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ABSTRACT

- Research is replete regarding the 50-80% increased rate of mental health disorders among foster youth
- A pattern of racial disparities exists among mental health utilization rates between African American youth compared to Caucasian youth.
- This study examines the relationship of attitudes held by African American foster youth and their mental health utilization, as they are rarely solicited about their mental treatment experience.
- This study is a secondary data analysis of the Service Assessment for Children and Adolescents (SACA) as well as the Attitudes Toward Seeking Professional Psychological (ATSPP) Help Scale.
- The sample consisted of 406 foster 16-17-year-old foster youth youth from 8 Missouri counties
- A series of chi-square tests were conducted
- Overall, the findings revealed that there was no significant correlation between the attitudes of mental health service and mental health service utilization by race/ethnicity

INTRODUCTION

SIGNIFICANCE OF STUDY:

- Child welfare agencies have simply been ill equipped to address foster youth's developmental needs and to access necessary and comprehensive referrals for early intervention services
- Efforts toward further investigation around the racial gaps and disparities that continue to permeate and segregate our services of care
- The attitudes of youth receiving such services are integral in providing high-quality care and should not be overlooked.

PURPOSE:

• Potentially uncover factors that contribute to the high rate of mental health underutilization and racial disparities among African American foster youth and uncover possible solutions to rectify the issue.

RESEARCH QUESTION:

• What differences exist among the attitudes of mental health services among African American foster youth compared to their white counterparts, and do these differences affect mental health utilization?

HYPOTHESIS:

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• African American foster youth will hold more negative attitudes toward mental health services compared to white foster youth, thus contributing to its underuse.

LITERATURE REVIEW

- Most states are not sufficiently meeting the psychological and behavioral needs of children who have been abused or neglected
- Of particular concern are the racial/ethnic disparities that exist within the child welfare system
- Non-Hispanic Whites have repeatedly been shown to receive mental health services at higher rates than their African American counterparts
- The lack of quality services have sparked an interest in obtaining consumer feedback as well as helped establish state level requirements in obtaining such information for quality improvement purposes
- Rarely do these solicitations offer foster youth an opportunity to provide their attitudes toward their mental treatment experience, rather their parents or caregivers are often surveyed instead.
- However, their perceptions are not accurate measures of mental health service quality, particularly because caregiver attitudes do not align with those of the recipients in question – foster youth.

The Relationship of Race/Ethnicity and Attitudes Toward Mental Health Service Use Among African American Foster Youth

METHODS

Research Design

- The secondary data for this project were collected from a longitudinal cohort design approved through the Washington University's Human Subjects Committee in St. Louis, Missouri
- Of the original 406 youth, 384 16 to 17-year-olds were identified as mental health consumers on the basis of self-reported experiences with mental health professionals and items from the Service Assessment for Children and Adolescents (SACA), which measure lifetime mental health service use
- The original study included nine waves, however only questions from the first wave (Index) are being used, which measured the youth's responses to openended questions about their attitudes toward seeking professional help for mental health problems are being used for this study.
- In addition, data regarding mental health service utilization also gathered during the first wave will be used.
- To identify frequencies of attitudes among all the foster youth, positive attitudes were measured by grouping those who responded "agree" and "strongly agree" to the ATSPP Help Scale.
- Similarly, negative attitudes were measured by grouping those who responded "disagree" or "strongly disagree." Percentages by each attitude type and within each race were added to calculate a mean.

Sample

- The current sampling frame used secondary data from a longitudinal cohort design containing 9 waves approved through the Washington University's Human Subjects Committee in St. Louis, Missouri
- The initial study employed purposive sampling as the participants selected were chosen based on their status as foster youth in the state of Missouri.
- The initial sampling frame examined many parameters of the lives of older youth in the foster care system; many of which are from their perspective, however the current study evaluated participants who responded "yes" to receiving mental health services
- In the sample used for the current study, there are 384 participants, 178 male (43.7%) and 228 female (56%). Ethnicity demographics for the participants are 206 African American (51%) and 178 White/Caucasian (44%).

RESULTS

- Relationship between mental health service utilization and race/ethnicity: A chi-squared test indicated that the relation between mental health utilization based on race was significant (X2 (1, N = 384) = 15.232, p < .01), with 62% of African American foster youth utilizing mental health services compared to 80% of white foster youth.
- Relationship between attitudes toward mental health services and race/ethnicity: A chi-squared test indicated four out of the nine items on the ATSPP Help Scale yielded significant differences in responses between both groups.
- Overall, all foster youth (without controlling for race/ethnicity) had a higher frequency of positive responses (56%) toward mental health services than negative responses (25%).
 - 1. No Faith: "although there are clinics and agencies for people with emotional and mental problems, I would not have much faith in them" (X2 (4, N = 384) = 15.033, p < .05).
 - 2. Advice from close friend: "I would rather be advised by a close friend than by a mental health professional, even for emotional problems" (X2 (4, N = 384) = 19.023, p < .01).
 - 3. Alone: "A person with an emotional problem is not likely to solve it alone" (X2 (4, N = 384) = 12.319, p < .05).
 - 4. Medication: "I think medication for emotional or behavioral problems can be helpful for many people (X2 (4, N = 384) = 12.568, p < .05).

