic progress after treatment has ended.	180. Knowledge of culturally competent interventions to provide services to diverse populations.
223. Provide client education about the therapeutic process to promote client’s self-determination.	184. Knowledge of procedures for determining how to manage aspects of the therapist’s value system that potentially impacts therapy.
235. Prioritize interventions according to applicable phase of treatment and client’s preparedness to work with the therapeutic issues involved.	198. Knowledge of strategies for determining therapeutic goals to direct treatment.
	210. Knowledge of techniques for integrating client’s current experiences, values, and belief systems into the treatment plan.
	217. Knowledge of the differential use of psychotherapeutic techniques in treating problems or disorders.
	232. Knowledge of techniques for determining compatibility of treatment modalities with specific problems or disorders.
	245. Knowledge of methods for developing short- and long-term treatment objectives to address therapeutic problems.

3A Identify/Prioritize Objectives, Goals and Methods of Treatment continued

III. Treatment Plan Development (11%) – This area assesses the candidate’s ability to develop a culturally relevant treatment plan based on assessment and diagnostic information. The treatment plan includes a definition of the problem, measurable goals and objectives, and clinical interventions consistent with the client’s readiness for, and ability to engage in treatment, and relevant to the phases of therapy.

Tasks	Knowledge
	255. Knowledge of methods for determining length of therapy based on diagnosis and client’s goals for treatment. 272. Knowledge of the components of individual treatment plans to provide for clients with special needs. 285. Knowledge of techniques and procedures for engaging client’s on-going participation in the therapeutic process.
3B Treatment Plan Development: Integrate / Coordinate Concurrent Treatment Modalities and Adjunctive Resources	
71. Collaborate with physician/psychiatrist regarding the effects and contraindications of psychotropic drugs to maximize therapeutic effectiveness with clients. 83. Coordinate with other care providers in the development of an individual treatment plan. 95. Determine need for referral to adjunctive treatment resources to support the treatment plan. 117. Evaluate need for a treatment program based on severity of substance abuse and impairment to client functioning. 141. Evaluate efficacy of collateral support systems for inclusion in treatment plan. 190. Implement therapeutic techniques congruent with client’s racial, cultural, country of origin, gender, sexual orientation, marital status, or level of ability to provide treatment.	62. Knowledge of the dynamics of working across disciplines in developing comprehensive and integrated treatment. 84. Knowledge of methods for accessing and coordinating multiple interventions across disciplines. 95. Knowledge of methods for incorporating collateral support systems in therapy. 127. Knowledge of techniques for combining treatment modalities in treating specific problems or disorders. 138. Knowledge of the effect of psychotropic medications on therapeutic interventions. 194. Knowledge of methods for integrating mainstream, complimentary, and alternative treatment modalities that are consistent within the framework of the client’s cultural identity, beliefs, and values into treatment.
3C Treatment Plan Development: Monitoring, Evaluation and Revision of Treatment Plan	
5. Determine effectiveness of therapeutic interventions by evaluating progress toward treatment objectives. 18. Prepare for termination with client by reviewing progress attained. 31. Develop termination plan with client to maintain therapeutic progress after treatment has ended. 44. Elicit information from collateral resources to assist in evaluating treatment efficacy. 58. Adjust treatment plan and interventions as indicated by client’s changing needs and goals.	18. Knowledge of techniques for re-engaging mandated, resistant, and noncompliant clients in treatment. 29. Knowledge of methods and procedures for formulating an after-care plan. 51. Knowledge of methods for assessing qualitative and quantitative therapeutic change. 73. Knowledge of methods for consolidating therapeutic gains to facilitate and maintain client’s achievements outside therapy. 106. Knowledge of methods for evaluating and monitoring treatment plan to ensure consistency with changing client goals and needs. 116. Knowledge of methods for formulating behavioral indicators to measure and evaluate therapeutic change.
3C Monitoring, Evaluation and Revision of Treatment Plan continued	

III. Treatment Plan Development (11%) – This area assesses the candidate’s ability to develop a culturally relevant treatment plan based on assessment and diagnostic information. The treatment plan includes a definition of the problem, measurable goals and objectives, and clinical interventions consistent with the client’s readiness for, and ability to engage in treatment, and relevant to the phases of therapy.

Tasks	Knowledge
<p>129. Establish collaborative alliance with agencies, caregivers, placement settings, and other community resources to develop support services commensurate with client needs.</p> <p>178. Conduct initial and on-going review of therapeutic alliance to assist client engagement in therapy.</p> <p>215. Determine evaluation criteria to monitor progress toward goals and objectives.</p>	<p>174. Knowledge of changes in client functioning that indicate readiness to terminate therapy.</p> <p>224. Knowledge of procedures for evaluating therapeutic change in preparation for termination.</p> <p>260. Knowledge of methods and procedures for accessing and coordinating interventions across disciplines in an after-care plan.</p>

IV. Resource Coordination (9%) – This area assesses the candidate’s ability to coordinate linkages and provide access to resources, and to evaluate the efficacy of the referrals.

