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Parents' and adolescents' perceived influences and barriers to mental health services

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**Parents' and adolescents' perceived influences
and barriers to mental health services**

A thesis presented in partial fulfilment of the requirements of the degree of
Doctor of Psychology (Clinical) at the University of Wollongong

Tim J. Wahlin

2007

Abstract

Many young people with mental health problems do not seek professional help and remain at risk of suicide and adult psychopathology. The present research investigates the barriers that impede the help seeking of parents and their children and the sources of influence that assist young people to access clinical services. Study 1 uses archival data from a recent survey of non-clinical samples of young people between 15-25 years of age who attended Technical and Further Education (TAFE) colleges ($n = 137$) or accessed neighbourhood centres ($n = 49$). Respondents completed measures of psychological distress, suicidal ideation, perceived help seeking barriers and intentions to seek professional help for personal-emotional problems and suicidal thoughts. In TAFE students, psychological and practical barriers were related to intentions to seek help for personal-emotional problems and thoughts of suicide. There was also a positive association between help seeking barriers and the level of suicidal ideation. In the youth centre sample, those in greater distress and therefore most in need, reported more obstacles to obtaining help. There was also evidence of help negation. Higher levels of suicidal ideation were associated with lower levels of intent to seek out professional help.

Study 2 examined the relative influence of parents and others on the decision of a young person to access professional help and the relative strength of the barriers faced by parents seeking help for their children. The sample comprised 122 parents and 131 adolescents who attended an initial clinical assessment interview with a Child and Adolescent Mental Health Service (CAMHS) in Sydney or the Illawarra region of New South Wales. Parents completed measures of help-seeking barriers and influences and the Strength and Difficulties Questionnaire (SDQ; Goodman, 1997). The adolescents completed a measure of help-seeking influences and the self-report SDQ (Goodman, Melzer, & Bailey, 1998).

Ninety-four percent of young people reported that others had influenced their decision to access help. Almost 87% were influenced by multiple sources but parents were the single strongest source of influence. Parents and children indicated that parents were more influential in the decision to seek help when there was greater disagreement between parent and child on the extent of the young person's overall and externalising difficulties on the SDQ. Positive relationships emerged between parent-rated influence

variables and parent scores on the Total Difficulties and Externalising SDQ scales. Youth-rated total and externalising difficulty scores were positively related to greater self-involvement in accessing help.

Parents rated the strongest barriers to accessing help as; help was too expensive, the wait was too long, not knowing where to get help, thinking that they could solve their child's problem without help and, their child not wanting help. The findings are consistent with contemporary process models that suggest help seeking is a social process and that young people in particular are highly dependent on parents to access help (Cauce et al., 2002; Logan & King, 2001). In addition, it highlights the need to better promote local services and in particular increase awareness that public services are no-fee. Providing parents and their adolescents with strategies for managing differences, in perceptions of problem severity, during the waiting period may reduce both the wait time barrier and effects of problem perception discrepancies on the social influence process.

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Table of Contents

Abstract	ii
Acknowledgements.....	iv
Table of contents.....	v
List of Appendices	ix
List of Tables	x
Overview	1
The scope of mental health problems among young people.....	2
Risk and protective factors in the development of mental health problems	2
Demographic influences on formal help seeking.....	3
Age.....	3
Gender.....	4
Psychological distress and formal help seeking.....	5
Help negation and formal help seeking	6
Youth barriers to formal help seeking	6
Study 1: Psychological distress, help negation and barriers to professional help	8
Aim	9
Hypotheses	9
Method	10
Participants and procedures	10
Measures	11
Barriers to help seeking	11
Psychological distress	12

Suicidal ideation.....	13
Help seeking intentions.....	13
Results.....	15
TAFE sample	15
Data screening.....	15
Data analysis	16
Youth Centre sample.....	19
Data screening.....	19
Data analysis	21
Comparison of TAFE and Youth Centre samples	22
Discussion	24
Limitations	26
Implications and future directions	27
Study 2: Barriers to help seeking and parental influence on pathways to care.....	28
Traditional models of help seeking behaviour.....	28
Contemporary models of help seeking behaviour	28
Influence of parents and others on young people accessing professional help.....	29
Parent influence and parent-child disagreement	31
Problem type	31
Psychological distress	32
Parent perceived barriers to professional help for young people.....	33
Aims	37
Hypotheses	37

Method 38

Ethical considerations 38

Participants..... 38

Procedures..... 39

Measures 40

Parent measures 41

 Strength and Difficulties Questionnaire..... 41

 Parent Help-Seeking Barriers and Influences Questionnaire..... 43

Youth measures..... 44

 Strength and Difficulties Questionnaire..... 44

 Youth Help-Seeking Influences Questionnaire 44

Results..... 46

Data screening..... 46

 Help seeking influences on youth attending CAMHS 46

 Perceived barriers, past help seeking and influences on
 parents attending CAMHS 48

