


## Predictors of intake attendance for Asian American youth at an Asian-oriented ethnic-specific mental health program

Phillip D. Akutsu & Garyn K. Tsuru  
University of Michigan

Joyce P. Chu  
University of California, San Francisco


## Service use

- ✦ Lower use of mental health care
  - Facility type: Asian Americans < Whites
    - Community MH centers, hospital psychiatric emergency units, student counseling services, private therapists, self-help groups, etc.
  - Sample characteristics: Asian Americans < Other ethnic groups
    - Students & non-students, inpatients & outpatients, children & adults, or residence inside or outside Asian American communities
- ✦ 2001 Surgeon General Report
  - Seek professional help?
    - Only 17% of Asian Americans with a mental health problem sought help
    - Less than 6% contacted a mental health provider
  - Outpatient treatment
    - Only 1/3 the rate of Whites and 1/2 the rate of Blacks and Latinos




## Background

- ✦ Limited research on intake non-attendance
  - General samples
    - Intake non-attendance as high as 53%-58% for children, adolescents, & their families
  - Asian American samples
    - About 34% of Asian American children and youth failed to attend their intake appointment



## Operational definitions



- ✦ Asian American groups
  - East Asians: Chinese, Japanese, Korean, Filipino
  - Southeast Asians: Vietnamese, Lao, Cambodian, Hmong, Iu Mien
- ✦ Interview type
  - Prescreening interview: Phone interview usually with support staff
  - Intake interview: Face-to-face interview usually with clinical staff
- ✦ Ethnic-specific program
  - Special clinics with bilingual/bicultural Asian American staff and administrators

## Method

- ✦ Sample
  - 179 Asian American adolescent clients (Ages 12-17) in an Asian-oriented ethnic-specific mental health program
- ✦ Independent variables
  - Demographic variables
    - Gender, Age, English as primary language, Ethnicity (East vs. Southeast Asian)
  - Clinical variables
    - Previous mental health care
    - Number of presenting problems
    - Type of presenting problem: Depression, Behavioral/Oppositional, Family/Marital
  - Program variables
    - Prescreening interviewer: Need for earliest intake assignment
    - Prescreening interviewer: Gender Match, Language Match, Ethnic Match
    - Prescreening interviewer assigned as the intake therapist
- ✦ Dependent variable: Attendance of intake appointment

## Demographic, clinical, & program variables

| Variables                                   | Non-Attendees (n= 61) | Attendees (n= 118) |
|---|-----------------------|--------------------|
| Gender: Female                              | 42.60%                | 45.80%             |
| Age (in years)                              | 13.59 (3.38)          | 12.39 (3.56)*      |
| English as Primary Language                 | 45.90%                | 44.10%             |
| Ethnicity: East Asian                       | 45.90%                | 48.30%             |
| Previous Mental Health Care                 | 4.90%                 | 6.80%              |
| Number of Presenting Problems               | 1.74 (0.44)           | 1.63 (0.49)        |
| Depression                                  | 31.10%                | 33.90%             |
| Behavioral/Oppositional                     | 44.30%                | 38.10%             |
| Family/Marital                              | 22.80%                | 22.90%             |
| Need for Earliest Intake Assignment         | 26.20%                | 47.50%**           |
| Gender Match                                | 44.30%                | 48.30%             |
| Asian Language Match                        | 36.10%                | 47.50%             |
| Ethnic Match                                | 39.30%                | 55.10%†            |
| Prescreening Interviewer → Intake Therapist | 24.60%                | 44.90%**           |

† p < .10. \*p < .05. \*\*p < .01.

## Logistic regression: Predicting intake attendance

| Variable  | Odds Ratio        | 95% CI    |
|---|-------------------|-----------|
| Age   | 0.87*             | 0.78-0.97 |
| Need for the Earliest Intake Assignment                 | 2.46***           | 1.02-5.95 |
| Match with prescreening interviewer                     |                   |           |
| Gender Match  | 1.40              | 0.66-3.01 |
| Language Match  | 0.90              | 0.38-2.16 |
| Ethnic Match  | 2.37 <sup>†</sup> | 0.90-6.25 |
| Prescreening Interviewer Assigned as Intake Interviewer | 1.64*             | 1.14-2.35 |

Note: Overall correct classification = 68.7%.

<sup>†</sup>  $p < .10$ . \* $p < .05$ .

## Summary



- ✚ Significance of program factors
  - Decisions by clinic staff and mental health providers can impact intake attendance
- ✚ Implications
  - Staff training & education
    - Increase cultural responsiveness to service inquiries
    - Identify "gate-keeping" problems in early stages of treatment
  - Case management & continuity of care
    - Monitor effectiveness of program and staff management of early system response
    - Consider the importance of continuity of care