4A Resource Coordination: Service Identification and Coordination	
Tasks	Knowledge
6. Coordinate with community sources to facilitate outreach to transient and homeless clients.	6. Knowledge of criteria for determining least restrictive environment to provide for care and safety of client.
19. Evaluate suitability of community resources to provide supportive services commensurate with client needs.	39. Knowledge of methods for identifying and incorporating community support systems and resources that are consistent with client’s beliefs and values.
109. Evaluate suitability of current and prospective caregivers to provide supportive services commensurate with client needs.	61. Knowledge of types of placements available for the short- and long-term care of clients of differing levels of care.
142. Coordinate with other professionals, service providers, and other community resources to establish linkages for outreach services.	94. Knowledge of methods for evaluating conditions in the home to determine need for additional services.
154. Gather information regarding cultural community networks to identify resources and sources of support.	156. Knowledge of methods and procedures for facilitating client’s transition to a less restrictive setting.
166. Coordinate access to therapeutic or community programs to facilitate client’s transition into the community.	162. Knowledge of methods for identifying community support services that meet client needs.
202. Evaluate client’s current needs and prognosis for change to assist in determining least restrictive placement environment.	168. Knowledge of methods for evaluating the suitability of a caregiver and the home or placement for providing services addressing client’s current or prospective needs.
216. Collaborate with other providers and community specialists to identify resources.	206. Knowledge of methods for identifying and incorporating community support systems and resources relevant to the client’s culture, background, beliefs, and values.
221. Determine need for outreach and/or field visits in order to evaluate how health, safety, and welfare issues are affecting treatment.	244. Knowledge of the methods involved in establishing a liaison with community resource providers.
229. Coordinate linkages with support systems and services to facilitate access by client.	265. Knowledge of methods for evaluating client’s ability to access support services and treatment sources.
	274. Knowledge of federal, state, local, and public and private social services that provide assistance with meeting client’s basic needs.
	282. Knowledge of methods for identifying and incorporating community support systems and resources for transient and homeless clients.
	287. Knowledge of criteria for evaluating the level of care of a prospective or current placement to meet client’s needs.
	289. Knowledge of methods for incorporating a multidisciplinary team approach to treatment.

IV. Resource Coordination (9%) – This area assesses the candidate’s ability to coordinate linkages and provide access to resources, and to evaluate the efficacy of the referrals.

4B Resource Coordination: Client Advocacy and Support	
Tasks	Knowledge
32. Advocate within the community for the creation or enhancement of support services to meet client needs.	17. Knowledge of methods and procedures for enhancing or developing new services within the community.
45. Educate community resources about how to best meet client needs within the framework of the individual needs, culture, beliefs, and values of the client.	50. Knowledge of methods for increasing client's ability for self-advocacy.
59. Facilitate integration of client back into the community by providing psychoeducation to service providers and community members.	72. Knowledge of methods for evaluating the usage and efficacy of referral sources.
72. Advocate with institutions and organizations, including within the legal or judicial system and within medical and healthcare institutions, to improve service delivery and to protect client rights.	83. Knowledge of standards, laws, and regulations regarding housing, accessibility, employment, and equal opportunity to protect client’s rights.
84. Educate client about how to access support services including access to legal advocacy to support client’s rights.	105. Knowledge of criteria for evaluating safety of client placement.
96. Implement interventions and referrals that increase the client's ability to more independently access services related to housing, medical care, employment, transportation, and the provision of basic needs.	115. Knowledge of laws, statutes, and regulations relating to residential placement.
110. Consult with other professionals and referral sources to discuss the client’s progress and to evaluate the on-going effectiveness and accessibility of resources.	126. Knowledge of advocacy methods for increasing client’s access to needed resources.
118. Advocate with community resources related to housing, education, and the provision of basic needs to improve service delivery and to protect client rights.	136. Knowledge of methods for providing psychoeducational services to the client.
130. Engage client in the mutual exploration and identification of future resources as the client's needs change.	220. Knowledge of the benefits of psychosocial education to clients and their families about the nature of mental disorders.
155. Monitor services provided by agencies, caregivers and placement settings to evaluate whether the needs of the client are being met.	252. Knowledge of methods for providing psychoeducational services to community service providers.
179. Advocate for protective placement to assist client with leaving a dangerous or unsafe environment.	
191. Engage client in the mutual evaluation of the on-going effectiveness and accessibility of resources.	