 Parent and youth total SDQ difficulties and difference scores 50

Data analysis 50

 Influences on youth help seeking..... 50

 Influences on parents seeking help for young people 54

 Parent barriers to seeking help..... 56

 Parent-rated and self-rated youth difficulties..... 58

 Youth difficulties and parent influence on youth help seeking 59

Discrepancies in problem severity and perceptions of influence..... 62

Discussion 65

Influence of others on professional help seeking of young people..... 66

Parent influence on the professional help seeking of young people 67

 Parent influence and parent-child disagreement 68

Parent barriers to seeking professional help for young people 69

Implications..... 70

Limitations 72

Conclusions and future directions..... 73

References..... 75

Appendix I 86

Appendix II 90

List of Appendices

Appendix I 86

Study 1: Psychological distress, help negation and barriers to professional help

BASH-B 87

HSCL-21 88

SIQ 89

Appendix II 90

Study 2: Barriers to help seeking and parental influence on pathways to care

Parent information sheets..... 91

Parent consent form 93

Parent Help-Seeking Barriers and Influences Questionnaire..... 94

Parent SDQ 95

Youth information sheets..... 97

Youth consent form..... 99

Youth Help-Seeking Influences Questionnaire 100

Youth SDQ..... 101

List of Tables

Table 1. Means, standard deviations and Cronbach alpha reliability coefficients for barriers (BASH), psychological distress (HSCL), suicidal ideation (SIQ), professional help seeking intentions for a personal-emotional problem (PHS-PE) and professional help seeking intentions for suicidal thoughts (PHS-SUI) in a TAFE sample..... 17

Table 2. Correlations and standard multiple regression for barriers (BASH) and psychological distress (HSCL) variables on professional help seeking intentions for personal-emotional problems (PHS-PE) in a TAFE sample (n = 116)..... 18

Table 3. Correlations and standard multiple regression for barriers (BASH) and suicidal ideation (SIQ) variables on professional help seeking intentions for suicidal thoughts (PHS-SUI) in a TAFE sample (n = 113)..... 19

Table 4. Means, standard deviations and Cronbach alpha reliability coefficients for barriers (BASH), psychological distress (HSCL), suicidal ideation (SIQ), professional help seeking intentions for a personal-emotional problem (PHS-PE) and professional help seeking intentions for suicidal thoughts (PHS-SUI) in a youth centre sample..... 20

Table 5. Correlations and standard multiple regression for barriers (BASH) and psychological distress (HSCL) variables on professional help seeking intentions for personal-emotional problems (PHS-PE) in a youth centre sample (n = 43)..... 21

Table 6. Correlations and standard multiple regression for barriers (BASH) and suicidal ideation (SIQ) variables on professional help seeking intentions for suicidal thoughts (PHS-SUI) in a youth centre sample (n = 37)..... 22

Table 7. Barriers to accessing mental health services identified by young people, adults and parents with mental health problems in selected community and clinical samples... 35

Overview

The Australian nationwide survey of mental health and well-being involving 4,500 children and adolescents from 4-17 years old, found a high prevalence of mental health problems among young people in Australia (Sawyer et al., 2000). However, only 52% of the children and adolescents who were experiencing serious mental health problems had attended any treatment in the preceding six months (Sawyer et al., 2000). There are clear risks associated with untreated mental health problems. First, there is evidence that psychopathology in adolescence increases the risk of having a psychiatric disorder as an adult (Hofstra, van der Ende, & Verhulst, 2001). Second, having mental health problems can significantly increase a person's risk of suicide. Psychological autopsy studies have consistently shown that 90% of suicide victims in all age groups have had a psychiatric disorder (see Brent, 1995; Gould & Kramer, 2001; Graham et al., 2000). Mood disorders in particular have been implicated as a risk factor for suicide (Graham et al., 2000).

Many young people who may benefit are not seen by clinical services. Therefore, attention must turn to improving our understanding of the processes by which young people do reach clinical care. The present research addresses this need in two related studies. The first study uses archival data from TAFE students and a potentially more marginalised sample of young people accessing neighbourhood youth centres. This study aims to extend past findings on help negation and investigate the impact of level of psychological distress and perceived barriers on the intentions of young people to seek out professional mental health care. The second study involves young people from a clinical population and their parents. The influence of parents and others on the decision of young people to access professional help and the practical and psychological barriers faced by parents seeking help for their child are examined.