

Estimating the Effects of Children and Adolescent with Emotional and Behavioral Problems on Their Parents' Labor Market Outcomes

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Background: In the United States, psychiatric disorders in children and adolescents are widespread and interfere with their cognitive, social, emotional development, and functioning. These disorders place a considerable burden on children, families, schools, and communities. Societal costs of children mental disorders include early pregnancy, violence, criminality, educational underachievement, and substantial expenditures. In addition, children with mental disorders impose time and financial constraints on their family. As a result, parental work choices are negatively impacted in terms of their labor force participation, work hours, and wages. Therefore, because the earnings from the parent's work are a major source of financial resources available to the child, this situation would result in reduced ability to invest in the child's health and aggravate socioeconomic inequalities, especially for low income families. Previous studies in this area focus mostly on the effects of children's disability on their single parent, particularly their mother's work choices, and vary considerably in their sample size, and model specifications. This study emphasizes the effects of children's emotional and behavioral problems on their parental labor markets behavior while considering a range of family structures.

Aims: This study proposes to investigate how children with emotional and behavioral problems influence the labor force participation, work hours, and wages of their single mothers, compared to how having children with these problems influence the labor force participation of their married and cohabitating mothers.

Methods: I use data from 1997, 1999, 2001, and 2003 of the Panel Study of Income Dynamics (PSID) and the 1997 and 2002 Child Development Supplements (CDS I & II) for this analysis. I use a system of simultaneous equations to estimate the model parameters using a Full Information Maximum Likelihood (FIML) method. I use a bivariate probit specification for the dichotomous outcome measures: labor force participation and children's mental health status. I also use an estimation strategy that accounts for unobserved variables and endogeneity in the previous equations. Tobit and OLS regression models are used to estimate work hours and wages respectively, accounting for sample selection in the wage rate. Based on the theoretical framework, I expect to find that children with emotional and behavioral health problems have a negative effect on their single parent's decision to work, work hours, and wages relative to children with emotional and behavioral problems living with their married or cohabitating parents.

Implications: It is essential for policy makers and researchers to understand these effects because of the role the parent's income plays in shaping the child health, educational, and economic trajectories. This study aims to provide policymakers, employers, and parents with a better understanding of the mechanisms through which the child's mental illness influences the parent's ability to work. The results of this study might help policymakers and employers in implementing programs that address the needs of these families while rewarding work habits.

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Use of an Operational Model of Community Care to Assess Technical Efficiency and Benchmarking of Small Mental Health Areas in Spain

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Background: Little is known on the efficiency of mental health care in small health areas (SHA) particularly where care is organised in sectors and information is incomplete.

Aims of the Study: To develop an expert driven operational model of basic mental health community care and to use it to assess the technical efficiency of small health areas.

Method: Healthcare indicators, service availability and utilisation were explored in 12 SHA in Spain. A hybrid qualitative and quantitative method of knowledge management was used to develop an operational model of community care. It was used for qualitative rating of SHA and to design an standard input-oriented variable returns to scale-Data Envelopment Analysis (BCC-DEA) to assess technical efficiency in each area. The agreement between both strategies was tested via Intraclass Correlation Coefficient (ICC) and predictive validity.

Results: A model of community care based on 12 indicators of service availability and utilisation (residential and day care) was developed and used for qualitative rating of 12 SHA: One area was classified as efficient (benchmark), two as nearly efficient, two as uncertain and seven as inefficient. A nearly perfect ICC agreement was observed using 6 variables' DEA related to availability and use of acute and day care, and weighted non-acute hospital utilisation. The DEA model proved useful to detect inefficient areas

Discussion: The expert-driven model of community care was appropriate to test technical efficiency in Spain. A derived DEA model was tested and it can be applied to care decision, planning and benchmarking.

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Comparative Analysis of Drug Addicts Treated in Outpatient and Inpatient Units

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Background: Drug addiction is complex a socio-medical problem. Its development depends on specific social surrounding, and the family is of crucial significance. The range of treatment approaches to drug addiction offer different outcomes in regard to treatment itself and total costs.

Aims: The presentation main aim is to show some of the treatment specifics due to treatment settings and their cost-effectiveness aspects.

Methods: The inquiry is conducted over two groups of drug addicted patients aged between 14 and older during the period 2000 - 2006 treated residentially and in outpatient setting. The treatment