Attitudes Toward Mental Health services	Race	(0) Strongly Disagre e	(1) Disagree	(2) Neither Agree nor Disagree	(3) Agree	(4) Strongly Agree	df	Chi- Square	Sig
No faith	AA White	21 7	42 33	47 54	70 75	26 9	4	15.033	.00**
Friend	AA White	19 12	47 35	37 38	89 78	14 15	4	2.078	.72
Not Worth Treatment	AA White	5 7	34 25	36 33	77 74	54 39	4	12.322	.15
Professional Attention	AA White	14 6	42 35	24 26	78 89	48 22	4	12.322	.15
Advice From Close Friend	AA White	33 32	64 63	27 43	60 35	22 5	4	19.023	.00**
Alone	AA White	6 4	52 23	29 35	86 95	33 21	4	13.319	.01*
Poor Idea	AA White	9 2	47 23	48 41	83 89	19 23	4	11.845	.19
Emotional Crisis	AA White	9 4	42 27	46 36	87 87	22 24	4	4.473	.35
Medication	AA White	33 16	38 20	42 35	74 92	19 15	4	12.568	.01*

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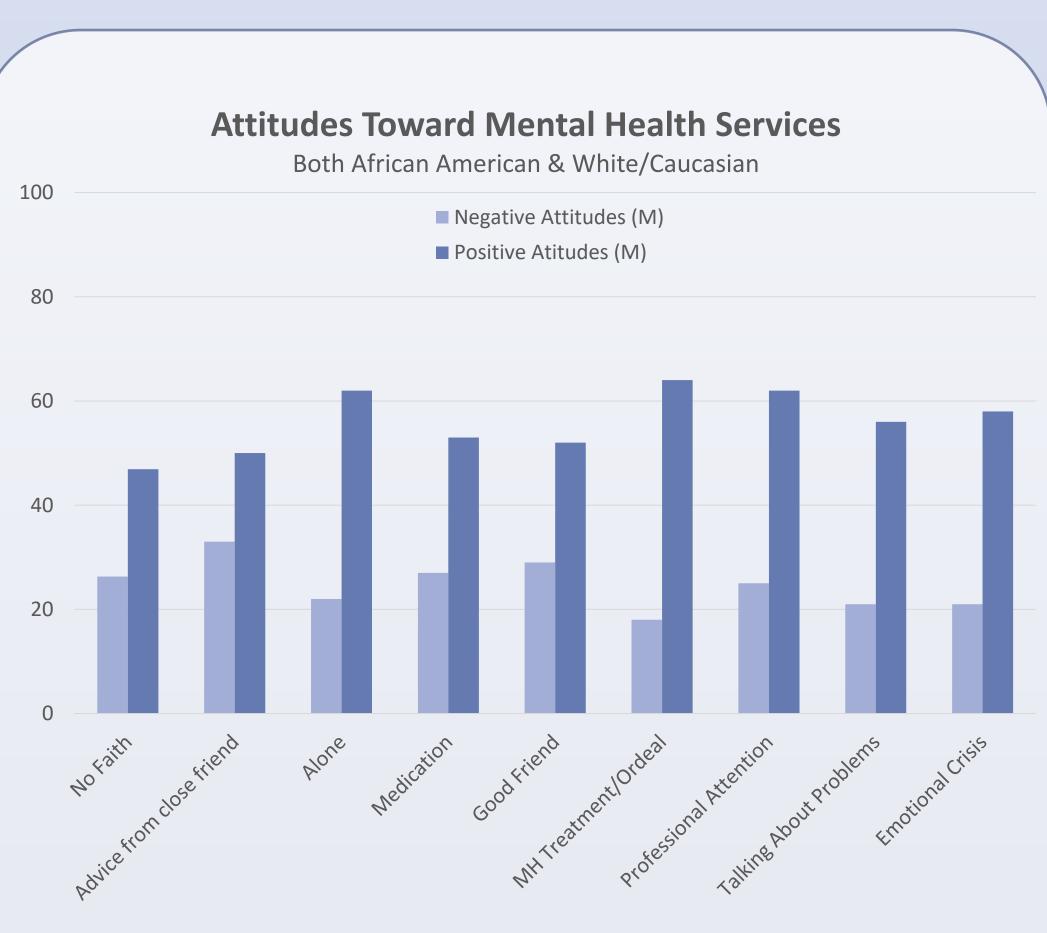
Measures

Independent Variable: African American Foster Youth

• Measured by using the data gathered in the original study where they had each youth self-identify their own race/ethnicity.

Dependent Variable: 1) Mental Health Utilization Rates Among African American & Caucasian Foster Youth and 2) Attitudes toward the mental health services

- Service Assessment for Children and Adolescents (SACA)
- Attitudes Toward Seeking Professional Psychological (ATSPP)
- Youth who responded "yes" to the item, "Have you ever received outpatient help (not overnight) from any professional like a psychologist, psychiatrist, social worker, or family counselor?"



- Using a sample containing youth from only one state's foster care system may not accurately represent mental health service provision in other systems across country.
- Relying on self-reported data may interfere with the internal validity of the study.
- The study also lacked the ability to capture more subjective and openended responses that could have solicited more background to answers provided

Implications for Further Research & Policy:

- More research on the other factors effecting mental health utilization patterns, such as assessing the power of bias as well as the psychosocial and sociocultural factors that influence the attitudes toward and use of mental health services.
- More research on how to adequately assess the quality of culturally appropriate mental health services adopted by the child welfare system
- Efforts made to systematically identify barriers preventing use can help fill the racial disparity gap and discover disparities within the child welfare system.

I wish to express my deepest gratitude to my fiancé, Mark. You gave me unconditional support for both my Bachelors and Masters degrees, and I could not have asked for a better cheerleader throughout this journey of mine. I will forever be appreciative of your patience, love, and encouragement.

DISCUSSION

Limitations:

• The sample of foster youth do not fully represent all foster youth in the system

• Future research should examine a broader range of informal and formal sources to better identify help-seeking patterns

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