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

5A Therapeutic Interventions: Crisis Intervention	
Tasks	Knowledge
<p>7. Implement techniques to assist client’s exploration of options to increase adaptive functioning.</p> <p>143. Assist client to modify environment to promote stabilization.</p> <p>167. Evaluate nature and severity of current crisis to determine intervention strategy.</p> <p>203. Implement techniques to assist client to verbalize source of crisis.</p> <p>225. Assist client to manage emotions associated with traumatic event to facilitate client’s resolution of crisis.</p> <p>241. Identify client’s level of functioning prior to crisis to establish goals for postcrisis functioning.</p> <p>243. Develop a stabilization plan with client in crisis to prevent further decompensation.</p>	<p>28. Knowledge of methods for implementing strategies and interventions with clients in emergency situations.</p> <p>190. Knowledge of the effect of crisis on emotional and psychological equilibrium.</p> <p>213. Knowledge of counseling techniques to assist client in crisis to regain emotional balance.</p> <p>230. Knowledge of transitional crises created by immigration and acculturation.</p> <p>238. Knowledge of intervention strategies to reduce self-destructive and/or self-injurious behavior.</p> <p>268. Knowledge of crisis intervention techniques to provide immediate assistance to client.</p> <p>284. Knowledge of the psychological characteristics and emotional reactions to crisis events or trauma.</p> <p>290. Knowledge of therapeutic techniques for improving adaptive functioning of client in crisis.</p>
5B Therapeutic Interventions: Short-term Therapy	
<p>20. Apply a problem-solving approach in therapy for treating the problem as it impacts the client’s current functioning.</p> <p>33. Instruct client in techniques for increasing rational thought processes to enhance client’s problem-solving and decision-making ability.</p> <p>46. Implement interventions for facilitating the client’s ability to identify the interrelationship between past events and current behaviors.</p> <p>60. Provide psychoeducation about loss and stages of grieving process to facilitate client’s normalization of feelings and experiences.</p> <p>73. Assist client with identifying and expressing feelings to move through the stages of grief and loss.</p> <p>85. Provide psychoeducation about normal reactions to stress to assist client with managing transitional life issues.</p> <p>97. Facilitate client’s coping and planning strategies for addressing issues associated with major life events/potentially life-changing events.</p>	<p>5. Knowledge of methods and interventions for increasing client’s ability to manage stressors resulting from changes in life circumstances.</p> <p>38. Knowledge of the intervention models for Brief Therapy and their indications and contraindications for use.</p> <p>82. Knowledge of techniques and procedures for implementing interventions using a Brief Therapy model.</p> <p>163. Knowledge of the effect of client’s prior coping patterns and life experiences on adjustment to trauma.</p> <p>199. Knowledge of the stages of loss and grief.</p> <p>266. Knowledge of counseling techniques to assist survivor of trauma to work through feelings associated with the experience.</p> <p>270. Knowledge of the effect of patterns of interpersonal relations on ability to maintain social relationships.</p>

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

5B Therapeutic Interventions: Short-term Therapy	
Tasks	Knowledge
119. Assist client to identify precursors to relapse to facilitate joint development of a relapse prevention plan.	
156. Apply a treatment plan for accomplishing symptom reduction using a brief therapy model.	
5C Therapeutic Interventions: Therapy for Children and Adolescents	
1. Determine baseline levels of maladaptive behaviors to measure therapeutic change.	16. Knowledge of methods for preventing relapse with child/adolescent client in recovery.
4. Implement interview techniques consistent with child’s cognitive development.	27. Knowledge of common psychological reactions related to biological changes of adolescence and young adulthood.
8. Select age-appropriate interventions to facilitate child’s understanding of the presenting problem.	49. Knowledge of counseling techniques for dealing with physical, emotional and psychological issues that contribute to substance use and abuse.
21. Select interventions congruent with child’s cultural identity to facilitate child’s engaging in therapy.	60. Knowledge of methods and techniques to identify source of resistance to treatment
34. Assist child to develop coping strategies to facilitate adjustment to changes in life circumstances.	71. Knowledge of methods and techniques for assisting client with achieving goals of individuation associated with age and psychosocial stages of development.
47. Assist adolescent to become aware of shifting emotional states to develop adaptive coping strategies.	93. Knowledge of counseling techniques to facilitate client’s recognition of emotional and psychological sources of anger.
61. Provide psychoeducation to parents/caregivers to enhance their understanding of the developmental process of the adolescent entering adulthood.	104. Knowledge of counseling techniques for children and adolescents to assist client’s psychological adjustment to sexuality issues.
74. Provide psychoeducation to adolescents regarding developing healthy, reciprocal peer relationships.	114. Knowledge of behavior management interventions which reduce disruptive behavior in a variety of environments.
86. Assist adolescent to clarify how past traumatic incidents may impact current perceptions, feelings, and behaviors.	125. Knowledge of the principles of learning theory to explain the acquisition of behaviors.
98. Provide training to children and adolescents in self-initiated strategies for managing the impact of stressors on thoughts and feelings.	137. Knowledge of intervention methods for treating substance dependency.
111. Implement therapy techniques with client to address the issues or emotions underlying aggressive behavior.	147. Knowledge of behavioral and emotional responses in children resulting from parental separation or divorce.
131. Provide social skills training to modify maladaptive interpersonal behavior in order to improve client’s ability to develop and maintain relationships with others.	151. Knowledge of developmental theories and their application to children and adolescents in a clinical setting.

