Counseling Utilization by Asian American College Students  
Summary of Research Status  
Jin Kim, University of California Davis

The major purpose of this two-part study was to examine counseling utilization and non-utilization of racial/ethnic minority college students. Study 1 employed a retrospective, archival database of students utilizing university counseling services to examine the extent to which there were racial/ethnic differences in the types of problems and the clinical severity of those problems. Study 2 examined a sample of non-treatment-seeking college students with elevated levels of psychological distress, to understand what kinds of attitudinal or knowledge-related barriers may hinder help-seeking.

Progress of Study 1:
The archival dataset of counseling center clients examined individuals who utilized counseling services between July 1, 2008 and June 30, 2012. A total of 5,472 clients identified their race/ethnicity as being Asian American (38.9%), Latino/a (14.9%), and White/Caucasian American (46.2%). Other racial/ethnic minority groups could not be examined due to small sample sizes. In comparing differences in levels of initial severity across the three racial/ethnic groups using the Outcome Questionnaire 45 (OQ-45; Lambert et al., 2004), findings indicated a statistically significant racial/ethnic differences in distress scores using multivariate analysis of variance. Asian American students had higher distress scores in comparison to White American ($p < .001$) and Latino/a students ($p < .001$), whereas there was no significant difference between White American and Latino/a students. Based on an established cutoff score to indicate clinically significant distress, 70.1% of Asian American, 62.2% of Latino/a, and 57.0% of White American students were considered to be in the clinical range at intake. Chi-square tests examining differences in proportions indicated that these differences were statistically significant when comparing Asian American students to White American students ($p < .001$), and Latino/a students to White American students ($p < .05$). In terms of session count, across all racial/ethnic groups, the mean number of sessions was 4.0 ($SD = 3.8$). Initially there were no racial/ethnic differences in the mean number of sessions used. However, follow-up regression analyses controlled for level of distress at intake, and results indicated that Asian American students utilized fewer sessions of counseling in comparison to Latino/a and White American students ($p < .05$). Results of a logistic regression analysis also indicated that relative to White American students, Asian American students were 1.6 times more likely to terminate counseling after one session (odds ratio = 1.58, $p < .001$). There were no significant differences for Latino/a students in comparison to White American students. In terms of presenting concerns, the most common presenting concerns were academic concerns, anxiety, depression, interpersonal concerns, and issues related to identity. Currently, data is being analyzed to examine how these presenting concerns may vary across racial/ethnic groups. These initial findings are being prepared in manuscript form to be submitted to Cultural Diversity and Ethnic Minority Psychology.

Progress of Study 2:
This study particularly examined the phenomenon of underutilization of mental health services among Asian Americans, as this has been one of the most enduring mental health disparities.
Prior research shows that psychological distress is high among Asian American students but rates of services use remain low. Thus, the major purpose of this study was to examine what types of attitudinal and knowledge-related barriers hinder individuals from seeking help, when structural barriers (e.g., cost) are relatively controlled as is in a college campus. This study applied the Health Belief Model (Rosenstock, 1966) to theoretically understand why individuals in distress may not seek help, when there is in fact a need for services. Specifically, the study examined the extent to which functional impairment, mental health literacy, perceived benefits of help-seeking, and stigma related to help-seeking predict intentions to seek help among a sample of Asian American students and a comparison group of White American students who were experiencing elevated levels of psychological distress. Data were collected from 395 Asian American students and 261 White American students who qualify as having moderate mental distress as measured by the K6 (Kessler et al., 2002). Using multiple group analysis in a structural equation modeling framework, results indicated measurement invariance of the model across both racial/ethnic groups. Data are continuing to be analyzed, but initial analyses indicate that this model may be structural noninvariant. That is, different factors appear to account for non-help-seeking among Asian American and White American students. It appears that functional impairment and perceived benefits of help-seeking account for help-seeking intentions among White American students, whereas both aforementioned factors and help-seeking stigma relates to help-seeking intentions for Asian American students. Interestingly, mental health literacy appears to have no influence on help-seeking. As this study is part of my dissertation study, all analyses will be completed by June 2014.