

Abstract

Background:

Asian American youth are the least likely to utilize mental health services (Garland et al. 2005). While this underutilization has been well-documented, there are no studies investigating the clinical condition and service utilization status of Asian American youth seeking to utilize services. The goal of this study was to compare demographic, clinical, and service utilization variables between Asian American and non-Asian American youth at the time of seeking service.

Methods:

Data was taken from approximately 1450 online service request forms from a multi-disciplinary, evidence-based community mental health agency with three clinics in the San Francisco Bay Area. Parents enter basic demographic information and a description of why they are seeking services. All entries for youth aged 18 years or younger were included in the analysis. Chi-Square tests were run to compare East Asian, South Asian and Non-Asian clients on the following variables: referral source, symptoms (internalizing, externalizing or autism spectrum via parent report), sex, age, violence history, already having a mental health provider, history of hospitalization and whether or not there were current school problems.

Results:

There were no differences in sex, history of hospitalization and already having a mental health provider between the three groups. There was a significant difference between groups in having current school problems (E. Asian 55/105 = 52.4% vs S. Asian 41/63 = 65.1% vs Non Asian 507/780 = 65.0%, chi-square = 6.43, p=.04). Presenting symptoms were also different between groups (Internalizing: E. Asian 68/91 = 74.7% vs Non Asian 596/932 = 64.0%. Externalizing: E. Asian 16/91 = 17.6% vs Non Asian 279/932 = 30.0%. Autism: E. Asian 7/91 = 7.7% vs Non Asian 57/932 = 6.1%. chi-square = 6.2 p=.045). Finally, there was also a significant difference in history of violence between groups (E. Asian 13/106 = 12.3% vs S. Asian 12/63 = 19.1% vs Non-Asian 182/780 = 23.3%, Chi-Square = 7.01, p=.03). For all positive results, the differences between East Asians and Non Asians were pronounced and in general there were no differences between South Asians and Non Asians. There were five different age categories on the request form including ages 0-3, 3-5, 6-11, 12-14, and 15-18. There was a significant difference, chi-square = 14.48 p=.025 between groups (see graph). This was mainly driven by differences in the older age groups. There were nine different referral source categories on the request form. These included school, primary care provider, other medical provider, mental health provider, hospital or emergency department, insurance, internet, friend or unknown. There was a significant difference, chi-square = 30.99 p=.014 between groups (see graph). This was mainly driven by differences in internet, primary care and mental health referral sources.

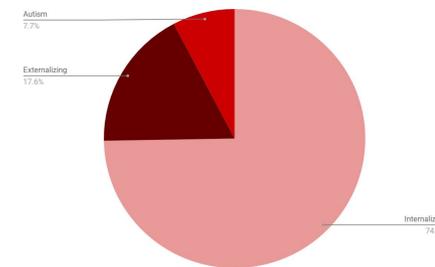
Conclusion:

The study highlights that condition and service utilization status differ between Asian and non-Asian youth seeking to utilize mental health services. East Asian youth were less likely to present with current school problems and history of violence. East Asian youth were more likely to present with internalizing disorders than Non Asian youth (and less likely to present with externalizing disorders). South Asian youth appeared to be less likely to present with school problems, violence, and more likely to present with internalizing disorders, though to a lesser extent than East Asian youth. East Asian youth appeared to seek services at an older age indicating the need for more psychoeducation and focus on early detection. Limitations of the study include the self-report nature of the surveys and this should be taken into account for future research. Future research would include investigation into the impact of other demographic factors on presentation including generation of immigration, country of origin, and financial status of families. These studies would help guide treatment and development of mental health services for purposes of early detection and intervention.

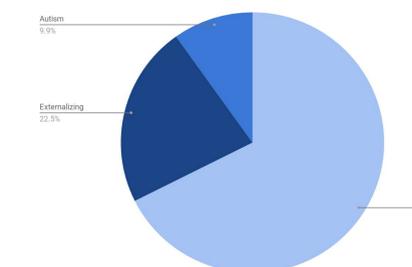
References:

Garland, A. F., Lau A. S., McCabe, K. M., Hough, R. L., Landsverk J. A. Racial and ethnic differences in utilization of mental health services among high-risk youths. The American Journal of Psychiatry, 162(3) (2015), 1336-43.