5C Therapeutic Interventions: Therapy for Children and Adolescents

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

Tasks	Knowledge
<p>132. Develop child/adolescent client's awareness of the need for emotional and physical boundaries to promote client's sense of self as a separate entity.</p> <p>144. Provide counseling to adolescent client to deal with issues associated with the biological, psychological, and social transition from childhood to adulthood.</p> <p>157. Address adolescent's body image distortions to develop a reality-based perception of the physical self.</p> <p>168. Provide supportive therapy to client experiencing gender identity or sexual orientation issues to facilitate client's psychosocial adjustment.</p> <p>180. Provide assertiveness training to promote client's self-esteem and self-confidence.</p> <p>192. Determine antecedents of client's maladaptive behaviors by identifying the internal and/or external stimuli leading to the undesired responses.</p> <p>204. Provide therapy involving structured task completion to improve child's ability to focus on specific tasks.</p> <p>230. Provide parenting skills training to improve parents/caregivers' ability to care for children.</p> <p>231. Instruct children and adolescents regarding self-control techniques to promote awareness of the consequences of their actions.</p> <p>232. Provide psychoeducation to child/adolescent client about the physical and psychosocial effects of substance use to promote resistance to continued substance usage.</p>	<p>157. Knowledge of techniques for increasing attention span by modifying child's environment.</p> <p>169. Knowledge of the effect of culture, ethnicity, and socialization on development of role identification and expectations in children and adolescents.</p> <p>175. Knowledge of factors that affect client adjustment during emancipation process.</p> <p>189. Knowledge of developmentally appropriate therapeutic techniques for treating children and adolescents.</p> <p>203. Knowledge of therapeutic techniques to decrease violent or aggressive behavior.</p> <p>209. Knowledge of the effect of gender role expectations and stereotypes on child and adolescent development.</p> <p>216. Knowledge of the developmental stages of defining sexual identity and preference.</p> <p>225. Knowledge of the physical and psychosocial effects of substance use on children and adolescents.</p> <p>235. Knowledge of methods and techniques for providing psychoeducation to parents and caregivers of children and adolescent clients.</p> <p>246. Knowledge of types of learning disabilities that impede academic performance.</p> <p>277. Knowledge of effect of cultural, racial, and ethnic values and beliefs on behavior of children and adolescents.</p> <p>291. Knowledge of the effects of racism and discrimination on development of self-concept.</p>
<p>5D Therapeutic Interventions: Therapy for Adults (Individual and Group)</p>	
<p>2. Facilitate group process so clients can derive the maximum benefit from the experiences of peers.</p> <p>35. Apply nondirective approach to therapy by following the client's lead to permit change to occur at client's pace.</p>	<p>4. Knowledge of the relationship of the positive effects of physical and cognitive activity on functioning in later adulthood.</p> <p>15. Knowledge of theories of group dynamics.</p>

