



Need for and actual use of mental health service by adolescents in the child welfare system

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Abstract

Although foster youth are at increased risk of mental illness, little is known about need for and actual use of mental health services by adolescents in the child welfare system. Analyzing a random sample of 113 foster youth in a large Midwest state, the author found that foster youth experienced severe mental health problems such as depression, anxiety and loss of behavioral/emotional control. In this study, need for services, as measured by the presence of a mental health problem, was only partially related to mental health services received. Logistic regression analyses indicated that four factors including anxiety, child abuse history, poor psychological well-being, and time in care were significantly related to mental health service use.

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1. Introduction

Child welfare studies examining the need for and use of mental health services have rarely focused on adolescent populations. Adolescence is a developmentally challenging time for all young people. During adolescence, individuals begin to develop an adult identity, the capacity for intimate relationships and adult role responsibilities (Erikson, 1980). While most adolescents successfully accomplish these developmental tasks and become self-sufficient members of society, for foster youth, adolescent developmental

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tasks could possibly lead them to increased mental health problems. Adolescents in out-of-home care are at higher risk of mental health problems because of child abuse and neglect, termination of relationships with biological parents, placement experiences, lack of preparation for independent living, and multiple family problems. In addition, foster youth with mental health problems are very likely to continue to have serious mental health problems when they leave state custody.

Studies suggest that foster youth with mental health problems continue to experience mental health problems in adulthood (Buehler, Orme, Post, & Patterson, 2000; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2002; Quinton, Rutter, & Liddle, 1986; Robins, 1966). However, there is little known about the degree to which the need for mental health services influences actual use of mental health services by older foster youth. Furthermore, most studies have focused on younger adolescents and children, and only recently has research attention been directed toward mental health problems of older foster youth who are “aging out” of care (Courtney et al., 2002; McDonald, Allen, Westerfelt, & Piliavin, 1996; McMillen & Tucker, 1999). The current study extends our knowledge about the mental health of older foster youth. It specifically examines mental health problems of foster youth and associated use of mental health services. In addition, this study examines some correlates of mental health service use. Practical recommendations and implications for both policy and future research are discussed.

2. Literature review

The need for mental health services among foster children is well established (Early & Moony, 2002; Farmer et al., 2001; Garland, Landsverk, & Lau, 2003; Leslie et al., 2000). Foster children suffer from psychological and emotional problems stemming from child abuse/neglect, separation from biological parents and placement instability (Chernoff, Risley-Curtiss, Combs-Orme, & Heisler, 1996; Courtney, Piliavin, & Grogan-Kaylor, 1995; Fanshel, Finch, & Grundy, 1990; Hulsey & White, 1989; Iglehart, 1994; Thompson & Fuhr, 1992). They also tend to experience cognitive delays that impede age-appropriate academic achievement and positive social relationships with peers (Clausen, Landsverk, Ganger, Chadwick, & Litrownik, 1998). Studies show that the estimated prevalence of mental health disorders in foster children ranges from 39 to 80 percent, which is higher than the rates of community samples of children that range from 14 to 25 percent (Leslie et al., 2000; Stiffman, Chen, Dore, & Cheng, 1997).

Research also suggests that children and adolescents in foster care are more likely to use mental health services (Garland et al., 2003; Iglehart, 1993). For example, reviewing case records of 252 randomly selected young people at age 17 or older, McMillen and Tucker (1999) identified that a large number of foster youth (44%) had experienced inpatient psychiatric care. The rates of mental health service use by foster children ranges from 14 to 56 percent (Garland, Landsverk, & Hough, 1996; Glisson, 1996; Takayama, Bergman, & Connell, 1994). Takayama et al. (1994) reported that a quarter of foster children (eight years old or younger) used mental health service in the State of Washington. More than half of children who were placed in the California foster care system used some type of mental health services in their first eight months of placement

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