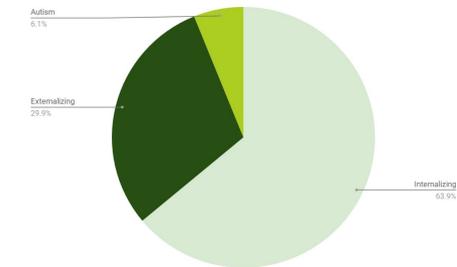
East Asian



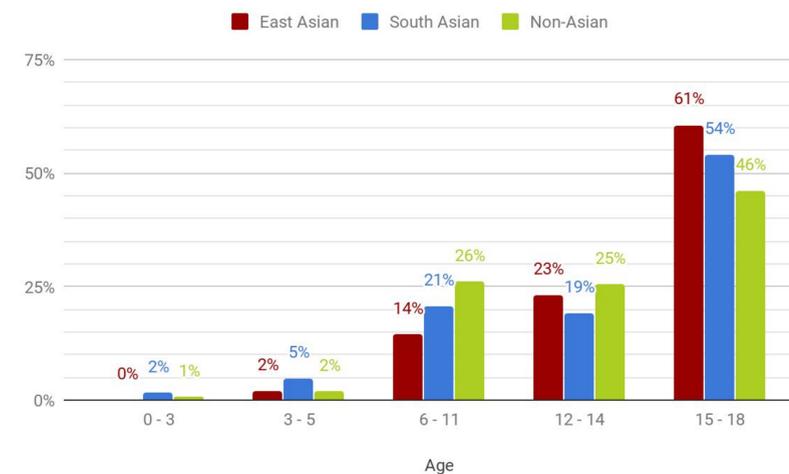
Types of Disorder by Ethnicity South Asian



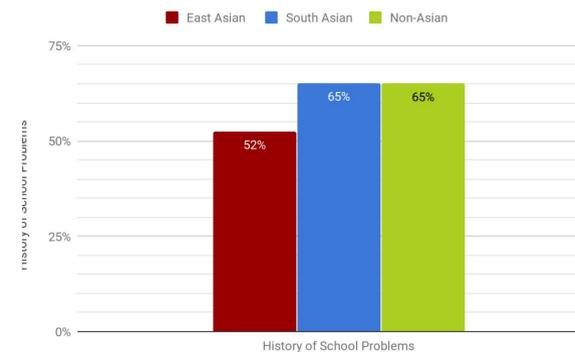
Non Asian



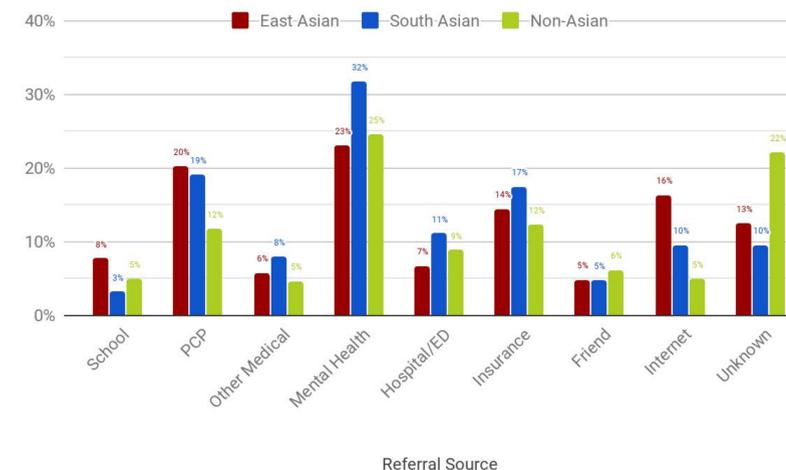
Age Distribution



School Problems



Referral Source



History of Violence