5D Therapy for Adults (Individual and Group) continued

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

Tasks	Knowledge
<p>48. Apply therapeutic techniques to integrate thoughts, feelings, and actions to assist client to achieve congruence of self.</p> <p>62. Provide psychotherapy to survivor of abuse to reduce the impact of the experience.</p> <p>75. Teach client anger management techniques to increase client’s ability to manage aggressive impulses.</p> <p>87. Provide psychotherapy to client with substance abuse problem to facilitate client’s ability to address the contributing factors and dynamics of substance abuse.</p> <p>99. Provide supportive therapy to elderly clients and their families to facilitate their ability to address the physical and psychological effects of the aging family member(s).</p> <p>112. Instruct client in environmental modification techniques for limiting stimuli that elicit undesired behaviors and increasing stimuli that elicit desired behaviors.</p> <p>120. Conduct symptom management training with psychiatric client to minimize effect of disorder on functioning.</p> <p>121. Provide psychoeducation for family members to facilitate treatment compliance of client.</p> <p>133. Teach client conflict management skills to increase client’s ability to reach suitable resolutions in disputes.</p> <p>145. Implement psychodynamic techniques to assist client with bringing preconscious processes into conscious awareness.</p> <p>158. Provide psychoeducation regarding stages of the life cycle to normalize client’s experiences.</p> <p>169. Instruct client in techniques to generate rational thoughts and attitudes to assist development of adaptive behaviors.</p> <p>170. Implement techniques for motivating client to attend substance treatment programs.</p> <p>181. Assist client to identify cognitions that maintain maladaptive behavior.</p> <p>193. Provide supportive therapy to psychiatric client to increase compliance with medical and pharmacological interventions.</p>	<p>26. Knowledge of cognitive restructuring techniques to change maladaptive thought patterns.</p> <p>37. Knowledge of the relationship between interpersonal interactions and social functioning.</p> <p>48. Knowledge of the effect of cognition on interpretation of behavioral responses.</p> <p>59. Knowledge of the biological, social, and psychological aspects of mental illness and emotional functioning.</p> <p>70. Knowledge of sexual dysfunctions that indicate need for specialized services.</p> <p>81. Knowledge of methods and techniques for conducting group psychotherapy.</p> <p>92. Knowledge of the biological, social, and psychological aspects of aggression.</p> <p>103. Knowledge of methods and techniques for providing psychoeducation to individual clients and groups.</p> <p>113. Knowledge of the effect of gender role expectations and stereotypes on adult psychosocial functioning.</p> <p>124. Knowledge of stress management techniques to reduce anxiety or fearful reactions.</p> <p>135. Knowledge of interventions and techniques for assisting client with managing own anger and aggression.</p> <p>146. Knowledge of therapy methods and techniques to assist client with adjusting to the effects of racism and discrimination.</p> <p>179. Knowledge of psychodynamic techniques for resolving emotional conflict or trauma.</p> <p>183. Knowledge of methods for implementing desensitization techniques to reduce client symptoms.</p> <p>188. Knowledge of techniques to assist client to adjust to physical, cognitive, and emotional changes associated with the aging process.</p> <p>195. Knowledge of the effects of unconscious processes on behavior.</p> <p>207. Knowledge of the protective function of defense mechanisms against anxiety.</p>
<p>5D Therapy for Adults (Individual and Group) continued</p>	

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

Tasks	Knowledge
<p>194. Conduct psychoeducational groups for medication education and compliance to facilitate symptom stabilization.</p> <p>205. Implement techniques to assist client to generalize successful behaviors to new situations.</p> <p>213. Implement techniques for increasing client’s awareness of how past experiences have influenced present life patterns.</p> <p>222. Apply systems approach in therapy to determine impact of interactions between the person and the environment.</p> <p>236. Confront client’s inappropriate and/or antisocial behavior to provide opportunities for change.</p> <p>247. Implement techniques for increasing client’s awareness of own defense mechanisms to assist client with recognizing problematic thoughts, emotions, and consequences.</p> <p>249. Teach client relaxation skills to increase client’s ability to manage symptoms of anxiety.</p>	<p>221. Knowledge of the application of experiential techniques to assist client to achieve treatment goals.</p> <p>227. Knowledge of methods and techniques for teaching client self-implemented therapeutic techniques as part of the treatment process.</p> <p>241. Knowledge of the concept of insight in successful resolution of past trauma or conflict.</p> <p>254. Knowledge of the biological, social, and psychological aspects of substance use and addiction.</p> <p>273. Knowledge of therapeutic techniques for increasing client’s feelings of self-worth.</p> <p>278. Knowledge of methods for assessing maladaptive functioning in interpersonal relationships.</p> <p>280. Knowledge of the impact of cultural, racial, and ethnic values and beliefs on adult behavior.</p> <p>288. Knowledge of the effect of events in client’s past on current experiences.</p>
<p>5E Therapeutic Interventions: Therapy for Couples</p>	
<p>10. Implement communication techniques with couples to promote mutual disclosure and discussion.</p> <p>23. Identify strategies couples can implement to balance external responsibilities with personal relationship.</p> <p>36. Implement therapeutic techniques to establish or strengthen individual roles and identities within the couple relationship.</p> <p>49. Provide counseling to couples considering separation or divorce to address issues of loss.</p> <p>63. Provide premarital counseling to assist couple’s transition to new family system.</p> <p>76. Educate clients about the stages of development of the couple relationship to normalize changes and transitions.</p> <p>88. Provide therapy and psychoeducation to couples to address issues of a blended family.</p> <p>100. Implement strategies to increase the safety the couple feels in the relationship.</p>	<p>3. Knowledge of the effect of incongruent goals of couples on therapeutic process.</p> <p>14. Knowledge of the effect of culture, ethnicity, and socialization on development of role identification and expectations in couples.</p> <p>25. Knowledge of techniques to increase intimacy within couple relationships.</p> <p>36. Knowledge of the aspects of relationships that result in problems or conflicts for couples.</p> <p>58. Knowledge of methods and techniques for facilitating a couple’s ability to address maladaptive relationship patterns.</p> <p>69. Knowledge of techniques to assist client to develop individual roles and identities within the couple relationship.</p>
<p>5E Therapeutic Interventions: Therapy for Couples continued</p>	
<p>Tasks</p>	<p>Knowledge</p>

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

<p>122. Assist couple to identify the relationship strengths on which effective coping strategies may be based.</p> <p>146. Identify patterns of interaction between the individuals within a couple to determine positive and negative impacts on the relationship.</p> <p>171. Teach conflict management skills to the individuals within a couple to increase the ability to reach suitable resolutions in disputes.</p> <p>182. Determine goal of couple’s therapy by evaluating each individual’s motivation.</p> <p>195. Assist nontraditional couples (same sex, mixed cultures, mixed ethnicity, and age differences) to identify specific needs and develop external support system and coping strategies.</p> <p>206. Implement techniques to increase the individuation of the individuals within a couple by establishing clear and permeable boundaries within systems.</p> <p>224. Assist clients to restructure interactions by reframing the couple’s perception of power structure within the system.</p> <p>240. Provide education regarding values identification and clarification to develop mutual acceptance, tolerance, and cohesion in relationship.</p> <p>244. Determine impact on the individuals within a couple of multigenerational interactional patterns by evaluating the history of family relationships.</p>	<p>80. Knowledge of the impact of communication and interactional styles on couple relationships.</p> <p>91. Knowledge of techniques for teaching conflict resolution and problem-solving skills with individuals in a couple.</p> <p>102. Knowledge of counseling techniques to assist couples with psychological adjustment to sexuality issues.</p> <p>112. Knowledge of methods and techniques for facilitating a couples’ ability to minimize the effects of external pressures on intimacy needs.</p> <p>123. Knowledge of the effect of gender role expectations and stereotypes on communication and partner expectations in couples.</p> <p>134. Knowledge of methods for identifying and implementing interventions for treating maladaptive functioning in couple relationships.</p> <p>145. Knowledge of issues resulting from dissolution of couple relationships.</p> <p>164. Knowledge of therapeutic methods to establish individual and system boundaries.</p> <p>176. Knowledge of the effect of unrealistic role assignments on couple relationships.</p> <p>257. Knowledge of the dynamics of the marriage/partner relationships that shape and change the relationship.</p> <p>286. Knowledge of methods and techniques for teaching couples how to improve their communication.</p>
<p>5F Therapeutic Interventions: Therapy for Families</p>	
<p>11. Provide information to clients regarding developmental stages of the family to facilitate understanding of family change.</p> <p>22. Implement strategies for changing disruptive interaction styles to strengthen family cohesion.</p>	<p>2. Knowledge of behaviors or reactions that indicate problematic separation or attachment issues.</p> <p>24. Knowledge of how cultural, racial, and ethnic values and beliefs affect behavior and expectations of family on family members.</p>
<p>5F Therapeutic Interventions: Therapy for Families continued</p>	
<p>Tasks</p>	<p>Knowledge</p>

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

24. Identify separation issues in parent-child relationship to promote age-appropriate individuation.	35. Knowledge of the effect of conflicting or inconsistent parenting styles on child’s level of functioning.
37. Identify transitional issues in parent-child relationship to promote age-appropriate differentiation.	47. Knowledge of methods for identifying interconnections and interdependence within social systems.
50. Mediate conflict regarding couple's parenting styles to effect consistency in child's environment.	57. Knowledge of the impact of the family's communication and interactional styles on the family members interpersonal dynamics and relationships.
64. Provide information and resources to parents regarding growth and development of children to increase understanding of child’s needs and progress.	68. Knowledge of parenting skills necessary to provide for care of children.
77. Model adaptive methods for relating to peers and siblings to improve child’s social functioning.	79. Knowledge of the effect of culture, ethnicity, and socialization on development of role identification and expectations in family groups.
89. Identify differences in multigenerational acculturation to determine source of value conflicts between family members.	90. Knowledge of the impact of cultural views regarding family structure and values.
101. Provide family therapy to achieve reunification goals.	111. Knowledge of the aspects of interpersonal relationships that result in problems or conflicts within family groups.
147. Apply family treatment strategies to strengthen parent/child relationships to minimize effect of separation or divorce.	122. Knowledge of therapy techniques to strengthen or reestablish family roles.
159. Develop family reunification goals by identifying changes that must be made to improve family functioning.	133. Knowledge of behavioral and emotional responses of family members resulting from parental separation or divorce.
183. Assist clients to clarify family roles to facilitate adjustment to new blended and/or nontraditional family structure.	144. Knowledge of the effect of differences in multigenerational acculturation on family structure and values.
207. Provide psychosocial information to families regarding environmental and biological components that impact development.	152. Knowledge of techniques to identify multigenerational transmission of patterns and interactions that impact client functioning.
214. Identify patterns of interaction among family members to determine sources of conflict.	158. Knowledge of techniques to educate children regarding the relationship between behavior and consequences.
226. Identify family of origin influences to understand impact on present family functioning.	170. Knowledge of the implications of family history for understanding its influence on current family functioning.
237. Identify family structure to clarify roles and boundaries of the family unit.	178. Knowledge of techniques to identify and clarify roles and expectations in blended family structures.
	200. Knowledge of different types of supportive services to strengthen family system.
	214. Knowledge of therapeutic interventions to improve family transactions.
	243. Knowledge of therapeutic techniques to increase individuation within existing system structures.
	246. Knowledge of the stages of developmental changes that occur within the family system.
	261. Knowledge of group process methods for improving patterns of communication between family members.

5F Therapeutic Interventions: Therapy for Families continued	
Tasks	Knowledge

V. Therapeutic Interventions (40%) – This area assesses the candidate’s ability to provide a range of therapeutic interventions specific to client needs consistent with the client’s socio-cultural context.

	<p>263. Knowledge of the concept of feedback as it relates to the adjustment of a system.</p> <p>269. Knowledge of the family life cycle that results in transitions and changes in status.</p> <p>275. Knowledge of techniques to identify different power bases within family structure.</p> <p>281. Knowledge of the concept of homeostasis in maintaining system structure and balance of power.</p>
<p>5G Therapeutic Interventions: Managing the Therapeutic Process</p>	
<p>123. Identify cultural help-seeking behaviors to understand ways by which client presents with psychological or physical problems.</p> <p>135. Provide unconditional positive regard by demonstrating genuine acceptance to assist client to develop a positive sense of self-worth.</p> <p>160. Implement strategies to address language barriers to facilitate client expression and understanding.</p> <p>172. Establish a supportive environment by providing unconditional positive regard toward client.</p> <p>196. Identify client and therapist values that impact the therapeutic process to direct the treatment approach.</p> <p>208. Identify countertransference to modulate impact on the therapeutic process.</p> <p>218. Implement strategies for facilitating client’s identification of own strengths to support own ability to achieve treatment goals.</p> <p>220. Implement strategies for incorporating aspects of client’s belief system into therapy to minimize barriers.</p> <p>227. Implement strategies for establishing and maintaining the therapeutic alliance during the course of treatment, functioning.</p> <p>233. Implement strategies to facilitate client’s awareness of the relationship between self-esteem and current</p> <p>238. Establish therapeutic alliance to assist client engagement in therapy.</p>	<p>13. Knowledge of the effect of unconditional positive regard in facilitating therapeutic effectiveness.</p> <p>46. Knowledge of the concept of countertransference as therapist’s reactions and feelings in response to client’s therapeutic issues.</p> <p>101. Knowledge of the concept of transference as an expression of unresolved issues.</p> <p>182. Knowledge of techniques for conveying empathy, interest, and concern within therapeutic context.</p> <p>202. Knowledge of methods and techniques for addressing the communication needs of clients with communication-related disabilities and/or English language communication needs.</p> <p>222. Knowledge of the stages of the client/therapist relationship and how it progresses over time.</p> <p>226. Knowledge of techniques for establishing a therapeutic framework with diverse populations.</p> <p>239. Knowledge of techniques to promote client engagement in therapeutic process.</p> <p>242. Knowledge of methods and techniques for increasing client’s acceptance of self as the agent of change in therapy.</p> <p>249. Knowledge of the effect of differences between therapist and client’s values on therapy process.</p> <p>251. Knowledge of the relationship between client sense of self-worth and client functioning.</p> <p>259. Knowledge of techniques for incorporating therapeutic use of self to maximize therapeutic alliance.</p>

VI. Legal Mandates (5%) – This area assesses the candidate’s ability to identify and apply legal mandates to clinical practice.

6A Legal Mandates: Protective Issues/ Mandated Reporting	
Tasks	Knowledge
<p>12. Report known or suspected abuse of a dependent adult client to initiate investigation by protective authorities.</p> <p>25. Evaluate whether client, if due to mental illness, is a danger to self or others, or is gravely disabled, to initiate protective involuntary hospitalization.</p> <p>38. Evaluate client and the content of therapy to identify holder of privilege.</p> <p>148. Report known or suspected abuse or neglect of a child to initiate investigation by protective authorities.</p> <p>184. Maintain client confidentiality by complying with legal guidelines regarding disclosure of privileged communication.</p>	<p>159. Knowledge of criteria for determining abuse, neglect, or exploitation of dependent adults.</p> <p>165. Knowledge of laws regarding privileged communication to protect client’s rights and privacy.</p> <p>171. Knowledge of laws regarding payment or acceptance of money for referral of services.</p> <p>177. Knowledge of reporting requirements regarding duty to warn when client indicates intent to harm others.</p> <p>193. Knowledge of components of a child abuse investigation interview.</p> <p>196. Knowledge of legal criteria for assessing grave disability of client to establish need for food, shelter, or clothing.</p> <p>215. Knowledge of laws regarding holder of privilege.</p> <p>228. Knowledge of legal requirements regarding the mandatory and discretionary reporting of suspected or known abuse.</p> <p>236. Knowledge of legal requirements for disclosing confidential material to other individuals, agencies, or authorities.</p>
6B Legal Mandates: Professional Conduct	
<p>51. Maintain boundaries with client by adhering to legal guidelines regarding sexual relations.</p> <p>65. Implement therapeutic techniques congruent with professional competence to provide services within scope of practice.</p> <p>78. Obtain client’s written permission to disclose privileged information to protect client’s right to privacy.</p> <p>90. Maintain client records in accordance with state and federal regulations.</p> <p>102. Provide “Professional Therapy Never Involves Sex” brochure to client when client discloses allegations of sexual misconduct in previous therapy.</p> <p>136. Disclose fees or the basis on which fees are computed for services to client prior to starting therapy.</p>	<p>12. Knowledge of laws which define the boundaries and scope of clinical practice.</p> <p>45. Knowledge of laws regarding disclosing fees for professional services.</p> <p>153. Knowledge of laws regarding advertisement and dissemination of information of professional qualifications, education, and professional affiliations.</p> <p>187. Knowledge of laws regarding sexual misconduct between therapist and client.</p>

VII. Ethical Standards for Professional Conduct (6%) – This area assesses the candidate’s ability to identify and apply ethical standards to clinical practice.

7 Ethical Standards for Professional Conduct	
Tasks	Knowledge
13. Provide client with reasonable notification and referral resources when treatment must be interrupted or terminated.	1. Knowledge of methods and conditions for communicating to client about acceptance of money or other payments for referral of services.
26. Disclose exceptions to confidentiality to inform client of limitations of privileged communication.	23. Knowledge of criteria for determining competency to practice.
39. Provide client with office policies, emergency procedures, and contact information to establish ground rules for the therapeutic relationship.	34. Knowledge of methods and conditions for disclosing fees for professional services.
52. Seek consultation before countertransference issues interfere with treatment.	56. Knowledge of business, personal, professional, and social relationships that create a conflict of interest within the therapeutic relationship.
66. Collaborate with other professionals when issues arise outside the therapist’s expertise.	67. Knowledge of therapist issues and conflicts that interfere with the therapeutic process.
124. Identify clinical issues outside therapist’s experience or competence to refer to other professionals for treatment.	78. Knowledge of ethical responsibility to provide client with information regarding therapeutic process and services.
149. Provide client with information regarding extent and nature of services available to facilitate client’s ability to make educated decisions regarding treatment.	89. Knowledge of the limits of confidentiality within the therapeutic framework.
161. Identify personal issues that interfere with provision of therapy that require consultation with or referral to other professionals.	100. Knowledge of ethical considerations and conditions for interrupting or terminating treatment.
173. Demonstrate professional competence by providing information to client regarding education, professional qualifications, and professional affiliations.	110. Knowledge of limitations of professional experience, education, and training to determine issues outside therapeutic competence.
185. Implement policies and therapeutic procedures that enhance client’s self-determination by providing services regardless of client’s race, culture, country of origin, gender, age, religion, socioeconomic status, marital status, sexual orientation, or level of ability.	121. Knowledge of methods and conditions for disclosing confidential material to other individuals, agencies, or authorities.
197. Maintain awareness of impropriety involving the offer, solicitation, or acceptance of money or other consideration for referral of services to avoid negatively impacting the therapeutic relationship.	132. Knowledge of ethical standards for providing services congruent with client’s race, culture, country of origin, gender, age, religion, socioeconomic status, marital status, sexual orientation, or level of ability.
	143. Knowledge of ethical responsibility to disclose limits of confidentiality to inform client of reporting requirements.

VII. Ethical Standards for Professional Conduct (6%) – This area assesses the candidate’s ability to identify and apply ethical standards to clinical practice.

7 Ethical Standards for Professional Conduct	
Tasks	Knowledge
209. Bill for services within the structure of the “fees for service” communicated to client prior to initiating treatment. 211. Identify own physical or cognitive impairments to determine impact on ability to provide professional services. 242. Maintain clear and professional boundaries with client to prevent dual/personal relationship that could negatively impact the therapeutic relationship.	

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